

Form 990
Department of the Treasury
Internal Revenue Service

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/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

- B Check if applicable
Address change
Name change
Initial return
Final return/terminated
Amended return
Application pending

C Name of organization: KNIGHTS OF COLUMBUS
Doing business as
Number and street (or P O box if mail is not delivered to street address): ONE COLUMBUS PLAZA
Room/suite
City or town, state or province, country, and ZIP or foreign postal code: NEW HAVEN, CT 065103326
F Name and address of principal officer: MICHAEL J O'CONNOR, ONE COLUMBUS PLAZA, NEW HAVEN, CT 065103326

D Employer identification number: 06-0416470
E Telephone number: (203) 752-4000
G Gross receipts \$ 4,931,420,267
H(a) Is this a group return for subordinates? No
H(b) Are all subordinates included? No
H(c) Group exemption number

- I Tax-exempt status: 501(c)(3)
J Website: WWW KOFC ORG
K Form of organization: Corporation

L Year of formation: 1882
M State of legal domicile: CT

Part I Summary

1 Briefly describe the organization's mission or most significant activities
A CATHOLIC FRATERNAL ORGANIZATION DEDICATED TO PROMOTING AND CONDUCTING EDUCATIONAL, CHARITABLE, RELIGIOUS AND SOCIAL WELFARE WORKS, RENDERING MUTUAL AID ASSISTANCE TO SICK AND NEEDY MEMBERS AND THEIR FAMILIES, AND PROVIDING INSURANCE PRODUCTS AND ANNUITIES TO BENEFIT MEMBERS, WIVES AND CHILDREN

Table with 2 columns: Description, Amount. Rows include: 2 Check this box, 3 Number of voting members (26), 4 Number of independent voting members (20), 5 Total number of individuals employed (3,447), 6 Total number of volunteers (1,977,000), 7a Total unrelated business revenue (14,621,590), 7b Net unrelated business taxable income (2,836,239)

Table with 4 columns: Description, Prior Year, Current Year, Net Assets or Fund Balances. Rows include: 8-12 Revenue (Total 2,418,570,779), 13-19 Expenses (Total 2,337,563,708), 20-22 Net Assets or Fund Balances (Total 2,151,988,714)

Part II Signature Block

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: Signature of officer MICHAEL J O'CONNOR SUPREME SECRETARY, Date 2019-11-05

Paid Preparer Use Only: Print/Type preparer's name SEWARD AND MONDE CPA'S, Preparer's signature, Date, Firm's name, Firm's address, Firm's EIN, Phone no.

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III **1** Briefly describe the organization's mission

KNIGHTS OF COLUMBUS IS A CATHOLIC FRATERNAL ORGANIZATION DEDICATED TO PROMOTING AND CONDUCTING EDUCATIONAL, CHARITABLE, RELIGIOUS AND SOCIAL WELFARE WORKS, RENDERING MUTUAL AID AND ASSISTANCE TO SICK AND NEEDY MEMBERS AND THEIR FAMILIES, AND PROVIDING INSURANCE PRODUCTS AND ANNUITIES TO BENEFIT MEMBERS, WIVES AND CHILDREN

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses \$ 1,915,249,924 including grants of \$) (Revenue \$ 1,319,938,851)
See Additional Data

4b (Code) (Expenses \$ 388,024,871 including grants of \$) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ 34,288,913 including grants of \$ 34,288,913) (Revenue \$ 5,296,672)
See Additional Data

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 2,337,563,708

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
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? <i>If "Yes," complete Schedule J</i>	Yes	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part I</i>		
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? <i>If "Yes," complete Schedule L, Part II</i>		No
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? <i>If "Yes," complete Schedule L, Part III</i>		No
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)		
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
c	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? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		No
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? <i>If "Yes," complete Schedule R, Part I</i>	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	Yes	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	Yes	
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>		
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? <i>If "Yes," complete Schedule R, Part VI</i>		No
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	Yes	

Part 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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

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	3,447			
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 e-file (see instructions)	2b	Yes			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year? . . .	3a	Yes			
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	Yes			
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 account)? . . .	4a	Yes			
b If "Yes," enter the name of the foreign country ▶ CA , RP , VT , MX , DR , PL , BE See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .	5a		No		
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No		
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 organization solicit any contributions that were not tax deductible as charitable contributions? . . .	6a		No		
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).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No		
d If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .	7f		No		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g				
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 sponsoring organization have excess business holdings at any time during the year?					
8					
9a 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					
a Initiation fees and capital contributions included on Part VIII, line 12	10a				
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					
a Gross income from members or shareholders	11a				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?					
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a				
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				
c Enter the amount of reserves on hand	13c				
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a		No		
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? If "Yes," see instructions and file Form 4720, Schedule N	15	Yes			
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O	16		No		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 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

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (26); 1b Enter the number of voting members included in line 1a, above, who are independent (20); 2 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? (No); 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? (No); 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? (No); 5 Did the organization become aware during the year of a significant diversion of the organization's assets? (No); 6 Did the organization have members or stockholders? (Yes); 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? (Yes); 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? (Yes); 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? (Yes); b Each committee with authority to act on behalf of the governing body? (Yes); 9 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 (No)

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (Yes); 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? (Yes); 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? (Yes); 11b Describe in Schedule O the process, if any, used by the organization to review this Form 990; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 (Yes); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (Yes); 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done (Yes); 13 Did the organization have a written whistleblower policy? (Yes); 14 Did the organization have a written document retention and destruction policy? (Yes); 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? a The organization's CEO, Executive Director, or top management official (Yes); b Other officers or key employees of the organization (Yes); 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? (Yes); 16b 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 organization's exempt status with respect to such arrangements? (Yes)

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the States with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you made these available Check all that apply: Own website, Another's website, Upon request (checked), Other (explain in Schedule O); 19 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; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: MICHAEL J O'CONNOR SUPREME SECRETARY ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326 (203) 752-4822

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

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, or 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) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										

1b Sub-Total			
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)	8,815,822	0	557,622

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 193

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation
NESCO RESOURCE 999 ORONOQUE LANE STRATFORD, CT 06614	STAFFING SERVICES	10,370,220
ST JOSEPH PRINTING LTD 50 MACINTOSH BLVD CONCORD, ONTARIO L4K 4P3 CA	PRINTING SERVICES	3,396,209
COMPUTER SCIENCES CORPORATION 200 WEST CESAR CHAVEZ ST AUSTIN, TX 78701	IT SERVICES	3,191,284
CREATIVE GROUP INC 619 N LYNNDALE DRIVE APPLETON, WI 54914	EVENT PLANNING SERVICES	1,674,805
THE BOSTON COMPANY ASSET MANAGEMENT BNY MELLON CENTER 1 BOSTON PLACE BOSTON, MA 02108	INVESTMENT MANAGEMENT SERVICES	1,610,565

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 363

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a			
	b Membership dues	1b			
	c Fundraising events	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e			
	f All other contributions, gifts, grants, and similar amounts not included above	1f			
	g Noncash contributions included in lines 1a - 1f \$ _____				
h Total. Add lines 1a-1f					

Program Service Revenue			Business Code			
	2a PREMIUM INCOME		524113	1,226,431,291	1,214,086,414	12,344,877
b SUPPLEMENTARY CONTRACT		524113	83,852,265	83,852,265		
c INTEREST MAINTENANCE R		524113	17,432,241	17,432,241		
d MEMBERSHIP DUES		900099	3,603,005	3,603,005		
e FEES-DEPOSIT CONTRACTS		524113	2,020,358	2,020,358		
f All other program service revenue			4,241,240	4,241,240		
g Total. Add lines 2a-2f			1,337,580,400			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			980,730,829		2,276,713	978,454,116
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
	b Less rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss)			40,149,010			40,149,010
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
	b Less direct expenses	b					
	c Net income or (loss) from fundraising events						
	9a Gross income from gaming activities See Part IV, line 19	a					
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	Business Code						
11a CERTIFICATE LOANS	524113		49,226,609			49,226,609	
b MORTGAGE LOANS	524113		10,883,931			10,883,931	
c							
d All other revenue							
e Total. Add lines 11a-11d			60,110,540				
12 Total revenue. See Instructions			2,418,570,779	1,325,235,523	14,621,590	1,078,713,666	

