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Form **990-EZ**Department of the Treasury
Internal Revenue ServiceAmended
Short Form**Return of Organization Exempt From Income Tax**Under section 501(c) 527 or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

► Sponsoring organizations, and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year may use this form.

► The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150

2007Open to Public
Inspection**A** For the 2007 calendar year or tax year beginning July 1 2007 and ending June 30 2008**B** Check if applicable:

- ☐ Address change
☐ Name change
☒ Initial return
☐ Termination
☐ Amended return
☐ Application pending

Please
use IRS
label or
print or
type.
See
Specific
Instructions.**C** Name of organizationKnights of Columbus, St. James Council 10895

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

9230 Redman Ave.

City or town, state or country and ZIP + 4

Omaha, NE 68134-2748**D** Employer identification number47-0757819**E** Telephone number(402) 571-6241**F** Group Exemption
Number0188

• Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach
a completed Schedule A (Form 990 or 990-EZ).

G Accounting method ☒ Cash ☐ Accrue
Other (specify) ►

I Website. ► www.stjameskofc.org**J** Organization type (check only one) ☒ 501(c) (8) (insert no) ☐ 4947(a)(1) or ☐ 527

H Check ☒ if the organization
is not required to attach
Schedule B (Form 990 990-EZ, or 990-PF)

K Check ☐ if the organization is not a section 509(a)(3) supporting organization and its gross receipts are normally not more than \$25,000. A return
not required, but if the organization chooses to file a return be sure to file a complete return.

L Add lines 5b, 6b, and 7b, to line 9 to determine gross receipts; if \$100,000 or more, file Form 990 instead of Form 990-EZ ► \$ 29,625**Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances** (See page 55 of the instructions)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	<u>2,034</u>
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	<u>1,341</u>
	4	Investment income	4	<u>801</u>
	5a	Gross amount from sale of assets other than inventory	5a	
	5b	Less: cost or other basis and sales expenses	5b	
	5c	Gain or (loss) from sale of assets other than inventory Subtract line 5b from line 5a (attach schedule)	5c	<u>-0-</u>
	6	Special events and activities (attach schedule) If any amount is from gaming check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ <u>1784</u> of contributions reported on line 1)	6a	<u>25,399</u>
	6b	Less: direct expenses other than fundraising expenses	6b	<u>18,787</u>
	6c	Net income or (loss) from special events and activities. Subtract line 6b from line 6a	6c	<u>6,612</u>
	7a	Gross sales of inventory less returns and allowances	7a	
	7b	Less: cost of goods sold	7b	
	7c	Gross profit or (loss) from sales of inventory Subtract line 7b from line 7a	7c	<u>-0-</u>
	8	Other revenue (describe ► <u>Miscellaneous</u>)	8	<u>50</u>
	9	Total revenue. Add lines 1 2 3 4 5c 6c 7c, and 8	9	<u>10,838</u>
	Expenses	10	Grants and similar amounts paid (attach schedule)	10
11		Benefits paid to or for members	11	<u>-0-</u>
12		Salaries, other compensation and employee benefits	12	<u>-0-</u>
13		Professional fees and other payments to independent contractors	13	<u>-0-</u>
14		Occupancy rent, utilities and maintenance	14	<u>-0-</u>
15		Printing publications, postage and shipping	15	<u>1,281</u>
16		Other expenses (describe ► <u>Per Attachment</u>)	16	<u>1,298</u>
17		Total expenses. Add lines 10 through 16	17	<u>5,204</u>
Net Assets	18	Excess or (deficit) for the year Subtract line 17 from line 9	18	<u>5,634</u>
	19	Net assets or fund balances at beginning of year (from line 27 column (A)) (must agree with end-of-year figure reported on prior year's return)	19	<u>16,356</u>
	20	Other changes in net assets or fund balances (attach explanation)	20	<u>(943)</u>
	21	Net assets or fund balances at end of year Combine lines 18 through 20	21	<u>21,047</u>

Part II Balance Sheets—If Total assets on line 25 column (B) are \$250,000 or more file Form 990 instead of Form 990-EZ.

(See page 60 of the instructions.)

	(A) Beginning of year	(B) End of year
22 Cash savings, and investments	<u>16,356</u>	22 <u>21,047</u>
23 Land and buildings	<u>-0-</u>	23 <u>-0-</u>
24 Other assets (describe ► <u>N/A</u>)	<u>N/A</u>	24 <u>N/A</u>
25 Total assets	<u>16,356</u>	25 <u>21,047</u>
26 Total liabilities (describe ► <u>-0-</u>)	<u>-0-</u>	26 <u>-0-</u>
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	<u>16,356</u>	27 <u>21,047</u>

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

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Part III Statement of Program Service Accomplishments (See page 60 of the instructions)

What is the organization's primary exempt purpose? External Benefit Society
 Describe what was achieved in carrying out the organization's exempt purposes. In a clear and concise manner describe the services provided, the number of persons benefited or other relevant information for each program title.

