Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

2018

OMB No 1545-0047

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

inte		nue Service	Go to www.irs.gov/Form990 for instructions and the lates	t intormation.		Inspection
Α	For the	e 2018 cale	endar year, or tax year beginning , 2018, and end	ing		, 20
В	Check if	f applicable	C Name of organization if NighTS C7 Columbus Counc	11 5480	D Employ	er identification number
\Box		s change	Doing business as		123-	7137 227
\exists			Number and street (or P O box if mail is not delivered to street address) Room/s	suite	F Telephor	ne number
믐	Name cl	*		Suite	757	-930-6491
片	Initial ref				171	
Ш	Final retu	um/terminated	City or town, state or province, country, and ZIP or foreign postal code			
	Amende	ed return	Newport News, VA 23606	<u> </u>	G Gross re	eceipts \$
	Applicat	tion pending	F Name and address of principal officer	H(a) Is this a d	group return for	subordinates? Ves No
			1	1 1 1		s included Ves 🗆 No
	Tay aya	mpt status	□ 501(c)(3) 😡 501(c) (a list (see instructions)
÷			□ 301(c)(3)	 		· ·
<u></u>	Website				exemption	
_			Corporation ☐ Trust ☐ Association ☐ Other ► L Year of form	ation	M State	of legal domicile
Р	art I	Summ	ary			
	1	Briefly de	escribe the organization's mission or most significant activities. 🔘 😕	LF 1/413	3101	is charity
ě		るる		12 5C.15	ح ج ح	hools
Governance		(2)	nd community IN News t	1/0/25		
Ĕ	9	Chook th	is box ▶ ☐ if the organization discontinued its operations or disposed	0000	- 050/ -6	
Š	2			i oi more mai	1 - 1	its net assets
	3		of voting members of the governing body (Part VI, line 1a)		. 3	
త	4	Number	of independent voting members of the governing body (Part VI, line 1b	0)	4_	
ě	5	Total nun	mber of individuals employed in calendar year 2018 (Part V, line 2a)		. 5	
Ξ	6	Total nun	mber of volunteers (estimate if necessary)		. 6	
Activities	7a		elated business revenue from Part VIII, column (C), line 12		7a	
•	1		lated by a many tayable was and from Farm 000 T to 200			
	<u>b</u>	Net unrei	ated business taxable income from Form 990-T, line 38		. 7b	
			2 Q	Prior Y	ear	Current Year
a	8	Contribut	tions and grants (Part VIII, line 1h)	350	74	36.050
5	9	Program	service revenue (Part VIII, line 2g)	, ,	0	,
ڇم	10	Investme	ent income (Part VIII, column (A), lines 3, 4, and 7d)	13 8.6	58	42.160
(4)	11		venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	202/8	a i l	1110117
\triangleright	1			22317	75	1577 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
JNN A Revenue	12		enue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	F17,6	5.7	A 4 1 1 1 1
5	13		nd similar amounts paid (Part IX, column (A), lines 1-3)	1123	74	164,047
5	14	Benefits	paid to or for members (Part IX, column (A), line 4)	,		
ģ	15	Salaries, o	other compensation, employee benefits (Part IX, column (A), lines 5-10)			
Expenses	16a	Professio	onal fundraising fees (Part IX, column (A), line 11e)			
- je	b		draising expenses (Part IX, column (D), line 25) ▶	Scott and Palacian	A Company	
ΘŽ	17			V() V	-(2)	QC U.DO
>	1		penses (Part IX, column (A), lines 11a–11d, 11f–24e)	30,	7 7 0	3 6 j 7 U D
<u>ა</u>	18	-	penses Add lines 13-17 (must equal Part IX, column (A), line 25) .	1-54,8	794	250,441
3	19	Revenue	less expenses Subtract line 18 from line 12	122.6	30	(8,250)
Net Assets or Fund Balances				Beginning of C	urrent Year	End of Year
ets	20	Total ass	ets (Part X, line 16)	439	7	1250
Ass I Ba	21		ilities (Part X, line 26)		$\overline{\Box}$	
E E	22			1170	\forall	1350
_			ts or fund balances Subtract line 21 from line 20	1 927		<u> </u>
_	art II		ture Block			
			ry, I declare that I have examined this return, including accompanying schedules and stat			ny knowledge and belief, it is
tru	e, correct	t, and comple	ete Declaration of preparer (other than officer) is based on all information of which prepar	rer has any know	ledge	
	·	N 00	anon 10xxxx/12		5-6-	2019
Sig	ın	Signa	ature of officer	. Di	ate	
He		li n	Duid Kerstetter, Grand Knight	+		
		1				
		<u> </u>	or print name and title			
Pa	id	Print/Typ	pe preparer's name Preparer's signature	Date	Check [T if PTIN
					self-emp	oloyed
	epare	- Furnie d	ame >	F	n's EIN ▶	
US	exQui	λ ΓΙΛ,ς ι				
<u> </u>	. 41= -15		ddresg()	Pho	one no	
		+ + / / / /	s this Yeturn with the preparer shown above? (see instructions)	<u></u>		∐Yes ∐No
For	Páperv	vork Réduc	ction Act Notice, see the separate instructions.	No 11282Y		Form 990 (2018)
1			<u></u>			
	00	The				1411
	OC:	1 L 1 4 - C	· 4			01110

