



Semiannual Council Audit Report For Period Ended December 31, 20

DUE BY: FEBRUARY 15

Council No.: City: State:

SCHEDULE A - MEMBERSHIP

Table with columns for ADDITIONS and DEDUCTIONS, each with sub-columns for INS., ASSO., and TOT. Rows include Total members start of period, Initiations, Transfers, and Total for period.

Do not include inactive insurance members in this section.**

SCHEDULE A - ALTERNATIVE

Our council uses Member Management/Member Billing. The requirement for completing Schedule A is satisfied.

SCHEDULE B - CASH TRANSACTIONS

Table with columns for FINANCIAL SECRETARY and TREASURER. Rows include Cash on hand beginning of period, Cash received, Disbursements, and Net balance on hand.

SCHEDULE C - ASSETS AND LIABILITIES

Table with columns for ASSETS and LIABILITIES. Rows include Cash, Due from members, Total current assets, Due Supreme Council, and Total current liabilities.

Please complete all items. Insert "None" where no figures are to be shown.

SEND ONE COPY TO: Council Accounts
Email: council.accounts@kofc.org
Fax: 855-228-1396
Mail: 1 Columbus Plaza, New Haven, CT 06510
COPIES TO: State Deputy, District Deputy, Council File

For more details, see Knights of Columbus Leadership Resources (#5093) booklet.

*All U.S. Councils must file form 990 with IRS annually. For info, email tax.ein@kofc.org or refer to Officer's Desk Reference.