Part IX Statement of Functional Expenses

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

Do not include amounts reported on lines 6b, 7b, 8b, 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.	28,705,364	28,705,364		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	368,431	368,431		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	5,215,118	5,215,118		
4 Benefits paid to or for members.	1,915,249,924	1,915,249,924		
5 Compensation of current officers, directors, trustees, and key employees.	7,441,661	7,441,661		
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.	65,232,733	65,232,733		
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	15,061,787	15,061,787		
9 Other employee benefits.	47,158,203	47,158,203		
10 Payroll taxes.	11,518,594	11,518,594		
11 Fees for services (non-employees)				
a Management.				
b Legal.	3,626,529	3,626,529		
c Accounting.	1,497,321	1,497,321		
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.	11,215,089	11,215,089		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	9,603,225	9,603,225		
12 Advertising and promotion.	2,432,345	2,432,345		
13 Office expenses.	15,974,197	15,974,197		
14 Information technology.	5,230,624	5,230,624		
15 Royalties.				
16 Occupancy.	6,283,541	6,283,541		
17 Travel.	6,485,860	6,485,860		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.	3,478,217	3,478,217		
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	3,921,764	3,921,764		
23 Insurance.	3,258,826	3,258,826		
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.)				
a COMMISSIONS ON PREMIUM	106,598,375	106,598,375		
b UBI AND OTHER TAXES	607,063	607,063		
c SUNDRY GENERAL EXPENSE	23,891,101	23,891,101		
d BENEVOLENCE PROGRAMS	16,587,661	16,587,661		
e All other expenses	20,920,155	20,920,155		
25 Total functional expenses. Add lines 1 through 24e.	2,337,563,708	2,337,563,708	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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	70,648,849	1	48,778,259
	2 Savings and temporary cash investments	602,902,716	2	341,078,542
	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		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 other basis Complete Part VI of Schedule D	10a 89,237,546		
	b Less accumulated depreciation	10b 52,788,746	37,929,372	10c 36,448,800
	11 Investments—publicly traded securities	21,865,968,626	11	22,416,475,627
	12 Investments—other securities See Part IV, line 11	2,150,673,343	12	2,358,495,682
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets See Part IV, line 11	234,007,547	15	234,893,004
16 Total assets. Add lines 1 through 15 (must equal line 34)		24,962,130,453	16	25,436,169,914
Liabilities	17 Accounts payable and accrued expenses	68,005,904	17	25,463,177
	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	1,565,622	21	1,894,178
	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	22,748,334,673	25	23,256,823,845
	26 Total liabilities. Add lines 17 through 25		22,817,906,199	26
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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 <input checked="" type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds	0	30	0
	31 Paid-in or capital surplus, or land, building or equipment fund	0	31	0
	32 Retained earnings, endowment, accumulated income, or other funds	2,144,224,254	32	2,151,988,714
33 Total net assets or fund balances		2,144,224,254	33	2,151,988,714
34 Total liabilities and net assets/fund balances		24,962,130,453	34	25,436,169,914

Part 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	2,418,570,779
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,337,563,708
3	Revenue less expenses Subtract line 2 from line 1	3	81,007,071
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	2,144,224,254
5	Net unrealized gains (losses) on investments	5	-127,180,129
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	53,937,518
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	2,151,988,714

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 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
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 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
 Separate basis Consolidated basis Both consolidated and separate basis
- c** 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?
 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?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 06-0416470

Name: KNIGHTS OF COLUMBUS

Form 990 (2018)

Form 990, Part III, Line 4a:

PROGRAMS FOR THE PAYMENT OF IRC SEC 501(C)(8) BENEFITS TO MEMBERS, WIVES AND THEIR DEPENDENTS KNIGHTS OF COLUMBUS IS A CATHOLIC FAMILY FRATERNAL SERVICE ORGANIZATION WITH OVER 1.9 MILLION MEMBERS, FOUNDED IN 1882 FOR THE FOLLOWING PURPOSES (A) RENDERING AID TO ITS MEMBERS, THEIR FAMILIES AND BENEFICIARIES OF MEMBERS AND THEIR FAMILIES, (B) RENDERING MUTUAL AID AND ASSISTANCE TO ITS SICK, DISABLED AND NEEDY MEMBERS AND THEIR FAMILIES, (C) PROMOTING SOCIAL WORK AMONG ITS MEMBERS AND THEIR FAMILIES, AND (D) PROMOTING AND CONDUCTING EDUCATIONAL, CHARITABLE, RELIGIOUS SOCIAL WELFARE, WAR RELIEF AND WELFARE AND PUBLIC RELIEF WORK TO MORE EFFECTIVELY CARRY OUT ITS PURPOSES THE CORPORATION, A CONNECTICUT SPECIALLY CHARTERED CORPORATION WITHOUT CAPITAL STOCK, PROVIDES COVERAGE FOR LIFE INSURANCE, ACCIDENT AND HEALTH, LONG TERM CARE AND ANNUITY BENEFITS TO MEMBERS, WIVES, WIDOWS AND MINOR CHILDREN PRINCIPALLY IN THE UNITED STATES AND CANADA THE TOTAL IRC SEC 501(C)(8) BENEFITS ACCRUED TO MEMBERS OF \$1,915,249,924 WERE INCURRED FOR THE PURPOSE FOR WHICH THE ORGANIZATION IS EXEMPT IN 2018, 19,911 DEATH CLAIMS WERE INCURRED THE AVERAGE SIZE OF A LIFE INSURANCE CERTIFICATE IS \$61,020 THE AVERAGE AGE OF A CERTIFICATE HOLDER IS 49

Form 990, Part III, Line 4b:

PROGRAMS FOR EXPENSES INCURRED NECESSARY IN THE KNIGHTS OF COLUMBUS INSURANCE AND FRATERNAL ENDEAVORS

Form 990, Part III, Line 4c:

PROGRAMS OF ASSISTANCE TO OTHER SOCIAL ACTION, EDUCATIONAL, CHARITABLE, BENEVOLENT, MORAL AND RELIGIOUS ENDEAVORS

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CARL A ANDERSON DIRECTOR/SUPREME KNIGHT	45 00 15 00	X		X				1,763,220	0	33,205
MICHAEL G CONRAD DIRECTOR	5 00 0 00	X						33,903	0	0
VIRGIL C DECHANT DIRECTOR	3 00 5 00	X						22,742	0	0
SCOTT A FLOOD DIRECTOR	5 00 0 00	X						32,303	0	0
MICHAEL T GILLIAM DIRECTOR	5 00 0 00	X						32,303	0	0
TOMMY C HARGER DIRECTOR	5 00 0 00	X						32,303	0	0
COLIN R JORSCH JR DIRECTOR	5 00 0 00	X						30,703	0	0
PATRICK E KELLY DIRECTOR/DEP SUPREME KNIGHT	44 00 11 00	X		X				477,346	0	41,638
LARRY W KUSTRA DIRECTOR	5 00 5 00	X						32,142	0	0
PAUL J LAMBERT DIRECTOR	5 00 0 00	X						32,303	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
ARCIE J LIM DIRECTOR	5 00 0 00	X						11,115	0	0
MOST REV WILLIAM E LORI DIRECTOR/SUPREME CHAPLAIN	5 00 0 00	X		X				135,000	0	0
JOHN A MARRELLA DIRECTOR/SUPREME ADVOCATE	5 00 0 00	X		X				641,078	0	33,205
JAVIER S MARTINEZ DIRECTOR	5 00 0 00	X						4,800	0	0
PATRICK T MASON DIRECTOR	5 00 0 00	X						30,703	0	0
ANTHONY V MINOPOLI DIRECTOR/EXECUTIVE VP INVESTMENTS	5 00 0 00	X						696,320	0	41,638
CARMINE V MUSUMECI DIRECTOR	5 00 0 00	X						33,103	0	0
GRAYDON A NICHOLAS DIRECTOR	5 00 0 00	X						34,281	0	0
MICHAEL J O'CONNOR DIRECTOR/SUPREME SECRETARY	5 00 0 00	X		X				396,251	0	41,265
ARTHUR LOUIS L PETERS DIRECTOR	5 00 0 00	X						29,814	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JOSE C REYES JR DIRECTOR	5 00	X						32,290	0	0
DANIEL ROSSI DIRECTOR	5 00	X						33,103	0	0
RONALD F SCHWARZ DIRECTOR/SUPREME TREASURER	48 00	X		X				291,603	0	30,891
JAMES R SCROGGIN DIRECTOR	5 00	X						32,303	0	0
BRIAN W SIMER DIRECTOR	5 00	X						33,103	0	0
TERRY L SIMONTON DIRECTOR	5 00	X						10,303	0	0
THOMAS P SMITH JR DIRECTOR/EXECUTIVE VP INSURANCE	50 00	X						561,683	0	16,886
KENNETH E STOCKWELL DIRECTOR	5 00	X						30,703	0	0
MICHAEL L WILLS DIRECTOR	5 00	X						33,103	0	0
MARC A BRUNET VICE PRESIDENT/ACTUARY	45 00			X				285,893	0	31,550