Part		ment of Program Service		De dill	
1		cribe the organization's missi		S Part III	<u>, , , L</u>
			*** * ********************************		
2	prior Form	990 or 990-EZ?	ificant program services during the	year which were not listed on the	Yes □ No
3		scribe these new services on	ı Schedule O g, or make sıgnıfıcant changes ır	how it conducts any program	
Ŭ					Yes □ No
		scribe these changes on Sch			-
4	expenses :	Section 501(c)(3) and 501(c)(rvice accomplishments for each of 4) organizations are required to rep for each program service reported	its three largest program services, as port the amount of grants and allocation	measured by ons to others
4a) (Revenue \$	-
				••••••	
				••••••	
				······	
	(Code) (Expenses \$	including grants of \$) (Revenue \$	1
	(0000.) (Exponded +		γ(πονέπασ ψ	/
	•••••				
		•			
	*				
4c	(Code) (Expenses \$	including grants of \$	\ (Revenue \$	
70	(0000) (Expended #		, (Nevende 🛡	
	••		·		
					
4d		am services (Describe in Sch			
4e	(Expenses §	including gi am service expenses ►	rants of \$) (Reven	η ς φ)	<u> </u>



Part IV Checklist of Required Schedules

1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	/
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	0
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	/
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	V
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, Part III	5	V
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		V
	"Yes," complete Schedule D, Part I	6	
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	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8_	 <i>ب</i>
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	ر
10	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	L
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, 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	_
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	ノ
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	レ
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	_
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	
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	_
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	ر
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	_
13 14a	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E Did the organization maintain an office, employees, or agents outside of the United States?	13 14a	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	144	_
U	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	_
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	_
16	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	/
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	1
8	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19	_
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b	23
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	

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Part	Checklist of Required Schedules (continued)			
			Yes	No
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? If "Yes," complete Schedule I, Parts I and III	22		/
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		/
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		1
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .	24d	ļ	
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 current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		1
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		レ
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		V
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		V.
	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		V
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		2
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		<i>U</i>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		10
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		0
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		
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		<u></u>
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	-	
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		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	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, Part VI	37		_
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		
Part				
	Check if Schedule O contains a response or note to any line in this Part V	• •	, ,	
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a		Yes	No
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and	,		
	reportable gaming (gambling) winnings to prize winners?	1c		

Form **990** (2018)

