



See a Social Security Number? Say Something!  
Report Privacy Problems to <https://public.resource.org/privacy>  
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-EZ**Department of the Treasury  
Internal Revenue Service**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 of donor advised funds and controlling organizations as defined in section 512(b)(13) must file Form 990. All other organizations with gross receipts less than \$500,000 and total assets less than \$1,250,000 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

**2009****Open to Public  
Inspection****A** For the 2009 calendar year, or tax year beginning January 1, 2009, and ending Dec. 31, 2009**B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Terminated  
☐ Amended return  
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

**C** Name of organization

Knights of Columbus, Council 11116, Our Lady of Joy Catholic Church

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

P.O. Box 1359, Cave Creek and Pima Rds.

City or town, state or country, and ZIP + 4

Carefree, AZ 85377

**D** Employer identification number

36 4608315

**E** Telephone number

480-488-2229

**F** Group Exemption Number ►

• 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 ☐ Accrual  
Other (specify) ►**I** Website: ►**J** Tax-exempt status (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 Form 990-EZ or Form 990 return is 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 \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$**Part I** Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions for Part I.)

Revenue	1	Contributions, gifts, grants, and similar amounts received	1	18,397
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	2,795
	4	Investment income	4	
	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)	5c	
	6	Special events and activities (complete applicable parts of Schedule G). If any amount is from gaming, check here <input type="checkbox"/>		
	6a	Gross revenue (not including \$ 18397 of contributions reported on line 1)	6a	25,943
	6b	Less: direct expenses other than fundraising expenses	6b	8,543
6c	Net income or (loss) from special events and activities (Subtract line 6b from line 6a)	6c	17,400	
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		
8	Other revenue (describe ► )	8		
9	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8	9	38,592	
Expenses	10	Grants and similar amounts paid (attach schedule)	10	22,975
	11	Benefits paid to or for members	11	
	12	Salaries, other compensation, and employee benefits	12	
	13	Professional fees and other payments to independent contractors	13	
	14	Occupancy, rent, utilities, and maintenance	14	
	15	Printing, publications, postage, and shipping	15	785
	16	Other expenses (describe ► )	16	3,236
	17	<b>Total expenses.</b> Add lines 10 through 16	17	26,996
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)	18	11,596
	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	14,123
	20	Other changes in net assets or fund balances (attach explanation)	20	
	21	<b>Net assets or fund balances at end of year.</b> Combine lines 18 through 20	21	25,719

**Part II** Balance Sheets. If Total assets on line 25, column (B) are \$1,250,000 or more, file Form 990 instead of Form 990-EZ.

(See the instructions for Part II.)

	(A) Beginning of year	(B) End of year
22 Cash, savings, and investments	14,123	25,719
23 Land and buildings		
24 Other assets (describe ► )		
25 <b>Total assets</b>	14,123	25,719
26 <b>Total liabilities</b> (describe ► )	-0-	-0-
27 <b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	14,123	25,719

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

Cat. No. 106421

Form **990-EZ** (2009)

SCANNED JUN 30 2010

RECEIVED  
MAY 17 2010  
OGDEN, UT  
IRS-OSC

13 P

## Expenses

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

<b>28</b>	<b>Contributions to various charities ie: San Carlos Mission School;Maggles Place; Life Choices; 100 Club of AZ; Disabled American Veterans ; American Legion etc.</b>	
	(Grants \$ 22,475.) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>28a</b>
<b>29</b>	<b>Support for Catholic Clergy and Church Staff</b>	
	(Grants \$ 850.) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>29a</b>
<b>30</b>	<b>Support for Catholic Seminary Students</b>	
	(Grants \$ 2250.) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>30a</b>
<b>31</b>	<b>Other program services (attach schedule) . . . . .</b>	
	(Grants \$ ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>31a</b>
<b>32</b>	<b>Total program service expenses (add lines 28a through 31a) . . . . . ▶</b>	<b>32</b>

[illegible]