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL C CONFORTI MD MEDICAL DIRECTOR	45 00 0 00			X				134,412	0	5,687
JOHN J KENNEDY CHIEF FINANCIAL OFFICER	50 00 5 00			X				563,032	0	41,384
RONALD D FRANZLUEBBERS SENIOR VP/CHIEF ACTUARY	45 00 0 00				X			540,820	0	40,228
BETH M ELFREY SENIOR VP/DEPUTY GEN COUNSEL	45 00 0 00					X		358,343	0	41,638
E NEILL JORDAN VICE PRESIDENT FIXED INCOME	45 00 0 00					X		343,795	0	39,109
PAUL MCMAHON DIRECTOR OF MARKETING	45 00 0 00					X		356,684	0	39,587
MARK MCMULLEN SENIOR VP MEMBERSHIP & FRAT MISSION	45 00 0 00					X		337,927	0	38,073
KEVIN SHINKLE SENIOR VP/CHF COMMUNICATIONS OFFICER	45 00 0 00					X		334,989	0	41,638

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements
► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
KNIGHTS OF COLUMBUS

Employer identification number
06-0416470

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ► _____

4 Number of states where property subject to conservation easement is located ► _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ► \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ► \$ _____

(ii) Assets included in Form 990, Part X ► \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ► \$ _____

b Assets included in Form 990, Part X ► \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table
- | | Amount |
|--|--------|
| c Beginning balance | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Temporarily restricted endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by
- | | | |
|--|-----|----|
| (i) unrelated organizations | Yes | No |
| (ii) related organizations | | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		14,902,885		14,902,885
b Buildings		51,333,658	32,302,446	19,031,212
c Leasehold improvements				
d Equipment		22,293,806	19,779,103	2,514,703
e Other		707,197	707,197	0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				36,448,800

Part VII Investments—Other Securities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A) CERTIFICATE LOANS AND LIENS	1,097,606,264	C
(B) OTHER INVESTED ASSETS	1,010,527,285	C
(C) MORTGAGE LOANS	250,362,133	C
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	2,358,495,682	

Part VIII Investments—Program Related. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)		

Part IX Other Assets. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 15)	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
See Additional Data Table	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	23,256,823,845

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	2,384,894,922
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a		-836,371
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	-836,371
3	Subtract line 2e from line 1		3	2,385,731,293
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		31,145,819
b	Other (Describe in Part XIII)	4b		1,693,667
c	Add lines 4a and 4b		4c	32,839,486
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	2,418,570,779

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	2,304,724,222
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	0
3	Subtract line 2e from line 1		3	2,304,724,222
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		31,145,819
b	Other (Describe in Part XIII)	4b		1,693,667
c	Add lines 4a and 4b		4c	32,839,486
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	2,337,563,708

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 06-0416470

Name: KNIGHTS OF COLUMBUS

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) Book Value
RESERVE UNDER LIFE CERTIFICATES	14,429,369,753
RESERVE UNDER ACCIDENT AND HEALTH CERTIFICATES	585,358,963
LIABILITY FOR DEPOSIT-TYPE CONTRACT FUNDS	7,137,584,239
UNPAID CLAIMS - LIFE	58,429,619
DIVIDENDS DUE AND UNPAID	980,427
DIVIDENDS APPORTIONED FOR PAYMENT IN THE FOLLOWING YEAR	264,210,767
PREMIUMS RECEIVED IN ADVANCE	6,110,614
AMOUNTS WITHHELD AS TRUSTEE	2,620,037
AMOUNTS HELD FOR FIELDWORKERS' ACCOUNT	260,947
REMITTANCES AND ITEMS NOT ALLOCATED	13,611,176

Form 990, Schedule D, Part X, - Other Liabilities

1 (a) Description of Liability	(b) Book Value
LIABILITY FOR BENEFITS FOR EMPLOYEES AND RETIREES	248,751,416
INTEREST MAINTENANCE RESERVE	47,937,339
ASSET VALUATION RESERVE	301,345,595
UNPRESENTED CHECKS AND DUE TO REINSURERS	5,843,791
ADVANCE PAYMENTS FOR COUNCIL SUPPLIES	12,809
FUNDS HELD IN ESCROW - FOURTH DEGREE FUND	2,117
DUE TO AFFILIATES	989,681
UNPAID CLAIMS - ACCIDENT AND HEALTH	529,676
COLLATERAL LIABILITY ON LOANED SECURITIES	152,874,879

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B	MEMBER ASSESSMENT THAT WILL BE USED FOR MATTERS CONCERNING LIFE, FAMILY, MARRIAGE, AND SIMILAR PRIORITIES IN BUILDING A CULTURE OF LIFE

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	CULTURE OF LIFE FUND 1,693,667

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	CULTURE OF LIFE FUND 1,693,667

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	THERE IS NO FIN 48 NOTE IN THE ORGANIZATION'S FINANCIAL STATEMENTS AND THE ORGANIZATION HAS NOT IDENTIFIED ANY UNCERTAIN TAX POSITIONS UNDER FIN 48 (ASC 740)

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No 1545-0047

2018

**Open to Public
Inspection**

- ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Department of the Treasury
Internal Revenue Service

Name of the organization
KNIGHTS OF COLUMBUS

Employer identification number

06-0416470

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
See Add'l Data					
3a Sub-total	1	391			279,822,375
b Total from continuation sheets to Part I					4,578,883,406
c Totals (add lines 3a and 3b)	1	391			4,858,705,781

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
STIPENDS	NORTH AMERICA	17	25,420	CHECK			

Part IV Foreign Forms

- 1 Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	GRANTS MADE TO ORGANIZATIONS ARE FOR GENERAL SUPPORT OF THE RECIPIENT ORGANIZATION THE ORGANIZATION VERIFIES THAT ALL GRANTS ARE PROVIDED TO ENTITIES THAT HAVE AN EQUIVALENT STATUS TO A 501(C)(3) ORGANIZATION THE ORGANIZATION REQUIRES DONEE ORGANIZATIONS TO PROVIDE AN ACCOUNTING OF HOW THE GRANT FUNDS WERE EXPENDED GRANTS TO INDIVIDUAL RECIPIENTS ARE DETERMINED BASED ON APPLICATION AND VERIFICATION OF ELIGIBILITY INDIVIDUALS ELIGIBLE TO APPLY ARE FROM A LARGE POOL OF INDIVIDUALS AND ARE CHOSEN OBJECTIVELY BY A PANEL OF INDEPENDENT PERSONS

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART IV, QUESTION 3	LESS THAN 10% OWNERSHIP INTERESTS IN FOREIGN CORPORATIONS DO NOT REQUIRE FILING OF FORM 5471

Additional Data

Software ID:

Software Version:

EIN: 06-0416470

Name: KNIGHTS OF COLUMBUS

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	385	PROGRAM SERVICES	PROGRAMS FOR INSURANCE AND FRATERNAL ENDEAVORS	255,037,670
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS	GRANTMAKING	1,140,336

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
EAST ASIA AND THE PACIFIC	0	0	GRANT TO RECIPIENT	GRANTMAKING	18,000
EUROPE (INCLUDING ICELAND & GREENLAND)	1	6	GRANTS TO RECIPIENTS	GRANTMAKING	3,704,812

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	GRANT TO RECIPIENT	GRANTMAKING	50,000
RUSSIA AND NEIGHBORING STATES	0	0	GRANTS TO RECIPIENTS	GRANTMAKING	205,000

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA	0	0	GRANT TO RECIPIENT INVESTMENTS	GRANTMAKING	96,970
MIDDLE EAST AND NORTH AFRICA	0	0	INVESTMENTS		19,569,587

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS		214,169,077
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0	INVESTMENTS		1,271,438,583

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
NORTH AMERICA	0	0	INVESTMENTS		2,844,696,600
EAST ASIA AND THE PACIFIC	0	0	INVESTMENTS		247,073,969

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SOUTH AMERICA	0	0	INVESTMENTS		1,505,177