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)			Page
			Yes	No
2 a	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			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	ļ	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	_		1
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	 	-
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 (FBAR).	ŀ		
5a	Was the organization a party to a prohibited tax sholter transaction at any time during the tax year?	5a	ļ	
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	55		
ou.	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			-
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			ļ <u> </u>
	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	ļ	ļ
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	Ì		1
	required to file Form 8282?	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	ļ <u> </u>		ļ
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g		
h		7h	ļ	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	<u> </u>	 	-
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	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 . 10b			
11	Section 501(c)(12) organizations. Enter]		
а	Gross income from members or shareholders	}		
b	Gross income from other sources (Do not net amounts due or paid to other sources			į
	against amounts due or received from them)			ļ
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year . [12b]	_	1	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	10	 	_
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		-
L	·			
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	;	1	
С	Enter the amount of reserves on hand	1	[,	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	 	-
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	 	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		
	If "Yes," see instructions and file Form 4720, Schedule N	4	, .	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	[<u> </u>
	If "Yes," complete Form 4720, Schedule O.	i		

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Part					
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes				ions.
Cast	Check if Schedule O contains a response or note to any line in this Part VI	<u></u>	•	<u> </u>	<u>. Ц</u>
Secu	on A. Governing Body and Management				T N =
1a	Enter the number of voting members of the governing body at the end of the tax year.	1a	f is the	Yes	No
• •	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		:15		
	committee, explain in Schedule O.		4		, T
b	Enter the number of voting members included in line 1a, above, who are independent .	1b			
2	Did any officer, director, trustee, or key employee have a family relationship or a business rany other officer, director, trustee, or key employee?	elationship with	2		
3	Did the organization delegate control over management duties customarily performed by or supervision of officers, directors, or trustees, or key employees to a management company or other		3		V
4	Did the organization make any significant changes to its governing documents since the prior Form 99	0 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization	on's assets?	_ 5		1
6	Did the organization have members or stockholders?		6		U
7a	Did the organization have members, stockholders, or other persons who had the power to one or more members of the governing body?		7a		
b	Are any governance decisions of the organization reserved to (or subject to approval stockholders, or persons other than the governing body?		7b		V
8	Did the organization contemporaneously document the meetings held or written actions un the year by the following:	dertaken during			
а	The governing body?		8a		
b	Each committee with authority to act on behalf of the governing body?		8b)	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot the organization's mailing address? If "Yes," provide the names and addresses in Schedule C)	9		<u></u>
Secti	on B. Policies (This Section B requests information about policies not required by the	e Internal Rever	ue C	ode.)	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	• • •	10a		س ا
b	If "Yes," did the organization have written policies and procedures governing the activities of				
44.	affiliates, and branches to ensure their operations are consistent with the organization's exem		10b		ļ
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before process if any used by the process if any used by	ore filing the form?	11a		
b 12a	Describe in Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>		100	سانتيمد	لسنت
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	e rise to conflicte?	12a 12b		
c	Did the organization regularly and consistently monitor and enforce compliance with the p	oolicy? If "Yes,"			
13	Did the organization have a written whistleblower policy?		12c		
14			14		1
15	Did the process for determining compensation of the following persons include a review a				2001
	independent persons, comparability data, and contemporaneous substantiation of the deliberation				
a	The organization's CEO, Executive Director, or top management official	•	15a		<u> </u>
b	Other officers or key employees of the organization	• • •	15b		
160		lau auuaaaaaa			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or simil with a taxable entity during the year?		16a		*
b	If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take steps to organization's exempt status with respect to such arrangements?	to evaluate its o safeguard the	16b		
Section	on C. Disclosure				
17					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable (3)s only) available for public inspection. Indicate how you made these available Check all tha Own website Another's website Upon request Other (explain in Sch), 990, and 990- t apply.			
19	Describe in Schedule O whether (and if so, how) the organization made its governing docume financial statements available to the public during the tax year	nts, conflict of int	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization in the person who person in the person	n's books and re		•	
	757.930	-0491		990	(2018)