Expenses
 (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts optional for others)

28 Provided Spiritual, Fraternal, Family and Social support to the general membership base

(Grants \$) If this amount includes foreign grants, check here ☐ 28a

29 Provided assistance and leadership to the pastor, parish staff, and parishioners to achieve parish goals

(Grants \$) If this amount includes foreign grants, check here ☐ 29a

30 Enhanced the community of St James Parish through programs of worship, family, youth, social and financial activities.

(Grants \$) If this amount includes foreign grants, check here ☐ 30a

31 Other program services (attach schedule)

(Grants \$) If this amount includes foreign grants, check here ☐ 31a

32 Total program service expenses. Add lines 28a through 31a ☐ 32

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See page 61 of the instructions.)

(A) Name and address	(B) Title and average hours per week devoted to position	(C) Compensation (If not paid, enter -0-)	(D) Contributions to employee benefit plans & deferred compensation	(E) Expense account and other allowances
Woodrow Armentrout Omaha Nebraska	Varies 1-10 hours Grand Knight	-0-	-0-	-0-
Michael Gallagher Omaha Nebraska	Varies 0-10 hours Financial Secretary	-0-	-0-	-0-
Steven Morford Omaha Nebraska	Varies 1-10 hours Trustee	-0-	-0-	-0-
Don Reiner Omaha Nebraska	Varies 1-10 hours Trustee	-0-	-0-	-0-

Part V Other Information (Note the statement requirement in General Instruction V)

	Yes	No
33 Did the organization make a change in its activities or methods of conducting activities? If "Yes," attach a detailed statement of each change	33	X
34 Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34	X
35 If the organization had income from business activities, such as those reported on lines 2, 6 and 7 (among others), but not reported on Form 990-T attach a statement explaining your reason for not reporting the income on Form 990-T		
a Did the organization have unrelated business gross income of \$1,000 or more or 6033(e) notice, reporting and proxy tax requirements?	35a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	35b	
36 Was there a liquidation, dissolution, termination or substantial contraction during the year? If "Yes," attach a statement.	36	X
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. <input type="checkbox"/> 37a <u>None</u>		
b Did the organization file Form 1120-POL for this year?	37b	X
38a Did the organization borrow from or make any loans to any officer, director, trustee, or key employee or were any such loans made in a prior year and still unpaid at the start of the period covered by this return?	38a	X
b If "Yes," attach the schedule specified in the line 38 instructions and enter the amount involved	38b	None
39 501(c)(7) organizations. Enter		
a Initiation fees and capital contributions included on line 9	39a	NA
b Gross receipts included on line 9 for public use of club facilities	39b	NA

Part V Other Information (Note the statement requirement in General Instruction V) (Continued)

40a 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 N/A section 4912 N/A section 4955 N/A

b 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach an explanation

c Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958

d Enter amount of tax on line 40c reimbursed by the organization

e All organizations. At any time during the tax year was the organization a party to a prohibited tax shelter transaction?

41 List the states with which a copy of this return is filed ▶ Nebraska

42a The books are in care of ▶ Jerome Coon; Treasurer -- Telephone no ▶ 402-522-7109
 Located at ▶ 5634 N. 81st St + Omaha NE ZIP + 4 ▶ 68134-2036

b At any time during the calendar year did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)?

If "Yes " enter the name of the foreign country ►

See the instructions for exceptions and filing requirements for Form TD F 90-22.1

c At any time during the calendar year did the organization maintain an office outside of the U S ?

If "Yes " enter the name of the foreign country ▶

43 **Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041**—Check here and enter the amount of tax-exempt interest received or accrued during the tax year ▶

**Please
Sign
Here**

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.

Signature of officer

Signature of officer

Date _____

Woodrow Armentrout, Grand Knight

Type or print name and title.

**Paid
Preparer's
Use Only**

**Preparer's
signature**

Firm's name (or yours if self-employed), address, and ZIP + 4

Date _____

Check if self-employed ☐

Preparer's SSN or PTIN (See Gen. Inst. X)

EN

Phone no ► ()

47-0757819 Knights of Columbus, St James Council, No. 10895
2007 Form 990 EZ - ATTACHMENT

Re: Part I Line 6 - Special Events and Activities:

	<u>Line 6 A</u>	<u>Line 6 B</u>
Lenten Fish Frys	\$ 22,621	\$ 12,782
Entertainment Book Sales	2,125	1,473
Council Steak Fry	458	450
Men's Parish Retreat Sponsor	195	433
Nebraska Mentally Hand capped	—	1,784
Council Christmas Party	—	626
Parish Youth Events	—	567
Parish Coffee's and Socials	—	462
Teacher Appreciation Event	—	210
Total	<u>\$ 25,399</u>	<u>\$ 18,787</u>

Re: Part I Line 10 - Grants and Similar Amounts:

Financial Gifts to: Priests and Seminarians \$ 750
ST James Parish Youth Group 600
Boy Scouts of Amer cul Troop 380 600
ST James-Seton School Cafeteria 500
Food Baskets for the Needy 150
Masses for Deceased Brothers 25
\$ 2,625

Re: Part I Line 16 - other Expenses:

Conventions and Conference Travel \$ 759
Council Advertising 419
Investment Expense 120
\$ 1298

Re: Part I Line 20 - Other Changes in Net Assets:

Unrealized Gain/Loss Mutual Fund Investments \$ 943