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN	SUPPORT OF WORLD YOUTH DAY 2019 IN PANAMA	50,000	CHECK			
		SUB-SAHARAN AFRICA	SUPPORT OF FAMILY AND OUTREACH AND SPIRITUAL RETREAT CENTER IN AFRICA	96,970	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		RUSSIA AND NEIGHBORING STATES	SUPPORT JPPI CENTER IN UKRAINE	100,000	WIRE TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT VARIOUS PROGRAMS	40,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT WORLD MEETING OF FAMILIES	200,000	WIRE TRANSFER			
		NORTH AMERICA	SUPPORT THE BICENTENARY OF THE CHURCH IN WESTERN CANADA	56,408	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT 2018 PAPAL VISIT	150,000	WIRE TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT EXPANSION OF THE ORGANIZATION'S EUROPEAN OPERATION	100,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT PROGRAMS	5,961	WIRE TRANSFER			
		NORTH AMERICA	SPONSOR OF NATIONAL MARCH FOR LIFE IN OTTAWA, CANADA	19,809	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SUPPORT VARIOUS PROGRAMS	254,438	CHECKS			
		NORTH AMERICA	SUPPORT "RISE UP" NATIONAL CONFERENCE IN CANADA	15,042	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	PRO-LIFE ADVOCACY AGAINST EUTHANASIA AND PHYSICIAN ASSISTED SUICIDE	45,550	CHECK			
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT MAINTENANCE OF PLAYGROUNDS AND PROGRAMS IN ROME, ITALY	889,004	WIRE TRANSFERS			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT VARIOUS PROGRAMS	1,600,000	CHECK			
		EUROPE (INCLUDING ICELAND & GREENLAND)	DISTRIBUTION OF EARNINGS FROM THE PACEM IN TERRIS FUND	120,000	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT PUBLICATION OF SEVERAL BOOKS	25,086	WIRE TRANSFER			
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT PROGRAMS	200,000	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	PRO-LIFE ADVOCACY	15,262	WIRE TRANSFER			
		RUSSIA AND NEIGHBORING STATES	SUPPORT PROGRAMS	90,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SUPPORT ST FRANCIS XAVIER RELIC PILGRIMAGE	32,488	CHECK			
		NORTH AMERICA	SUPPORT VARIOUS PROGRAMS	190,175	CHECK			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	BROADCASTS OF PAPAL EVENTS	88,413	WIRE TRANSFERS			
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT EFFORTS TO PRESERVE THE 8TH AMENDMENT TO THE IRISH CONSTITUTION	250,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT FOR INTERNATIONAL LITURGY CONFERENCE	26,348	WIRE TRANSFER			
		NORTH AMERICA	DONATIONS TO CANADIAN PROVINCES' SPECIAL OLYMPICS ORGANIZATIONS	15,604	CHECKS			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	DONATIONS TO MEXICAN STATES' SPECIAL OLYMPICS ORGANIZATIONS	50,000	CHECKS			
		RUSSIA AND NEIGHBORING STATES	SUPPORT PROGRAMS	15,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		EUROPE (INCLUDING ICELAND & GREENLAND)	SUPPORT 2018 INDEPENDENCE DAY CELEBRATION	10,000	CHECK			
		EAST ASIA AND THE PACIFIC	SUPPORT FOR SCHOLARSHIPS FOR STUDENTS IN THE PHILIPPINES	18,000	WIRE TRANSFER			

Form 990 Schedule F Part II - Grants or Entities Outside The United States

(a) Name of organization	(b) IRS code section and EIN(if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	SUPPORT MASTER PLAN FOR NEW FACILITIES AND PROGRAMS	238,000	WIRES TRANSFERS			
		NORTH AMERICA	SUPPORT THE MICHAEL J MCGIVNEY FUND AND OTHER FUNDS	66,781	WIRE TRANSFER	115,359	PROVIDE SALARIES AND FRINGE	BOOK

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

**Grants and Other Assistance to Organizations,
Governments and Individuals in the United States**

OMB No 1545-0047

2018

**Open to Public
Inspection**

Department of the
Treasury
Internal Revenue Service

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

Name of the organization
KNIGHTS OF COLUMBUS

Employer identification number

06-0416470

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 70

3 Enter total number of other organizations listed in the line 1 table ▶ 4

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22

Part III can be duplicated if additional space is needed

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) STIPENDS	126	368,431			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
PART I, LINE 2	GRANTS MADE TO ORGANIZATIONS ARE FOR GENERAL SUPPORT OF THE RECIPIENT ORGANIZATION THE ORGANIZATION VERIFIES THAT SUBSTANTIALLY ALL GRANTS ARE PROVIDED TO ENTITIES THAT HAVE AN EQUIVALENT STATUS TO A 501(C)(3) ORGANIZATION THE ORGANIZATION REQUIRES DONEE ORGANIZATIONS TO PROVIDE AN ACCOUNTING OF HOW THE GRANT FUNDS WERE EXPENDED GRANTS TO INDIVIDUAL RECIPIENTS ARE DETERMINED BASED ON APPLICATION AND VERIFICATION OF ELIGIBILITY INDIVIDUALS ELIGIBLE TO APPLY ARE FROM A LARGE POOL OF INDIVIDUALS AND ARE CHOSEN OBJECTIVELY BY A PANEL OF INDEPENDENT PERSONS

Additional Data

Software ID:
Software Version:
EIN: 06-0416470
Name: KNIGHTS OF COLUMBUS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN WHEELCHAIR MISSION 2309 LAS POSAS ROAD SUITE C-501 CAMARILLO, CA 930100000	26-4571639	501(C)(3)	300,000				FOR THE ACQUISITION AND DISTRIBUTION OF WHEELCHAIRS TO THE NEEDY
APOSTLES OF THE SACRED HEART OF JESUS 265 BENHAM STREET HAMDEN, CT 065142801	06-0653064	501(C)(3)	10,500				SUPPORT VOCATIONS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHDIOCESE FOR THE MILITARY SERVICE USA 1025 MICHIGAN AVENUE NE WASHINGTON, DC 200170469	13-1624090	501(C)(3)	33,905				SUPPORT SEMINARIAN PROGRAM AND THE 10TH ANNUAL BENEFIT
ARCHDIOCESE OF BALTIMORE 320 CATHEDRAL STREET BALTIMORE, MD 212010000	52-0591535	501(C)(3)	1,000,000				SUPPORT CONSTRUCTION OF INNER-CITY ELEMENTARY SCHOOL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHDIOCESE OF HARTFORD 134 FARMINGTON AVENUE HARTFORD, CT 061053784	06-0646669	501(C)(3)	30,000				SUPPORT THE 2018 LENTEN CONFESSION CAMPAIGN
ARCHDIOCESE OF NEW YORK 1011 FIRST AVENUE 14TH FLOOR NEW YORK, NY 100220000	13-3089351	501(C)(3)	75,000				SUPPORT FOR WEEKLY SIRIUS XM BROADCAST

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHDIOCESE OF NEW ORLEANS 7887 WALMSLEY AVENUE NEW ORLEANS, LA 701250000	72-0408966	501(C)(3)	6,700				SUPPORT CHILD & YOUTH PROTECTION CATHOLIC LEADERSHIP CONFERENCE
ASSOCIATED Sulpicians of the United States 600 North Paca Street Baltimore, MD 212011920	52-6032525		10,000				SUPPORT PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSUMPTION OF THE BVM CHURCH 131 NORTH BEECH STREET MOUNT CARMEL, PA 178510000	82-2248151		15,000				SUPPORT THE ANNUAL UGCC PILGRIMAGE IMPLORING THE GRACES OF THE MOTHER OF GOD
ASOCIACION NACIONAL DE SACERDOTES HISPANOS PO BOX 3356 LUBBOCK, TX 794520000	58-1913100	501(C)(3)	15,000				SUPPORT OF THEIR 2018 CONVENTION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BASILICA OF THE NATIONAL SHRINE OF THE IMMACULATE CONCEPTION 400 MICHIGAN AVENUE NE WASHINGTON, DC 200171566	53-0196626	501(C)(3)	115,431				SUPPORT TV BROADCASTS AND USHER MINISTRY PROGRAM
BECKET FUND FOR RELIGIOUS LIBERTIES 3000 K STREET NW SUITE 220 WASHINGTON, DC 200070000	52-1858532	501(C)(3)	150,000				SUPPORT OF 2018 PROGRAMS AND THE CANTERBURY MEDAL DINNER

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CALIFORNIA CATHOLIC CONFERENCE 1119 K STREET 2ND FLOOR SACRAMENTO, CA 958140000	27-1530655		50,000				SUPPORT PROGRAMS
CATHEDRAL BASILICA OF SAINTS PETER & PAUL 1723 RACE STREET PHILADELPHIA, PA 191030000	23-1429839		15,000				SUPPORT FOR DOCUMENTARY ON ST KATHARINE DREXEL

