

2018

Open to Public
Inspection

Form 990-EZ

Department of the Treasury
Internal Revenue ServiceShort Form
Return of Organization Exempt From Income Tax

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

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

► Go to www.irs.gov/Form990EZ for instructions and the latest information.

A For the 2018 calendar year, or tax year beginning

Jan 1

, 2018, and ending

Dec 31

, 20 18

B Check if applicable

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization

Sacred Heart K of C Council no 6525

D Employer identification number

510141847

Number and street (or P.O. box, if mail is not delivered to street address)

P.O. Box 0201

Room/suite

E Telephone number

314-973-3631

City or town, state or province, country, and ZIP or foreign postal code

Truxton MO 63381-0201

08

F Group Exemption
Number ►

G Accounting Method:

 Cash Accrual Other (specify) ►H Check ► if the organization is not

required to attach Schedule B

(Form 990, 990-EZ, or 990-PF).

I Website: ►

J Tax-exempt status (check only one) — 501(c)(3) 501(c) () (insert no) 4947(a)(1) or 527K Form of organization: Corporation Trust Association Other Fraternal

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets

(Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ

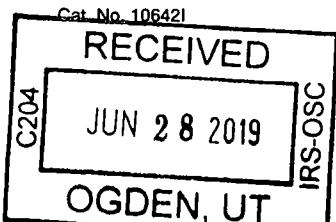
Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)

Check if the organization used Schedule O to respond to any question in this Part I

1	Contributions, gifts, grants, and similar amounts received	1	2,054
2	Program service revenue including government fees and contracts	2	0
3	Membership dues and assessments	3	5,102
4	Investment income	4	0
5a	Gross amount from sale of assets other than inventory	5a	0
b	Less: cost or other basis and sales expenses	5b	0
c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	0
6	Gaming and fundraising events:		
a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0
b	Gross income from fundraising events (not including \$ 83,471 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	83,471
c	Less. direct expenses from gaming and fundraising events	6c	53,741
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	29,680
7a	Gross sales of inventory, less returns and allowances	7a	0
b	Less: cost of goods sold	7b	0
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	0
8	Other revenue (describe in Schedule O)	8	899
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	37,735
10	Grants and similar amounts paid (list in Schedule O)	10	36,300
11	Benefits paid to or for members	11	2,477
12	Salaries, other compensation, and employee benefits	12	0
13	Professional fees and other payments to independent contractors	13	0
14	Occupancy, rent, utilities, and maintenance	14	0
15	Printing, publications, postage, and shipping	15	396
16	Other expenses (describe in Schedule O)	16	0
17	Total expenses. Add lines 10 through 16	17	39,173
18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	<1,438>
19	Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return)	19	15,528 68
20	Other changes in net assets or fund balances (explain in Schedule O)	20	0
21	Net assets or fund balances at end of year. Combine lines 18 through 20	21	14,089 68

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990-EZ (2018)



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Part II Balance Sheets (see the instructions for Part II)		Check if the organization used Schedule O to respond to any question in this Part II <input type="checkbox"/>	
		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	15,527.68	22 14,089.68
23	Land and buildings	0	23 0
24	Other assets (describe in Schedule O)	0	24 0
25	Total assets	15,527.68	25 14,089.68
26	Total liabilities (describe in Schedule O)	0	26 0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	15,527.68	27 14,089.68

Part III Statement of Program Service Accomplishments (see the instructions for Part III)		Check if the organization used Schedule O to respond to any question in this Part III <input type="checkbox"/>	
		Expenses (Required for section 501(c)(3) and 501(c)(4) organizations, optional for others.)	
What is the organization's primary exempt purpose? Charity			
Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.			