Form	990	(2018)
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section 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 heither the organization hol	r any relate	a org	anız	atic	n c	ompe	nsa	ited any curren	t officer, directo	r, or trustee.
				((C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
	hours per					or/trust		compensation	compensation from	
	week (list any			_	_		÷	from	related	other
	hours for related	호호	stit	Officer	ey e	필	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	ect	ıt o	Ψ	ğ	yet c	Q	(W-2/1099-MISC)	(** 27 1000 141100)	organization
	below dotted	일	nal		Key employee	m öm				and related
	line)	Individual trustee or director	Institutional trustee		ee	Pen				organizations
		Ō	tee			Highest compensated employee	!	1		
	-					ä				
in Durid Korstatter	0							ŀ		
(i) pa (io Re-) eller	∤ <i>8</i>									
1) PAVID Kerstetter Grand Knight (2) Pic Schrim Deputy	10		_	-			-			
120000000000000000000000000000000000000	1.L.C									
(3) / Wilferd Welke	7									
LUACOEN	····· <i>G</i>									
(4) JAMES KAZINEY	71		-							
										
(5) Tossiz Powell	4		-				 			
FINANCIAL SECRETARY	† -									
(6) CABE FrANCE										
Truster.	<i>B</i> × <i>3</i> ×									
(7) JOHN EDWARRS	3	18_								
Trustee										
(8) John SpraenT	\mathcal{Q}	3							-	
Trustele.										
(9)									;	
(10)										
										
(11)	ļ									
						_				
(12)										
(40)										
(13)	 									
(14)				j						

عنيهيد	Section A. Officers, Directors, Trust	lees, Ney E	inpio:	yees			iigne	St C	ompensated E	mpioyees (cor	itinuea)
			-		•	C) ition					
	(A) Name and title		(do not check more than one					(E)	(F)		
							is both or/trust		Reportable compensation	Reportable compensation fro	Estimated amount of
		hours per week (list any			_	_			from	related	other
		hours for related	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization	organizations (W-2/1099-MISC	compensation from the
		organizations	dual	ıtıor	¥		st c	Q	(W-2/1099-MISC)	(** 2	organization
		below dotted line)	ารู	alt		oyee	omp				and related organizations
		<u> </u>) itee	uste		"	ensa				5 · ga · · · · · · · · · · · · · · · · ·
				Õ			ited				
(15)											
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1221	·										
(23)											
1227											
(24)											
355.72											
(25)				\dashv							
3==7											
1b	Sub-total							>			_
С	Total from continuation sheets to Part	VII, Sectio	n A					▶			
d	Total (add lines 1b and 1c)							>			
2	Total number of individuals (including but						above	e) w	ho received mo	ore than \$100,	000 of
	reportable compensation from the organization							•			
											Yes No
3	Did the organization list any former off	icer, direct	tor, o	r tru	uste	e, l	key e	mp	loyee, or high	est compensa	ited
	employee on line 1a? If "Yes," complete S	Schedule J	for su	ıch i	ındı	vidu	ıal .				3 1
4	For any individual listed on line 1a, is the	sum of reg	ortat	ole d	om	per	satio	n ai	nd other comp	ensation from	the ()
	organization and related organizations										
	ındıvıdual										. 4 -
5	Did any person listed on line 1a receive of									ation or individ	dual Land
	for services rendered to the organization?	If "Yes," c	omple	ete S	Sch	edu	le J f	or s	uch person .		5
Section	on B. Independent Contractors									· · ·	
1	Complete this table for your five highest of	ompensate	ed ind	lepe	ende	ent d	contra	acto	ors that receive	d more than \$	100,000 of
	compensation from the organization. Rep	ort comper	nsatio	n fo	r th	е са	alenda	ar y	ear ending witl	or within the	organization's tax
	year.										
	(A)								(B)		(C)
	Name and business addr				_				Description of se	rvices	Compensation
											<u>. </u>
2	Total number of independent contractor							th	ose listed abo	ve) who 🅍 ~	

Form **990** (2018)

