SCANNED DEC 1 2 2018,

For Paperwork Reduction Act Notice, see the separate instructions DAA

		the Treasury ue Service	▶ Do not enter social security numbers on this form as it may be made ▶ Go to www.irs.gov/Form990 for instructions and the latest information	-	10	Open to P	
Δ			ndar year, or tax year beginning $07/01/17$, and ending $06/30/18$	30011			<u> </u>
<u>~</u>	Check if an		Name of organization	- D	Employer	identification number	
ñ	Address ch	ppicable	KNIGHTS OF COLUMBUS COUNCIL 710				
님			Doing business as		51-02	203504	
\sqcup	Name chai	nge	Number and street (or P O box if mail is not delivered to street address) Room/	suite E	Telephone		
	Initial return	m <u>L</u>	806 SOUTH 35TH STREET		<u>920-9</u>	901-9927	
ī	Final return		City or town, state or province, country, and ZIP or foreign postal code				
H	terminated		MANITOWOC WI 54220		Gross recei	pts \$ 3 C	<mark>,</mark> 435
닏	Amended	return F	Name and address of principal officer				Ѿ
Ш	Application	pending	PEYTON HAGERSTROM) Is this a group	return for su	bordinates? Yes	X №
			836 N 14TH STREET	Are all subord	linates includ	led? Yes	No
			MANITOWOC WI 54220	If "No, at	tach a list (s	see instructions)	
_	Tax-exem		501(c)(3) X 501(c) (8) ◀ (insert no) 4947(a)(1) or 527				
	Website			Group exempt	tion_number	>	
ĸ			X Corporation Trust Association Other ▶ L Year of fo			M Stale of legal demisit	e₩3
	art I		mary	1	/ 11	CLIVEL)
<u> </u>	T		ibe the organization's mission or most significant activities	UNITY	31		70
41		-	AIN FOCUS IS TO FOLLOW OUR FOUR PRINCIPLES OF CHARITY,	UNITY	NO	V 0 6 2018	IRS-OSC
ž	1		NITY, AND PATRIOTISM.	l m	""	V U 0 2010	16
Ĩ.	ł			i	5		JŒ.
Governance	2 0	Check this b	ox ► if the organization discontinued its operations or disposed of more than 25% of its	net assets	-UG:	DEN 115	Γ' ,
	3 N		oting members of the governing body (Part VI, line 1a)		3	169	, ;
•ජ ග	1		ndependent voting members of the governing body (Part VI, line 1b)		4	169	
Activities	1		r of individuals employed in calendar year 2017 (Part V, line 2a)		5	0	
ç	l		or of volunteers (estimate if necessary)		6	75	
ď	l		ed business revenue from Part VIII, column (C), line 12		7a	<u></u>	0
	1		d business taxable income from Form 990-T, line 34		7b		0
	B 1	vet uniterated	d business taxable income nom i om 950-1, inte 54	Prior Year	1.0	Current Year	<u> </u>
	8 0	Contributions	s and grants (Part VIII, line 1h)	3	,753	8,	,739
Revenue	ļ		vice revenue (Part VIII, line 2g)			·	0
į.	1	_	ncome (Part VIII, column (A), lines 3, 4, and 7d)	8	,119	10,	,866
å	1		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		, 680		,647
	1		e – add lines 8 through 11 (must equal Part VIII, column (A), line 12)		, 552		, 252
	1		similar amounts paid (Part IX, column (A), lines 1–3)		,590		,813
	1		d to or for members (Part IX, column (A), line 4)				0
	1	•	er compensation, employee benefits (Part IX, column (A), lines 5–10)				0
Expenses	1	•	fundraising fees (Part IX, column (A), line 11e)				0
ben	1		sing expenses (Part IX, column (D), line 25) ▶ 0	· .			
Ä	1		ses (Part IX, column (A), lines 11a–11d, 11f–24e)	9	, 677	9.	,411
	1	•	ses Add lines 13–17 (must equal Part IX, column (A), line 25)		,267		, 224
	1	•	s expenses Subtract line 18 from line 12		715		, 972
58		10101100 100	Begin	ning of Currer		End of Year	
Assets or	20 T	Total assets	(Part X, line 16)	784,	, 523	778,	, 551
A.	21 T	Total liabilitie	es (Part X, line 26)		0		0
₹	22 N	Net assets o	or fund balances Subtract line 21 from line 20	784	,523	778,	, 551
P	art II	Sign	ature Block				
U	nder pen	nalties of pen	ury, I declare that I have examined this return, including accompanying schedules and statements, and	to the best of	of my know	rledge and belief, it i	ıs
tr	ue, corre	ct, and comp	plete Declaration of preparer (other than officer) is based on all information of which preparer has any	knowledge		, ,	
			Inch B Karel		11/	11/2018	•
Sig	าก	Signa	Tuye of officer		Date		
He	-		ACK_KARCH FINANCIAI	SECR	RETAR	Ý	
		Туре	or pnnt name and title				
		Pnnt/Type pre	eparer's name Preparer's signature	Date	Check	if PTIN	
Pai	d	JOSEPH C	SUTTNER, CPA JOSEPH C SUTTNER, CPA	10/15/1	8 self-empl	loyed P0045078	35
Pre	parer	Firm's name	SUTTNER ACCOUNTING, INC.		s EIN 🕨	39-13098	
Use	Only		P.O. BOX 187	1			
		Firm's addres	CULTIMON DE COOLA 0107	Pho	ne no	920-849-9	9346
14-	, the IDI		nis return with the preparer shown above? (see instructions)	1 1101		X Yes	