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC ATHLETES FOR CHRIST 3703 CAMERON MILLS ROAD ALEXANDRIA, VA 223050000	65-1274581	501(C)(3)	40,000				SUPPORT OF THEIR 2018 PROGRAMS
CATHOLIC INFORMATION CENTER 1501 K STREET NW WASHINGTON, DC 200050000	52-1790727	501(C)(3)	10,000				SUPPORT FUNDRAISER FOR 2018 PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC SCHOOLS CENTER OF EXCELLENCE 3033 EXCELSIOR BOULEVARD SUITE 550 MINNEAPOLIS, MN 554160000	47-3560859	501(C)(3)	100,000				SUPPORT OF THE MASS OF THE HOLY SPIRIT AND COATS FOR KIDS INITIATIVE
CHOOSE LIFE AT YALE 206 ELM STREET NEW HAVEN, CT 065200000	32-0090956	501(C)(3)	6,500				SUPPORT PROGRAMS THAT UPHOLD THE DIGNITY OF HUMAN LIFE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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COLUMBUS HERITAGE COALITION INC 599 LEXINGTON AVENUE 36TH FLOOR NEW YORK, NY 100220000	82-4171317	501(C)(4)	35,000				SUPPORT PROGRAMS
CONNECTICUT FOOD BANK 2 RESEARCH PARKWAY WALLINGFORD, CT 06492	06-1063025	501(C)(3)	16,000				PURCHASE FOOD FOR THE HOLIDAYS FOR THOSE IN NEED

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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CONNECTICUT PROFESSIONAL TENNIS LLC 45 YALE AVENUE NEW HAVEN, CT 065150000	06-1481220	501(C)(3)	25,000				SUPPORT PROGRAMS FOR ADULTS AND CHILDREN
COUNCIL OF MAJOR SUPERIORS OF WOMEN RELIGIOUS 415 MICHIGAN AVENUE NE SUITE 420 WASHINGTON, DC 200170000	52-1792586	501(C)(3)	100,000				SUPPORT OF THE 2018 NATIONAL ASSEMBLY AND DIRECTOR OF OFFICER ADVANCEMENT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DIOCESE OF CAMDEN 631 MARKET STREET CAMDEN, NJ 081020000	21-0634498	501(C)(3)	15,000				SUPPORT CHILD AND YOUTH PROTECTION CATHOLIC LEADERSHIP CONFERENCE
DIOCESE OF FAIRBANKS 1316 PEGER ROAD FAIRBANKS, AK 997095199	92-0019215	501(C)(3)	15,000				SUPPORT OF FAMILIES FULLY ALIVE CONFERENCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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DO NO HARM INC 15464 EAST ORCHARD ROAD CENTENNIAL, CO 800160000	47-3226366		150,000				SUPPORT PRO-LIFE INITIATIVES
ETERNAL WORLD TELEVISION NETWORK ONLINE SERVICES 5817 OLD LEEDS ROAD IRONDALE, AL 352100000	63-0801391	501(C)(3)	250,000				SUPPORT PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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ETHICS AND PUBLIC POLICY CENTER 1730 M STREET NW SUITE 910 WASHINGTON, DC 200360000	52-1162185	501(C)(3)	85,000				SUPPORT 2018 CATHOLIC WOMEN'S FORUM
FAMILY INSTITUTE OF CONNECTICUT 77 BUCKINGHAM STREET HARTFORD, CT 061060000	06-1282690	501(C)(3)	151,000				SUPPORT PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDATION FOR THE ADVANCEMENT OF CATHOLIC SCHOOLS 467 BLOOMFIELD AVENUE BLOOMFIELD, CT 060020000	06-1359802	501(C)(3)	13,500				SUPPORT VARIOUS PROGRAMS AND SCHOLARSHIP FUND
GARY SINISE FOUNDATION PO BOX 50008 STUDIO CITY, CA 916145001	80-0587086	501(C)(3)	200,000				SUPPORT PROGRAMS FOR INJURED VETERANS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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INSTITUTE ON PRIESTLY FORMATION 2500 CALIFORNIA PLAZA OMAHA, NE 681780410	47-0376583	501(C)(3)	75,000				SUPPORT OF ANNUAL SUMMER PROGRAM FOR SEMINARIANS
JOHN CARROLL SOCIETY PO BOX 454 GLEN ECHO, MD 208120000	52-1164038		5,500				SUPPORT ANNUAL DINNER FOR PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KNIGHTS OF PETER CLAVER 1825 ORLEANS AVENUE NEW ORLEANS, LA 701162825	72-0393921	501(C)(8)	10,000				SUPPORT EDUCATIONAL SCHOLARSHIP
LIFE ATHLETES INC 210 SOUTH MICHIGAN 400 PLAZA BLDG SOUTH BEND, IN 466010000	22-3160231	501(C)(3)	75,000				SUPPORT PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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LITTLE SISTERS OF THE POOR INC 1365 ENFIELD STREET ENFIELD, CT 060824900	06-0882297	501(C)(3)	17,000				SUPPORT OF MINISTRY
MARKET NEW HAVEN 900 CHAPEL STREET SUITE 622 NEW HAVEN, CT 065100000	06-1578847	501(C)(6)	35,000				SUPPORT PROGRAMS

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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MARCH FOR LIFE EDUCATION AND DEFENSE FUND PO BOX 90300 WASHINGTON, DC 200900300	52-1231772	501(C)(3)	578,400				SUPPORT THE ANNUAL MARCH FOR LIFE
NATIONAL ALLIANCE OF FAITH AND JUSTICE PO BOX 77075 WASHINGTON, DC 200130000	55-0851833	501(C)(3)	10,000				SUPPORT 2018 INTERNATIONAL TEN POINT TRAINING

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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NATIONAL CATHOLIC OFFICE FOR THE DEAF 7202 BUCHANAN STREET LANDOVER HILLS, MD 207842236	52-1650979	501(C)(3)	15,000				SUPPORT PROGRAMS FOR DEAF AND HARD OF HEARING INDIVIDUALS
NATIONAL CATHOLIC PARTNERSHIP ON DISABILITY 415 MICHIGAN AVENUE NE WASHINGTON, DC 200174501	52-1262317	501(C)(3)	150,000				PROMOTE INCLUSION OF DISABLED PERSONS IN THE PASTORAL AND SACRAMENTAL LIFE OF THE CHURCH

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NATIONAL CATHOLIC PRAYER BREAKFAST 204 GUTHRIE AVENUE ALEXANDRIA, VA 223050000	20-0408543	501(C)(3)	75,000				GATHER PEOPLE TO RENEW DEDICATION TO FAITH AND THIS GREAT REPUBLIC
NATIONAL CENTER ON SEXUAL EXPLOITATION 440 1ST STREET NW SUITE 840 WASHINGTON, DC 200010000	13-2608326	501(C)(3)	150,000				SUPPORT OF CHANGING POLICIES AND PUBLIC OPINION ON SEXUAL EXPLOITATION

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NATIONAL GIANNA CENTER FOR WOMEN'S HEALTH AND FERTILITY INC 254 EASTON AVENUE NEW BRUNSWICK, NJ 089010000	32-0410270	501(C)(3)	25,000				SUPPORT SECOND ANNUAL GALA
NATIONAL LIFE CENTER INC 686 NORTH BROAD STREET WOODBURY, NJ 080961607	52-1052094	501(C)(3)	100,000				SUPPORT OPERATION OF A PRO-LIFE CRISIS PREGNANCY HOTLINE

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NATIONAL OFFICE FOR POST ABORTION RECONCILIATION AND HEALING INC PO BOX 070477 MILWAUKEE, WI 532070477	39-1673910	501(C)(3)	25,000				SUPPORT FOR PROGRAMS
NEIGHBORHOOD HOUSING SERVICES OF NEW HAVEN INC 333 SHERMAN AVENUE NEW HAVEN, CT 065110000	06-1021268	501(C)(3)	10,000				SUPPORT OPERATIONS BENEFITING LOW-INCOME HOUSING

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OUR LADY OF DELIVERANCE - SYRIAC CATHOLIC DIOCESE 21 E 23RD STREET BAYONNE, NJ 070020000	22-3510067		15,000				SUPPORT FOR SEMINARIAN EDUCATION
PARADISUS DEI INC 10850 RICHMOND AVENUE SUITE 100 HOUSTON, TX 770420000	06-1699099	501(C)(3)	750,000				SUPPORT DEVELOPMENT OF A SERIES OF DOCUMENTARIES ON MARRIAGE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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RELIGIOUS FREEDOM INSTITUTE 3307 M STREET NW SUITE 200 WASHINGTON, DC 200070000	81-0983298	501(C)(3)	225,000				SUPPORT OPERATIONS
SAINT CATHERINE CENTER FOR SPECIAL NEEDS INC 760 TAHMORE DRIVE FAIRFIELD, CT 068250000	47-2207552	501(C)(3)	10,000				SUPPORT ANNUAL DINNER