Pärt VIII		Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII									
-		Check if Schedule O contains a re	sponse or note t	io any line in this (A) Torel revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Hovenue excluded from tax under sections 512-514				
ons, Gifts, Grants Similar Amounts	1a b c d e	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) All other contributions, gifts, grants,	15,050			1					
Contributions, and Other Simi	g	and similar amounts not included above 1f Noncash contributions included in lines 1a–1f: \$		37.055							
	h	Total. Add lines 1a-1f .	Business Code	36,050							
Program Service Revenue	2a b c d		Business Code								
ram	e	A II - AI									
rog	f g	All other program service revenue . Total. Add lines 2a–2f	•								
	3	Investment income (including dividendent and other similar amounts) Income from investment of tax-exempt to	dends, interest,	42,100							
	5	Royalties	>								
	6a b	Gross rents Less. rental expenses	(ii) Personal				,				
	С	Rental income or (loss)									
	d	Net rental income or (loss)	▶								
	7a	Gross amount from sales of assets other than inventory	(II) Other	-							
	b	Less. cost or other basis and sales expenses									
	C	Gain or (loss)									
ne	d 8a	Gross income from fundraising	•				n				
Other Revenue		of contributions reported on line 1c). See Part IV, line 18 .									
the		Less direct expenses .		-		'	_				
0		Net income or (loss) from fundraising	1								
		Gross income from gaming activities.	2,125,651			,					
	b	Less direct expenses b	1961,004	1			,				
		Net income or (loss) from gaming act Gross sales of inventory, less returns and allowances .		164,047	132 1	To price to					
		Less: cost of goods sold b. Net income or (loss) from sales of inv		h ** 10'	چ		THE STATE OF THE S				
		Miscellaneous Revenue	Business Code	 	(ν _ε / ' : κ ω	· · · · · · · · · · · · · · · · · · ·				
	11a b c						2 The high persons and a second persons and a second persons and a second persons are a second persons and a second persons are a second person are a s				
	d	All other revenue									
	е	Total. Add lines 11a-11d	•			•					
	12	Total revenue. See instructions .		242.197							

	tatemen		

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)									
Check if Schedule O contains a response or note to any line in this Part IX									
	ot include amounts reported on lines 6b, 7b, b, 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	164,047							
2	Grants and other assistance to domestic individuals. See Part IV, line 22	7							
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
4 5	Benefits paid to or for members Compensation of current officers, directors, 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 8	Other salaries and wages								
9	Other employee benefits								
10	Payroll taxes								
11	Fees for services (non-employees):								
a	Management								
D	Legal		·		<u> </u>				
d	Accounting								
e	Professional fundraising services See Part IV, line 17		Market Constitution of the						
f	Investment management fees		transfer and the second of the second	- HOLANDARON STREET, S					
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)								
12	Advertising and promotion								
13	Office expenses								
14	Information technology			,	<u> </u>				
15	Royalties								
16	Occupancy								
17	Travel								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials		_	1					
19	Conferences, conventions, and meetings	1500	1500						
20	Interest								
21	Payments to affiliates	6850	6350						
22	Depreciation, depletion, and amortization								
23	Insurance	Mindage was A. T.A., No. 46 Street Milliage D. Wasser	MA Debt. Ma Latin. "April 1911 1.15	ALAMA IN THE STATE OF THE STATE					
24	Other expenses. Itemize expenses not covered								
	above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O)				the state of				
а	POSTAGE, Supplies.	1050	1050	THE REAL PROPERTY.					
b		5000	5000						
C	Council Programs	41,000	41.000	<u> </u>					
d	+ COMMUNT.	71,000	1,000						
e	All other expenses	31,000	31,000						
25	Total functional expenses. Add lines 1 through 24e	250,447	86,400						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and		4 / 100						
	fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				•				