X Yes No Form 990 (2017)

Form 990 (2017)	KNIGHTS OF COLUME	BUS COUNCIL 710	51-0203504	Page 2
	tatement of Program Serv	ice Accomplishments a response or note to any lir	ie in this Part III	
1 Briefly descr OUR MAIN FRATERN	ibe the organization's mission	LOW OUR FOUR PRINC SM. OUR MAIN GOAL	IPLES OF CHARITY, U	
prior Form 9 If "Yes," des	90 or 990-EZ? cribe these new services on Schedi	rogram services during the year whic ule O significant changes in how it conduc		Yes X No
4 Describe the expenses S		complishments for each of its three la nizations are required to report the ar	rgest program services, as measured b nount of grants and allocations to other	у
TO LOCAL OLYMPICS CHOOSE L CHILDREN CHARITY	L SOUP KITCHENS A S, AND BY SUPPORT LIFE FOR THEIR BA	ND FOOD PANTRIES, ING, BOTH SPIRITUA BIES. WE ALSO PRO N THE FAMILY BREAC) (Revenue TS FOOD DRIVES AND BY VOLUNTEERING AT LLY AND MATERIALLY, VIDE ASSISTANCE TO WINNER DIES. THERE MAIN GOAL IS TO TAK	DONATES FOOD SPECIAL MOTHERS WHO THE WIDOWS AND ARE MULTIPLE
4b (Code) (Expenses \$	including grants of \$) (Revenue	; \$)
4c (Code) (Expenses \$	including grants of \$) (Revenue	; \$)
· · ·	m services (Describe in Schedule () (D	
(Expenses : 4e Total program	s inclum service expenses ▶	iding grants of \$) (Revenue \$	
DAA				Form 990 (2017)



	' One of the date		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	Γ	163	_140
	complete Schedule A	1		Χ
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Χ
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	İİ	Χ
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	1 1	
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,		li	
	Part III	5		Χ
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	6		Χ
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Χ
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Χ
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	_ 9		Х
0	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	_10		Χ
1	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"			
	complete Schedule D, Part VI	11a		<u>X</u>
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u>X</u>
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u>X</u>
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u>X</u>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u>X</u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		_X
2a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		<u>X</u>
þ	Was the organization included in consolidated, independent audited financial statements for the tax year? If	ļ		
	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u>X</u>
3	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	<u> </u>	X
4a	Did the organization maintain an office, employees, or agents outside of the United States?	_14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate		İ	
	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
5	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or			٠,
_	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
6	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other			.,
_	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	 	X
7	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on			v
_	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		X
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			v
_	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
9	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	ا 🗚 ا		Х
	If "Yes " complete Schedule G. Part III	19		Λ

Form 990 (2017) KNIGHTS OF COLUMBUS COUNCIL 710 Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2 ⁹ If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		Х
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
•	to defease any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
-	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
•	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
•	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		L
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,			Ì
	Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	<u> </u>