28	Support for Sacred Heart Church and School		

28a	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	5,445	28
29	Support for Various local Charities as well as individuals in need throughout Lincoln and surrounding Counties		

29a	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	26,499	29
30	Support organizations which promotes christian values		

30a	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	4,356	30
31	Other program services (describe in Schedule O)		
	(Grants \$) If this amount includes foreign grants, check here <input type="checkbox"/>	0	31a
32	Total program service expenses (add lines 28a through 31a)		32 36,300

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated—see the instructions for Part IV)		Check if the organization used Schedule O to respond to any question in this Part IV <input type="checkbox"/>	

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Timothy B Muldoon, Sr Grand Knight	5	0	0	0
Charles H. Lenau Financial Secretary	8	0	0	0
Larry D. Bennett Deputy Grand Knight	1	0	0	0
David L. Mattingly Chancellor	1	0	0	0
Michael D. Burgess Recorder	1	0	0	0
Jacob D. Ellis Treasurer	1	0	0	0
Gregory B. Chrismer Warden	1	0	0	0
Richard M. Mulcahy Inside Guard	1	0	0	0
Blake Dickheer Outside Guard	1	0	0	0
Glen J. Sills II 1yr Trustee	1	0	0	0
Richard Green 2yr Trustee	1	0	0	0
Clarence J. Brown 3 yr Trustee	1	0	0	0

Part V. Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

	Yes	No	
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	✓	33
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions	34	✓	34
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a	✓	35a
b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		35b
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		35c
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	✓	36
37a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37a 0	37a	0	37a
b Did the organization file Form 1120-POL for this year?	37b	✓	37b
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	38a	✓	38a
b If "Yes," complete Schedule L, Part II and enter the total amount involved	38b		38b
39 Section 501(c)(7) organizations. Enter:	39a		39a
a Initiation fees and capital contributions included on line 9	39b		39b
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►			40a
b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I			40b
c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			40b
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization		0	40c
e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T		0	40e
41 List the states with which a copy of this return is filed ►			
42a The organization's books are in care of ► Charles Lenau Located at ► P.O. Box 0201, Truxton, MO		Telephone no. ► 314-973-3631 ZIP + 4 ► 63381-0201	
b 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 account)? If "Yes," enter the name of the foreign country ►	42b	✓	42b
See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country ►	42c	✓	42c
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ► 43 0			43
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	✓	44a
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b	✓	44b
c Did the organization receive any payments for indoor tanning services during the year?	44c	✓	44c
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			44d
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	✓	45a
b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions			45b

		Yes	No
46	Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	46	✓ ?1

Part VI Section 501(c)(3) Organizations Only

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

		Yes	No
47	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	47	✓ ?1
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓ ?1
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓ ?1
b	If "Yes," was the related organization a section 527 organization?	49b	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."		

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

f Total number of other employees paid over \$100,000 ►

51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ►

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A ► Yes No

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here ?1	<i>Charles Lenau</i>		Date <i>June 24, 2019</i>
	Signature of officer	Charles Lenau, Financial Secretary	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date
			Check <input type="checkbox"/> if self-employed
	Firm's name ►		Firm's EIN ►
	Firm's address ►		Phone no

May the IRS discuss this return with the preparer shown above? See instructions ► Yes No

SCHEDULE G
(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Department of the Treasury
Internal Revenue Service

- Attach to Form 990 or Form 990-EZ.
- Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

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Name of the organization

Sacred Heart K of C Council No. 6525

Employer identification number

510141847

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a Mail solicitations e Solicitation of non-government grants
b Internet and email solicitations f Solicitation of government grants
c Phone solicitations g Special fundraising events
d In-person solicitations

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

2b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No		
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
Total					

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**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.► Attach to Form 990 or 990-EZ.
► Go to www.irs.gov/Form990 for the latest information.

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Organizations Benefitting from the Charitable contributions made by the Knights of Columbus Council 6525 includes:

1) Scholarships to Catholic High Schools (Five each year)	\$2,000 00
2) Contributions to individuals entering the Seminary	\$1,000.00
3) Church Food Pantry.	\$1,000 00
4) Organizations supporting persons with Developmental Disabilities.	\$4,468.00
5) Sacred Heart Elementary School	\$6,900 00
6) Providing Thanksgiving dinners to approximately 500 families in Lincoln and surrounding counties.	\$2,785 00
7) Provide dinner and evening entertainment for Disables Adults twice annually.	\$2,600 00
8) Host Softball Tournament for Special Olympic individules.	\$ 800 00
9) Charitable gifts to needy individuals and/or Organizations.	\$14,747.00