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SAINT MARY PARISH CORPORATION 5 HILLHOUSE AVENUE NEW HAVEN, CT 065110000	82-2922000		8,690				SUPPORT PROGRAMS
SISTERS OF LIFE 38 MONTEBELLO ROAD SUFFERN, NY 10901	06-1579167	501(C)(3)	20,500				SUPPORT THE 2018 FRIENDS OF THE SISTERS OF LIFE GALA

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SISTER THEA BOWMAN BLACK CATHOLIC EDUCATION FOUNDATION 4870 WOODRIDGE DRIVE HERMANTOWN, MN 558110000	03-0322037	501(C)(3)	20,000				SUPPORT SCHOLARSHIP AWARDS FOR AFRICAN AMERICAN SINGLE MOTHERS
SPECIAL OLYMPICS (50 STATE ORGANIZATIONS AND 1 DISTRICT ORGANIZATION) VARIOUS VARIOUS, CT 999999999		501(C)(3)	180,000				SUPPORT SPECIAL OLYMPICS STATE ORGANIZATIONS

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ST CATHERINE OF SIENA PARISH 220 SHELTON ROAD TRUMBULL, CT 066115161	06-0703539		10,000				SUPPORT PROGRAMS
SUSAN B ANTHONY FOUNDATION 1707 L STREET NW SUITE 550 WASHINGTON, DC 200360000	26-4878870	501(C)(3)	75,000				SUPPORT THE 11TH ANNUAL CAMPAIGN FOR LIFE GALA

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THE ALFRED E SMITH MEMORIAL FOUNDATION 1011 FIRST AVENUE 14TH FLOOR NEW YORK, NY 100220000	13-1553263	501(C)(3)	25,000				SUPPORT PROGRAMS TO BRING HOPE TO THE NEEDIEST CHILDREN REGARDLESS OF RACE, CREED OR COLOR
THE HARTFORD BISHOPS' FOUNDATION INC 134 FARMINGTON AVENUE HARTFORD, CT 061053784	81-1546773	501(C)(3)	500,000				SUPPORT THE ARCHDIOCESAN PARISH-WIDE CAPITAL CAMPAIGN / CATHEDRAL

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THE HARTFORD ROMAN CATHOLIC DIOCESAN CORPORATION 134 FARMINGTON AVENUE HARTFORD, CT 061050000	06-0646669		8,000				SUPPORT OF THE OFFICE FOR CATHOLIC SOCIAL JUSTICE MINISTRY 50TH ANNIVERSARY
THE HUMAN LIFE FOUNDATION INC 353 LEXINGTON AVENUE SUITE 802 NEW YORK, NY 100160000	23-7368926	501(C)(3)	41,400				SUPPORT 2018 GREAT DEFENDER OF LIFE DINNER

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THE ROMAN CATHOLIC CHURCH OF THE DIOCESE OF PHOENIX 400 EAST MONROE STREET PHOENIX, AZ 850042336	86-0223974	501(C)(3)	50,000				FINANCE THE DEVELOPMENT OF VIDEOS RELATING TO MEN'S SPIRITUALITY
UNITED STATES CONFERENCE OF CATHOLIC BISHOPS 3211 4TH STREET NE WASHINGTON, DC 200171104	53-0196617	501(C)(3)	1,726,861				SUPPORT PROGRAMS

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FELLOWSHIP OF CATHOLIC UNIVERSITY STUDENTS PO BOX 18710 GOLDEN, CO 804029809	84-1522811	501(C)(3)	20,000				SUPPORT VARIOUS PROGRAMS AND SCHOLARSHIP FUND
KNIGHTS OF COLUMBUS PUERTO RICO STATE COUNCIL PO BOX 1373 BAYAMON, PR 009601373	66-0620347	501(C)(8)	6,000				SUPPORT PUERTO RICO STATE SCHOLARSHIPS FOR THE 2018-2019 ACADEMIC YEAR

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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KNIGHTS OF COLUMBUS MEXICO SCHOLARSHIPS ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	52-1547103	501(C)(3)	9,856				SUPPORT SCHOLARSHIPS AWARDED TO STUDENTS
NATIONAL CATHOLIC BIOETHICS CENTER 6399 DREXEL ROAD PHILADELPHIA, PA 191512511	04-2871526	501(C)(3)	100,000				SUPPORT HUMAN DIGNITY IN HEALTH CARE AND LIFE SCIENCE

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SACRED HEART UNIVERSITY 5151 PARK AVENUE FAIRFIELD, CT 068251000	06-0776644	501(C)(3)	10,000				SUPPORT OF CONCERT
SACRED HEART ACADEMY INC 265 BENHAM STREET HAMDEN, CT 065142833	06-1271712	501(C)(3)	5,775				SUPPORT FOR CATHOLIC EDUCATION

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE AMERICAN COLLEGE OF THE ROMAN CATHOLIC CHURCH OF THE UNITED STATES 3211 FOURTH STREET NE WASHINGTON, DC 200170000	23-7201921	501(C)(3)	25,000				SUPPORT 2018 RECTOR'S DINNER
WILLIAM J SEYMOUR INSTITUTE FOR BLACK CHURCH AND POLICY STUDIES 411 WASHINGTON STREET BOSTON, MA 021240000	47-1665900	501(C)(3)	20,000				SUPPORT BAKER HOUSE

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KNIGHTS OF COLUMBUS CHARITIES INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	23-7227608	501(C)(3)		292,212	BOOK	PROVIDE SALARIES AND FRINGE	SUPPORT THE ADMINISTRATION OF PROGRAM SERVICES
KNIGHTS OF COLUMBUS CHARITIES INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	23-7227608	501(C)(3)	1,510,000				DONATIONS TO VARIOUS DESIGNATED FUNDS

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KNIGHTS OF COLUMBUS CHARITIES USA INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	41-2140273	501(C)(3)	2,748,164				DONATIONS TO VARIOUS DESIGNATED FUNDS
THE KNIGHTS OF COLUMBUS MUSEUM INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	06-1590283	501(C)(3)	1,240,000				SUPPORT PROGRAM SERVICES AND BUILDING MAINTENANCE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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THE KNIGHTS OF COLUMBUS MUSEUM INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	06-1590283	501(C)(3)		1,162,590	BOOK	PROVIDE SALARIES AND FRINGE	SUPPORT MUSEUM OPERATIONS
THE KNIGHTS OF COLUMBUS MUSEUM INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	06-1590283	501(C)(3)		4,751	FAIR MARKET VALUE	EXHIBIT PURCHASES AND OTHER SUPPORT	SUPPORT PROGRAM SERVICES

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

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JOHN PAUL II SHRINE AND INSTITUTE INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	52-1547103	501(C)(3)	8,540,000	2,539,356	BOOK	PROVIDE SALARIES, FRINGE & OTHER SUPPORT	SUPPORT FOR SAINT JOHN PAUL II NATIONAL SHRINE
JOHN PAUL II SHRINE AND INSTITUTE INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326	52-1547103	501(C)(3)	2,223,801				SUPPORT FOR ACCREDITED EDUCATIONAL INSTITUTION

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
KNIGHTS OF COLUMBUS

Employer identification number
06-0416470

Part I Questions Regarding Compensation

		Yes	No		
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<input checked="" type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)				
<p>b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	1b	Yes			
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2	Yes			
<p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee				
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization</p>					
<p>a Receive a severance payment or change-of-control payment?</p>	4a		No		
<p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p>	4b	Yes			
<p>c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4c		No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p>					
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of</p>					
<p>a The organization?</p>	5a				
<p>b Any related organization? If "Yes," on line 5a or 5b, describe in Part III</p>	5b				
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of</p>					
<p>a The organization?</p>	6a				
<p>b Any related organization? If "Yes," on line 6a or 6b, describe in Part III</p>	6b				
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7				
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>	8				
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9				

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Return Reference	Explanation
PART I, LINE 1A	FIRST CLASS OR CHARTER TRAVEL SUPREME OFFICERS ARE ALLOWED TO TRAVEL FIRST-CLASS TRAVEL FOR COMPANIONS SPOUSAL TRAVEL IS ALLOWED FOR SUPREME OFFICERS WHEN THEIR SPOUSES' PRESENCE SERVES A BONA-FIDE BUSINESS PURPOSE