Pa	art V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			Ш
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<u>3a</u>		<u>X</u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	<u>3b</u>		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			3.7
	account)?	<u>4a</u>		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
F	(FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5c		
c 6a	If "Yes" to line 5a or 5b, did the organization file Form 8886-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	 3C		
va	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6ь		
7	Organizations that may receive deductible contributions under section 170(c).			-
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	.	1	
_	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	_7c		
đ	If "Yes," indicate the number of Forms 8282 filed during the year			, i
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
9	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7 <u>g</u>		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-	-C? 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	ŧ		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	•	1	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter	į		
a	Initiation fees and capital contributions included on Part VIII, line 12			
_ b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders 11a	[
a	Gross income from members or shareholders Gross income from other sources (Do not net amounts due or paid to other sources			
b	against amounts due or received from them)		1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		İ	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	·····	
-	Note. See the instructions for additional information the organization must report on Schedule O			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
-	the organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b_	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
DAA		Foi	m 990	(2017)

Form 990 (2Q17) KNIGHTS OF COLUMBUS COUNCIL 710 51-0203504 Page 6 Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 169 Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O 169 Enter the number of voting members included in line 1a, above, who are independent 1b Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Χ 6 6 Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint Χ one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, Χ 7b stockholders, or persons other than the governing body? 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? 8a Χ 8b Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code) Yes No 10a 10a Did the organization have local chapters, branches, or affiliates? b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Χ 11a 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? b Describe in Schedule O the process, if any, used by the organization to review this Form 990 Χ 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12b b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this was done 13 13 Did the organization have a written whistleblower policy? 14 Did the organization have a written document retention and destruction policy? 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official 15a Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the 16b organization's exempt status with respect to such arrangements? Section C. Disclosure NONE 17 List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) 18 available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records 806 SOUTH 35TH STREET JACK KARCH WI 54220 MANITOWOC

DAA

Form 990 (2017)

Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and
	Independent Contractors
	Check if Schedule O contains a response or note to any line in this Part VII

A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee (A) (F) (B) Reportable Estimated Position Reportable Name and Title Average hours per (do not check more than one compensation compensation from amount of related box, unless person is both an from other compensation (list any officer and a director/trustee) the organizations (W-2/1099-MISC) from the hours for organization Individual Institutional (W-2/1099-MISC) organization related ē and related organizations employee organizations below dotted compensated trustee line) trustee (1) FR. RICHARD KLINGEISEN 1.00 0.00 0 0 0 Χ Χ CHAPLAIN (2) PEYTON HAGERSTROM 1.00 0.00 Χ Х 0 0 0 GRAND KNIGHT (3) GEORE LEVANDE 1.00 DEPUTY GRAND KNIGHT 0.00 Χ Х 0 0 0 (4) MICHAEL MYERS 1.00 0 0 0 CHANCELLOR 0.00 Χ Χ (5) JAMES GOONAN 1.00 0 0 0.00 Χ Χ 0 RECORDER (6) ROBERT SCHNEIDER 1.00 Χ 0 0 0 0.00 Х LECTURER (7) JACK KARCH 1.00 0.00 0 0 Χ Х 0 FINANCIAL SECRETARY (8) MICHAEL E. BRUNET 1.00 TREASURER 0.00 Χ X 0 0 0 (9) JOHN SOWINSKI 1.00 ADVOCATE 0.00 Χ Х 0 0 0 (10) JOSEPH J. DVORACHEK 1.00 0.00 Χ Χ 0 0 0 WARDEN (11) KEVIN BERTLER 1.00 X INSIDE GUARD 0.00 0 0 0