Part X Balance Sheet

	ai t A	Charles Calabarate Carata and Car			
		Check if Schedule O contains a response or note to any line in this Pa	7		<u> </u>
			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	4397	1	1250
	2	Savings and temporary cash investments		2	
	3	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		12 6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or	- STRICK STATE STA	100.00	APPONISH THE STREET OF THE STREET
		other basis Complete Part VI of Schedule D 10a			
		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	11200	15	122
—	16	Total assets. Add lines 1 through 15 (must equal line 34)	4571	16	1,750
	17	Accounts payable and accrued expenses		17	
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
"	21	Escrow or custodial account liability Complete Part IV of Schedule D .	HATT WAS FIRMFAS COM HENNES DEAT	21	THE PROPERTY AND ADDRESS OF
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key - employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	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 of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25		26	-
Net Assets or Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 27 through 29, and lines 33 and 34.			
	27	Unrestricted net assets		27	
	28	Temporarily restricted net assets		28	
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34.			Part of the second
	30	Capital stock or trust principal, or current funds	978.688	30	852.044
	31	Paid-in or capital surplus, or land, building, or equipment fund	* * * * * * * * * * * * * * * * * * * *	31	
	32	Retained earnings, endowment, accumulated income, or other funds.		32	,
	33	Total net assets or fund balances	978,688	33	852,044
	34	Total liabilities and net assets/fund balances	978,648	34	852,044
			, , , , , ,		Form 990 (2018)

Part XI	Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
	revenue (must equal Part VIII, column (A), line 12)	1	243	19-	7
	expenses (must equal Part IX, column (A), line 25)	2	250	44	7
	nue less expenses. Subtract line 2 from line 1	3		350°)
	ssets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4 5	752,	044	<i>,</i>
	nrealized gains (losses) on investments	5			
6 Dona	ted services and use of facilities	6			
7 Inves	tment expenses	7			
	period adjustments	88			
9 Othe	changes in net assets or fund balances (explain in Schedule O)	9			
	ssets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line		~!/>	-Q1	u/
	olumn (B))	10	84.5,	<u> </u>	<u> </u>
Part XII	Financial Statements and Reporting		ŕ		_
	Check if Schedule O contains a response or note to any line in this Part XII		· ·_ ·	·	<u> </u>
				Yes	No
	unting method used to prepare the Form 990: Cash Accrual Other	 	` '	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	; · .]
	organization changed its method of accounting from a prior year or checked "Other," expedule O	lain in	7 4	* 5, \ 7 * 45.1 4	
				يد المنسس	أرك
	the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u></u>
	es," check a box below to indicate whether the financial statements for the year were comp	iled or	, ",	. '' .	•
	wed on a separate basis, consolidated basis, or both]
	parate basis Consolidated basis Both consolidated and separate basis			<u> </u>	,—
	the organization's financial statements audited by an independent accountant?		2b	.	<u></u>
	es," check a box below to indicate whether the financial statements for the year were audite rate basis, consolidated basis, or both:	d on a			., I
	parate basis				ا ر
					لــــــــــــــــــــــــــــــــــــــ
	s" to line 2a or 2b, does the organization have a committee that assumes responsibility for overall and the court accourts and selection of an independent accourts.		2c		
	organization changed either its oversight process or selection process during the tax year, exp		20		-1
	organization changed either its oversight process or selection process during the tax year, exp	piain in		<u>-,</u>	٠.]
					النسنا
	result of a federal award, was the organization required to undergo an audit or audits as set t ingle Audit Act and OMB Circular A-133?	ortn in	3a	,	
	s," did the organization undergo the required audit or audits? If the organization did not under) Ja		
	ed audit or audits, explain why in Schedule O and describe any steps taken to undergo such au		3b	,	

Form **990** (2018)

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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.

20**18**

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Name of the organization 1/2 05 Columbus Council 5480 Employer identification number 23-7137227

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The purpose as this Council is to
provide sunds for Charitles in the
State of Uth AND to provide MAN
hours for charities in our Area
$A = \pm A \pm A$
For example we provide over 100,000
in donations to our schools; church
AND OF GANIZATIONS SUCh AS
Boys AND Girls Club, Crime WAtch, Red Cross, AND Shelters.
Red Cross, And Shelters.
We provide several that man
hour volunteers to our city, militare
bases, red cross, and needy
FAMILIES.
<u>NO ave receives FRNANCIAL</u>
compesation.
1 ½.

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ $_{\rm HTA}$

Schedule O (Form 990 or 990-EZ) (2013)