Return Reference	Explanation
PART I, LINE 4B	<p>CARL A ANDERSON \$499,254 PATRICK E KELLY 29,012 JOHN A MARRELLA 137,514 ANTHONY V MINOPOLI 104,169 MICHAEL J O'CONNOR 60,347 RONALD F SCHWARZ 28,447 THOMAS P SMITH, JR 142,905 RONALD D FRANZLUEBBERS 118,328 BETH M ELFREY 10,289 KNIGHTS OF COLUMBUS SPONSORS A NONQUALIFIED DEFERRED COMPENSATION PLAN THAT IS DESIGNED TO MAKE UP FOR BENEFITS LOST IN THE TAX-QUALIFIED RETIREMENT PLAN ONCE A PARTICIPANT BECOMES VESTED IN THIS NONQUALIFIED DEFERRED COMPENSATION PLAN, BY LAW, THE PARTICIPANT IS TAXED ON THE VESTED AMOUNT THE KNIGHTS OF COLUMBUS' PLAN PROVIDES THAT UPON VESTING, A PARTICIPANT WILL RECEIVE A PAYMENT FOR THE ESTIMATED INCOME TAXES RELATED TO THE VESTED AMOUNT THE ABOVE AMOUNTS ARE INCLUDED ON SCHEDULE J, PART II, COLUMN B(III)</p>



Additional Data

Software ID:
Software Version:
EIN: 06-0416470
Name: KNIGHTS OF COLUMBUS

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
CARL A ANDERSON DIRECTOR/SUPREME KNIGHT	(i)	917,700	326,318	519,202	8,250	24,955	1,796,425	0
	(ii)	0	0	0	0	0	0	0
PATRICK E KELLY DIRECTOR/DEP SUPREME KNIGHT	(i)	330,496	105,418	41,432	8,250	33,388	518,984	0
	(ii)	0	0	0	0	0	0	0
JOHN A MARRELLA DIRECTOR/SUPREME ADVOCATE	(i)	387,083	113,518	140,477	8,250	24,955	674,283	0
	(ii)	0	0	0	0	0	0	0
ANTHONY V MINOPOLI DIRECTOR/EXECUTIVE VP INVESTMENTS	(i)	481,631	109,518	105,171	8,250	33,388	737,958	0
	(ii)	0	0	0	0	0	0	0
MICHAEL J O'CONNOR DIRECTOR/SUPREME SECRETARY	(i)	262,552	69,217	64,482	7,877	33,388	437,516	0
	(ii)	0	0	0	0	0	0	0
RONALD F SCHWARZ DIRECTOR/SUPREME TREASURER	(i)	198,089	62,518	30,996	5,936	24,955	322,494	0
	(ii)	0	0	0	0	0	0	0
THOMAS P SMITH JR DIRECTOR/EXECUTIVE VP INSURANCE	(i)	293,913	120,900	146,870	3,173	13,713	578,569	0
	(ii)	0	0	0	0	0	0	0
MARC A BRUNET VICE PRESIDENT/ACTUARY	(i)	239,107	43,400	3,386	6,595	24,955	317,443	0
	(ii)	0	0	0	0	0	0	0
JOHN J KENNEDY CHIEF FINANCIAL OFFICER	(i)	430,106	129,618	3,308	8,250	33,134	604,416	0
	(ii)	0	0	0	0	0	0	0
RONALD D FRANZLUEBBERS SENIOR VP/CHIEF ACTUARY	(i)	364,017	56,900	119,903	8,250	31,978	581,048	0
	(ii)	0	0	0	0	0	0	0
BETH M ELFREY SENIOR VP/DEPUTY GEN COUNSEL	(i)	290,709	56,800	10,834	8,250	33,388	399,981	0
	(ii)	0	0	0	0	0	0	0
E NEILL JORDAN VICE PRESIDENT FIXED INCOME	(i)	285,737	56,400	1,658	8,250	30,859	382,904	0
	(ii)	0	0	0	0	0	0	0
PAUL MCMAHON DIRECTOR OF MARKETING	(i)	214,604	142,074	6	6,199	33,388	396,271	0
	(ii)	0	0	0	0	0	0	0
MARK MCMULLEN SENIOR VP MEMBERSHIP & FRAT MISSION	(i)	318,953	15,900	3,074	8,250	29,823	376,000	0
	(ii)	0	0	0	0	0	0	0
KEVIN SHINKLE SENIOR VP/CHF COMMUNICATIONS OFFICER	(i)	318,854	15,900	235	8,250	33,388	376,627	0
	(ii)	0	0	0	0	0	0	0

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.

▶ Attach to Form 990 or 990-EZ.

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

2018
Open to Public Inspection

Department of the Treasury

Name of the organization
KNIGHTS OF COLUMBUS

Employer identification number

06-0416470

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	KNIGHTS OF COLUMBUS IS A CATHOLIC FRATERNAL BENEFIT ORGANIZATION WITH OVER 1 9 MILLION MEMBERS ALL MEMBERS VOTE ON NON-INSURANCE (FRATERNAL) MATTERS ONLY MEMBERS WITH FRATERNAL INSURANCE POLICIES VOTE ON MATTERS REGARDING INSURANCE VOTING IS GENERALLY ACCOMPLISHED THROUGH DELEGATES ELECTED BY MEMBERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	DELEGATES ARE ELECTED AT VARIOUS STATE AND DISTRICT CONVENTIONS THESE DELEGATES ELECT CERTAIN DIRECTORS EACH YEAR AT THE SUPREME COUNCIL ANNUAL MEETING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	CHANGES IN THE BY-LAWS OF THE ORGANIZATION ARE VOTED ON BY MEMBERS IN GOOD STANDING EITHER THROUGH AN ELECTED DELEGATE OR A GENERAL VOTE THEIR ELIGIBILITY TO VOTE ON A MATTER IS LIMITED TO THEIR STANDING AS AN INSURANCE MEMBER OR NON-INSURANCE MEMBER

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	A COPY OF THE 990 IS DISTRIBUTED TO EACH BOARD MEMBER FOR REVIEW AT A BOARD OF DIRECTORS MEETING BEFORE THE RETURN IS FILED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS ALL BOARD MEMBERS AND TOP MANAGEMENT OFFICIALS ARE REQUIRED TO FILL OUT A CONFLICT OF INTEREST QUESTIONNAIRE ALL POTENTIAL ISSUES ARE REVIEWED AND RESOLVED BY THE SECRETARY'S OFFICE IN CONJUNCTION WITH THE CHIEF COMPLIANCE OFFICER AND THE INTERNAL AUDIT DEPARTMENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS ENGAGES AN INDEPENDENT COMPENSATION CONSULTANT ON AN ANNUAL BASIS, INCLUDING IN 2018, FOR A REVIEW OF THE REASONABLENESS OF TOTAL COMPENSATION PROVIDED TO SUPREME OFFICERS AND OTHER TOP MANAGEMENT OFFICIALS. THE INDEPENDENT COMPENSATION CONSULTANT USES SURVEY SOURCES THAT THEY HAVE COMPILED PLUS OTHER PUBLISHED SURVEYS TO PRESENT A REPORT OF COMPARABLE MARKET DATA OF TOTAL COMPENSATION FOR EACH MANAGEMENT POSITION. THE EXECUTIVE COMPENSATION COMMITTEE REVIEWS AND DISCUSSES THE COMPARABLE MARKET DATA BEFORE MAKING A RECOMMENDATION TO THE BOARD OF DIRECTORS. AFTER A REVIEW AND DISCUSSION ABOUT THE COMPARABLE MARKET DATA AND THE INDIVIDUALS IN THE ROLES UNDER REVIEW, A VOTE IS TAKEN TO APPROVE A NEW SALARY RANGE AND OBJECTIVE BONUS STRUCTURE FOR THE TOP MANAGEMENT INDIVIDUALS. TOTAL COMPENSATION FOR EACH INDIVIDUAL IS WITHIN THE RANGE APPROVED BY THE BOARD OF DIRECTORS WHICH IS WITHIN THE COMPARABLE MARKET DATA.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE PHOTOCOPIED AND MAILED TO INDIVIDUALS OR ORGANIZATIONS UPON REQUEST