Part VII Section A. Officers	, Directors, Tru	stee	s, K	ey Eı	mplo	yee	s, an	nd Highest Compensated	Employees (continued)				
(A) Name and title			ox, uni	Pos check ess pe	erson I	than o s both	an ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the			
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(1.2.100		organiza and rela organiza	ation ated	
(12) RYAN SCHRAM		T								_			
OUTSIDE GUARD	1.00	x		X			}	0	0				(
(13) EARL A. JUNK	0.00	<u>†</u> ^	ļ	1									
MDD ompo	1.00			,									
TRUSTEE (14) AL FORNER	0.00	X	ļ	X		 		0	0				
. ,	1.00												
TRUSTEE CANADA L CA	0.00	X		X		_		0	0				
(15) LEONARD L. GA	TIEN 1.00												
TRUSTEE	0.00	X		Х		ļ		0	0				
	1					ĺ							
		 	 	-	_					<u>_</u>			
	1			l									
		├	ļ	<u> </u>									
			!										
1b Sub-total	<u></u>		·										
c Total from continuation shee	ets to Part VII, S	ectio	on A										
d Total (add lines 1b and 1c) 2 Total number of individuals (increportable compensation from			to th	iose	liste	abo	ve)) who received more than \$10	00,000 of				
3 Did the organization list any for	rmer officer dire	ctor	or tr	ustee	e ke	v em	nlove	ee, or highest compensated	İ	Г	\dashv	Yes	No
employee on line 1a? If "Yes," of	complete Schedu	ıle J	for s	uch i	ndıv	dual					3		X
4 For any individual listed on line organization and related organi									n the				
ındıvıdual									duuduol	-	4		X
5 Did any person listed on line 1a for services rendered to the org											5_		X
Section B. Independent Contractor			_										
1 Complete this table for your five compensation from the organiz													
Name and	(A) business address							Descrip	(B) tion of services		Co	(C) mpensat	lion
								<u></u>		 +			
]						
								:		T			
2 Total number of independent of	ontractors (includ	ling !	nut n	ot lu~	nted	to th	086	listed above) who			***************************************	· · · · · · · · · · · · · · · · · · ·	
received more than \$100,000 o									0				

Total Add lines 1a-11 Total Add lines 1a-11 Total Add lines 1a-11 Total Add lines 2a-22	Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII										
Investment income (including dividends, interest, and other similar amounts) 10,866 10,								(A)	(B) Related or exempt function	Unrelated business	Revenue excluded from tax under sections
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	इइ	1a	Federated can	npaigns	1a				······································		
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	Grants nounts	þ	Membership d	ues	1b		3,102				
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	AŠ, C	С	Fundraising ev	vents	1c			1			1
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	ia is	d	Related organi	zations	1d			1			1 ‡
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	n's	е	Government grants	(contributions)	<u>1e</u>			1			‡
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	ibutio	f			1f		5 , 637				
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	ontr	g			1f	\$		0.720			
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	<u>a</u>	h	I otal. Add line	es 1a-1f				8,739			<u> </u>
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	ine	20					Busn Code	†			•
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	Rev	2a h									
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	ice	c									
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	erv	d									
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	E	e									·
Investment income (including dividends, interest, and other similar amounts) 10,866 10,	ogra	f	All other progra	am service reven	ue						
and other similar amounts) Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents (i) Real (iii) Personal b Less enable reps c Rental inc or (loss) d Net rental income or (loss) 7a Gross and income or (loss) b Less cost or other base a sale serps c Gain or (loss) d Net gain or (loss) d Net gain or (loss) A less since from flundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a 10, 830 b Less direct expenses b 2, 183 c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses b C Net income or (loss) from gaining activities c Net income or (loss) from gaining activities loss of seed of inventory, less returns and allowances a b Less cost of goods sold b C Net income or (loss) from sales of inventory Miscellaneous Revenue Busin Code 11a b c d All other revenue e Total. Add lines 11a–11d	Pre	g									······································
Income from investment of tax-exempt bond proceeds South Royalities Call Real (iii) Personal South Royalities Call Real (iii) Personal South Royalities Call Real Call Royalities Call Real Call Royalities Call Real Royalities Call Royali		3	Investment inc	ome (including d	ividend	ts, interes	st,				
Second Part Continue Second Part Sec			and other simil	ar amounts)			▶ [10,866			10,866
Continuous reported on line 1c) See Part IV, line 19 See Part IV, line 19 See Venturome or (loss) The source or (loss) See Part IV, line 19 See See See See See See See See See S		4	Income from in	vestment of tax-	exemp	t bond pr	oceeds 🕨				
B Less can late page Ta Gross amount from saled of seesis other than wrentry B Less cost or other basis & sales seep C Gain or (loss) A Net rental income or (loss) D Less cost or other basis & sales seep C Gain or (loss) A Net gain or (loss) A Net gain or (loss) Less direct expenses D Less direct expenses C Net income or (loss) from fundraising events C Net income or (loss) from gaming activities To Net income or (loss) from gaming activities Less cost of goods sold D Less cost of goods		5	Royalties	····			•				
b Less rerial exps c Rental mor of (toss) d Net rental income or (loss) 7a Gross amount from sales of assets other than mentory b Less cost or other bases & sales exps c Gain or (loss) 4 Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities b Less direct expenses c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities c Net income or (loss) from sales of inventory Migcellaneous Revenue Busin Code 11a b c c d All other revenue e Total. Add lines 11a-11d				(i) Real		(11)	Personal				
d Net rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of assets other than inventory b Less cost or other basis & sales sips c Garn or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 a 10,830 b Less direct expenses b 2,183 c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities See Part IV, line 19 a b Less direct expenses b c Net income or (loss) from gaming activities c Net income or (loss) from gaming activities returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busin Code 11a b c C d All other revenue e Total. Add lines 11a-11d		6a	4	···				1			
d Net rental income or (loss) 7a Gross and infritron sales of assets other than inventibry b Less cost or other basis & sales exps c Garn or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities Total Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Buan Code 11a b c d All other revenue e Total. Add lines 11a-11d		þ	Less rental exps	<u> </u>				1			
a Gross amount from sales of assets other han inventory. b Less cost or other bases & sales exps c Gann or (loss) d Net gain or (loss) d Net gain or (loss) so c Net income or (loss) from fundraising events (not including \$ c Net income or (loss) from fundraising events \$ c Net income or (loss) from fundraising events \$ so ePart IV, line 18 a 10,830 b Less direct expenses b 2,183 c Net income or (loss) from fundraising events \$ 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b \$ c Net income or (loss) from gaming activities for Net income or (loss) from gaming activities b Less of of goods sold b \$ c Net income or (loss) from sales of inventory Miscellaneous Revenue Busin Code 11a b c d All other revenue e Total. Add lines 11a-11d		С						1			
sales of assets of developmental page of the result of th				occ amount from							
b Less cost or other base & sales exps c Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18			(i) Securiles (ii) Other) Other				
bass & sales exps c Gain or (loss) d Net gain or (loss) Ba Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b 2, 183 c Net income or (loss) from fundraising events See Part IV, line 19 a b Less direct expenses b 5 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a-11d		_	•					1			
C Gain or (loss) d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		D				ļ		1			£
d Net gain or (loss) 8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18		_	•					-			
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18						L					İ
(not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses b 2, 183 c Net income or (loss) from fundraising events \$ See Part IV, line 19 b Less direct expenses b 5 c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busin Code 11a b c d All other revenue e Total. Add lines 11a–11d				•	its						
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d	ne	- Ou		in landidising even				1			
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d	e e		. •	eported on line 1c)				•			
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d	Š.				а		10,830	†			
c Net income or (loss) from fundraising events 9a Gross income from gaming activities See Part IV, line 19 a b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d	the	b	Less direct ex	penses	ь						
See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d	0	С	Net income or	(loss) from fundr	aising	events	•	8,647			
b Less direct expenses b c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d		9a	Gross income fro	m gaming activities	;			Ē		-	
c Net income or (loss) from gaming activities 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d					а			ŧ			
10a Gross sales of inventory, less returns and allowances a b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d					(ţ.			
returns and allowances b Less cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d					ng acti	vities			·		
b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b c d All other revenue e Total. Add lines 11a–11d		10a									
C Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b C d All other revenue e Total. Add lines 11a–11d					- 1			-	,		
Miscellaneous Revenue					- (}			
11a b c d All other revenue e Total. Add lines 11a–11d		СС			of inv	entory	Dur : 0				
b c d All other revenue e Total. Add lines 11a–11d		44 -	Mise	cellaneous Révenue			Busn Code	ţ			
c d All other revenue e Total. Add lines 11a–11d							 				
d All other revenue e Total. Add lines 11a–11d											
e Total. Add lines 11a–11d		_	All other reven	ue.			 - 				
										, ,	
					s		•	28.252	0	0	10.866