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN ASSET VALUATION RESERVE 48,403,455 CHANGE IN NON-ADMITTED ASSETS NOT INCLUDED PURSUANT TO INSURANCE LAW -7,223,027 NET CHANGE DUE TO FLUCTUATIONS IN FOREIGN CURRENCY EXCHANGE RATES -41,432,604 UNREALIZED LOSS ON INVESTMENTS - FOURTH DEGREE -836,371 CHANGE IN FOREIGN EXCHANGE - FOURTH DEGREE -13,513 CUMULATIVE EFFECT - CHANGE IN ACCOUNTING PRINCIPLE -6,193,427 NET CHANGE IN TRANSITION LIABILITY FOR PENSION AND POSTRETIREMENT BENEFITS 61,233,005

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, SCHEDULE R, PART II, COLUMN D	KNIGHTS OF COLUMBUS CANADA CHARITIES, INC 'S EXEMPT CODE SECTION CANADA CHARITIES IS EXEMPT FROM FEDERAL TAXATION IN CANADA UNDER PARAGRAPH 149(1)(F) OF THE INCOME TAX ACT AND IS DESIGNATED AS A "PUBLIC FOUNDATION" PER PARAGRAPH 149 1(6 3) OF THE ACT

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
KNIGHTS OF COLUMBUS

Employer identification number
06-0416470

Part I Identification of Disregarded Entities Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) 151 ROGERS LLC ONE COLUMBUS PLAZA NEW HAVEN, CT 06510	REAL ESTATE ACTIVITIES	TX	0	7,749,725	N/A
(2) FMJM LLC ONE COLUMBUS PLAZA NEW HAVEN, CT 06510	CREATION AND INVESTMENT IN MOVIES, FILMS, DOCUMENTARIES & OTHER MEDIA	DE	11	48,348	N/A
(3) MEDLEY CREDIT STRATEGIES (KOC) LLC 280 PARK AVENUE 6TH FLOOR NEW YORK, NY 10017	INVESTS IN CORPORATE CREDIT AND ASSET-BASED DEBT & EQUITY INSTRUMENTS	DE	8,427,822	108,403,719	N/A
(4) KOC REIT LLC 9 WEST 57TH STREET 33RD FLOOR NEW YORK, NY 10019	INVEST IN REAL ESTATE	DE	2,285,761	61,508,728	N/A
(5) FMJM RWL IV LLC 140 BROADWAY 45TH FLOOR NEW YORK, NY 10005	INVEST IN RESIDENTIAL MORTGAGES	DE	680,499	30,627,245	N/A

Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) KNIGHTS OF COLUMBUS CHARITIES INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326 23-7227608	ESTABLISHED FOR RELIGIOUS, CHARITABLE, AND EDUCATIONAL PURPOSES	CT	501(C)(3)	7	KNIGHTS OF COLUMBUS	Yes	
(2) KNIGHTS OF COLUMBUS CANADA CHARITIES INC 1843 TRAPPERS AVENUE WINDSOR ON, ONTARIO N8P 1T1 CA	ESTABLISHED FOR RELIGIOUS, CHARITABLE, AND EDUCATIONAL PURPOSES	CA	SEE SCHD O		KNIGHTS OF COLUMBUS	Yes	
(3) KNIGHTS OF COLUMBUS CHARITIES USA INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326 41-2140273	ESTABLISHED FOR RELIGIOUS, CHARITABLE, AND EDUCATIONAL PURPOSES	CT	501(C)(3)	11B	KNIGHTS OF COLUMBUS	Yes	
(4) THE KNIGHTS OF COLUMBUS MUSEUM INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326 06-1590283	OPERATION OF A MUSEUM	CT	501(C)(3)	11B	KNIGHTS OF COLUMBUS	Yes	
(5) JOHN PAUL II SHRINE AND INSTITUTE INC ONE COLUMBUS PLAZA NEW HAVEN, CT 065103326 52-1547103	OPERATION OF AN EDUCATIONAL INSTITUTE AND A MUSEUM	DC	501(C)(3)	2	KNIGHTS OF COLUMBUS	Yes	

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) FMJM LLC RWL TRUST 2013-1 THREE STAMFORD PLAZA 12TH FL STAMFORD, CT 06901 46-3828517	INVEST IN RESIDENTIAL MORTGAGES	DE	KNIGHTS OF COLUMBUS	EXCLUDED	12,564	1,257,134		No			No	52 000 %
(2) FMJM LLC RWL II THREE STAMFORD PLAZA 12TH FL STAMFORD, CT 06901 46-4274270	INVEST IN RESIDENTIAL MORTGAGES	DE	KNIGHTS OF COLUMBUS	EXCLUDED		11,781,917		No			No	52 000 %
(3) KOCAAAUDAX PRIVATE DEBT FUND LP 101 HUNTINGTON AVENUE BOSTON, MA 02110 81-3856983	INVEST IN DEBT OF LEVERAGED MIDDLE MARKET COMPANIES	DE	KNIGHTS OF COLUMBUS	EXCLUDED		110,541,215		No			No	80 590 %
(4) NIGHTS VISION LLC PARTNERSHIP 1 BLOOMFIELD AVENUE MOUNTAIN LAKES, NJ 07046 47-4076219	INVEST IN REAL ESTATE	NJ	KNIGHTS OF COLUMBUS	EXCLUDED	412,580	24,376,993		No			No	96 930 %
(5) KENSINGTON POWER INCOME FUND III LP 95 ST CLAIR AVENUE WEST SUITE 905 TORONTO, ONTARIO M4V 1N6 CA	INVEST IN SMALL PRIVATE ELECTRICAL POWER FACILITIES & PUBLIC INFRASTRUCTURE	CA	KNIGHTS OF COLUMBUS	EXCLUDED		2,076,341		No			No	99 990 %

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of- year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No
(1) KNIGHTS OF COLUMBUS ASSET ADVISORS HOLDCO LLC ONE COLUMBUS PLAZA NEW HAVEN, CT 06510 47-1764787	ASSET MANAGEMENT AND INVESTMENT ADVISORY SERVICES	DE	KNIGHTS OF COLUMBUS	C	34,818,055	3,382,512	100 000 %	Yes	
(2) ALFA PROPERTIES INC 11766 WILSHIRE BLVD FL 9 LOS ANGELES, CA 90025 81-1776357	CREATION AND INVESTMENT IN MOVIES, FILMS & OTHER MEDIA	DE	KNIGHTS OF COLUMBUS	C	860,605	666,297	100 000 %	Yes	

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)	Yes	
k Lease of facilities, equipment, or other assets from related organization(s)	Yes	
l Performance of services or membership or fundraising solicitations for related organization(s)	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	Yes	
o Sharing of paid employees with related organization(s)		No
p Reimbursement paid to related organization(s) for expenses	Yes	
q Reimbursement paid by related organization(s) for expenses	Yes	
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)	Yes	

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

See Additional Data Table

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 06-0416470
Name: KNIGHTS OF COLUMBUS

Form 990, Schedule R, Part V - Transactions With Related Organizations

(a) Name of related organization	(b) Transaction type(a-s)	(c) Amount Involved	(d) Method of determining amount involved
(1) KNIGHTS OF COLUMBUS CHARITIES INC	B	1,802,212	FAIR MARKET VALUE
(1) KNIGHTS OF COLUMBUS CHARITIES USA INC	B	2,748,164	FAIR MARKET VALUE
(2) THE KNIGHTS OF COLUMBUS MUSEUM INC	B	2,407,341	FAIR MARKET VALUE
(3) THE KNIGHTS OF COLUMBUS MUSEUM INC	K	310,000	FAIR MARKET VALUE
(4) JOHN PAUL II SHRINE AND INSTITUTE INC	B	13,303,157	FAIR MARKET VALUE
(5) JOHN PAUL II SHRINE AND INSTITUTE INC	Q	1,814,849	FAIR MARKET VALUE
(6) JOHN PAUL II SHRINE AND INSTITUTE INC	S	1,500,000	FAIR MARKET VALUE
(7) KNIGHTS OF COLUMBUS CANADA CHARITIES INC	B	182,140	FAIR MARKET VALUE
(8) KNIGHTS OF COLUMBUS CANADA CHARITIES INC	P	139,811	FAIR MARKET VALUE
(9) NORTH HAVEN SENIOR LOAN FUND OFFSHORE FEEDER LP	B	13,489,565	FAIR MARKET VALUE
(10) ALFA PROPERTIES INC	B	4,221,842	FAIR MARKET VALUE
(11) KNIGHTS OF COLUMBUS CHARITIES INC	Q	350,309	FAIR MARKET VALUE
(12) THE KNIGHTS OF COLUMBUS MUSEUM INC	Q	158,933	FAIR MARKET VALUE
(13) KNIGHTS OF COLUMBUS CHARITIES USA INC	Q	468,663	FAIR MARKET VALUE