Part IX Statement of Functional Expenses

	Check if Schedule O contains a response				
	ot include amounts reported on lines 6b, lb, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	24,813			
2	Grants and other assistance to domestic				· · · · · · · · · · · · · · · · · · ·
	individuals See Part IV, line 22		ļ	1	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			1	
	individuals See Part IV, lines 15 and 16			1	
4	Benefits paid to or for members			<u>-</u>	
5	Compensation of current officers, directors,				
J	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
_	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				····
11	Fees for services (non-employees)				
a	Management				
þ	Legal				
c	Accounting	1,250			
d	Lobbying				
ė	Professional fundraising services See Part IV, line 17				
f	Investment management fees				
g	· · · · · · · · · · · · · · · · · · ·				
Ĭ	(A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	2,265			
13	Office expenses	2,225			<u></u>
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	-			
18	Payments of travel or entertainment expenses				
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	, ,				
	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	505			
24	Other expenses Itemize expenses not covered				
	above (List miscellaneous expenses in line 24e If	1		1	
	line 24e amount exceeds 10% of line 25, column	1		1	
	(A) amount, list line 24e expenses on Schedule O)				
a	FEDERAL AND STATE DUES	1,457			
þ	SPECIAL/CONVENTION	1,315			
¢	MISCELLANEOUS EXPENSE	394			·
þ					
6	All other expenses				
<u> 25</u>	Total functional expenses Add lines 1 through 24e	34,224	0	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and				
	fundraising solicitation Check here				-

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year Cash-non-interest bearing 1 Savings and temporary cash investments 784 523 2 778,551 Pledges and grants receivable, net 3 4 Accounts receivable, net 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. Notes and loans receivable, net 7 Inventories for sale or use 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a b Less accumulated depreciation 10b 10c 11 Investments—publicly traded securities 11 12 Investments—other securities See Part IV, line 11 12 13 Investments—program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 784,523 16 16 Total assets. Add lines 1 through 15 (must equal line 34) 17 Accounts payable and accrued expenses 17 18 Grants payable 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and 22 disqualified persons Complete Part II of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X 25 of Schedule D 0 0 Total liabilities. Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 784,523 Unrestricted net assets 778,551 Temporarily restricted net assets 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 778,551 784,523 Total net assets or fund balances 33 778,551 784,523 Total liabilities and net assets/fund balances

Form 990 (2017)

orm	990 (2017) KNIGHTS OF COLUMBUS COUNCIL /10 51-0203504		 	Pag	je 12
Pa	rt XI Reconciliation of Net Assets		 		_
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1		28 , 2	
2	Total expenses (must equal Part IX, column (A), line 25)	2		34,2	<u> 224</u>
3	Revenue less expenses Subtract line 2 from line 1	3		-5, <u>9</u>	972
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	78	34,	<u>523</u>
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	 <u> </u>	78,	<u>551</u>
Pa	rt XII Financial Statements and Reporting				_
	Check if Schedule O contains a response or note to any line in this Part XII		 ,		
				Yes∙	No
1	Accounting method used to prepare the Form 990			1	
	If the organization changed its method of accounting from a prior year or checked "Other," explain in			1	
	Schedule O			-	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u>X</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both			1	
	Separate basis Consolidated basis Both consolidated and separate basis			- 1	
b	Were the organization's financial statements audited by an independent accountant?		2b		X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both			1	
	Separate basis Consolidated basis Both consolidated and separate basis			1	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in			=	
	Schedule O				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		3a		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	and and the surface where Cabadula O and describe any stone taken to undergo such audits		3b		

Form 990 (2017)

SCHEDULE O (Form'990 or 990-EZ) Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

90-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Open to Public

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form990 for the latest information.

Inspection
Employer identification number

OMB No 1545-0047

Name of the organization

KNIGHTS OF COLUMBUS COUNCIL 710

51-0203504

FORM 990, PART VI, LINE 6 - CLASSES OF MEMBERS OR STOCKHOLDERS
THE ORGANIZATION HAS MEMBERS.

FORM 990, PART VI, LINE 7A - ELECTION OF MEMBERS AND THEIR RIGHTS MEMBERS ELECT PRESIDING OFFICERS OF THE LOCAL COUNCIL.

FORM 990, PART VI, LINE 7B - DECISIONS SUBJECT TO APPROVAL OF MEMBERS ALL DECISIONS REQUIRE APPROVAL OF MAJORITY OF MEMBERS IN ATTENDANCE AT SCHEDULED MONTHLY MEETING.

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990 FORM 990 IS REVIEWED BY THE FINANCIAL SECRETARY. COPIES ARE AVAILABLE TO MEMBERS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION ALL ARE AVAILABLE UPON REQUEST OF THE FINANCIAL SECRETARY.