**Part V Other Information** (Note the statement requirements in the instructions for Part V.)

	Yes	No
<b>33</b> Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity . . . . .	<b>33</b>	✓
<b>34</b> Were any changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the changes . . . . .	<b>34</b>	✓
<b>35</b> If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining why the organization did not report the income on Form 990-T.		
<b>a</b> Did the organization have unrelated business gross income of \$1,000 or more or was it subject to section 6033(e) notice, reporting, and proxy tax requirements? . . . . .	<b>35a</b>	✓
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>35b</b>	✓
<b>36</b> Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N . . . . .	<b>36</b>	✓
<b>37a</b> Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ <b>37a</b>		
<b>b</b> Did the organization file <b>Form 1120-POL</b> for this year? . . . . .	<b>37b</b>	✓
<b>38a</b> Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the period covered by this return? . . . . .	<b>38a</b>	✓
<b>b</b> If "Yes," complete Schedule L, Part II and enter the total amount involved . . . . .	<b>38b</b>	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b>	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b>	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
<b>b</b> Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or is it aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I . . . . .	<b>40b</b>	✓
<b>c</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 . . . . . ▶		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶		
<b>e</b> All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T. . . . .	<b>40e</b>	✓
<b>41</b> List the states with which a copy of this return is filed. ▶		
<b>42a</b> The organization's books are in care of ▶ <u>Ronald Orson, Treasurer;</u> Telephone no. ▶ <u>480-585-0000</u> Located at ▶ <u>6108 E. Red Bird Rd., Scottsdale, AZ</u> ZIP + 4 ▶ <u>85266</u>		
<b>b</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)? . . . . .	<b>42b</b>	✓
If "Yes," enter the name of the foreign country: ▶ _____ See the instructions for exceptions and filing requirements for <b>Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts</b> .		
<b>c</b> At any time during the calendar year, did the organization maintain an office outside of the U.S.? . . . . .	<b>42c</b>	✓
If "Yes," enter the name of the foreign country: ▶ _____		
<b>43</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of <b>Form 1041</b> —Check here and enter the amount of tax-exempt interest received or accrued during the tax year . . . . . ▶ <b>43</b>		☐
<b>44</b> Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44</b>	✓
<b>45</b> Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>45</b>	✓

**Part VI**

**Section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts only.** All section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts must answer questions 46–49b and complete the tables for lines 50 and 51.

	Yes	No
<b>46</b> Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	<b>46</b>	<input checked="" type="checkbox"/>
<b>47</b> Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II . . . . .	<b>47</b>	<input checked="" type="checkbox"/>
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	<b>48</b>	<input checked="" type="checkbox"/>
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	<b>49a</b>	<input checked="" type="checkbox"/>
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	<b>49b</b>	<input checked="" type="checkbox"/>

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

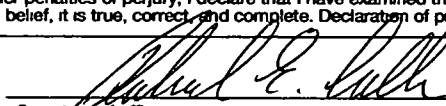
(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances

**f** Total number of other employees paid over \$100,000 . . . . . ▶

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

(a) Name and address of each independent contractor paid more than \$100,000	(b) Type of service	(c) Compensation

**d** Total number of other independent contractors each receiving over \$100,000 . . . ▶

<b>Sign Here</b>	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		Date <u>5/14/2010</u>	
<b>Paid Preparer's Use Only</b>	Richard E. Calk, Financial Secretary Type or print name and title		5/14/2010	
	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (See instructions)
	Firm's name (or yours if self-employed), address, and ZIP + 4	EIN	Phone no.	

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶ ☐ Yes ☐ No

8:23 PM  
01/10/10  
Cash Basis

**OLJ KofC 11116**  
**Profit & Loss**  
**January through December 2009**

	Jan - Dec 09
<b>Income</b>	
Donut Income	1,898.26
Dues	2,795.00
Food Service Income	5,467.00
Golf Income	25,943.00
Knights in Napa Income	3,306.00
Miscellaneous Income	1,061.50
MR Drive Income	4,036.00
Special Event Income	1,978.03
State Raffle Income	650.00
<b>Total Income</b>	<b>47,134.79</b>
<b>Expense</b>	
Kof C Supreme Membership Dues	316.59
Advertising	206.00
AZ State Council	
State Convention	585.97
State Raffle	1,090.00
AZ State Council - Other	742.76
<b>Total AZ State Council</b>	<b>2,418.73</b>
Badges	149.97
Donut Expenses	360.27
Food Service Expenses	
Charity Event	249.96
Fundraiser Event	5,504.25
Social Event	1,254.79
Food Service Expenses - Other	-1,837.88
<b>Total Food Service Expenses</b>	<b>5,171.12</b>
Fraternal Empathy	
Grief Support	500.00
<b>Total Fraternal Empathy</b>	<b>500.00</b>
Gifts Given	
Miscellaneous	1,945.05
OLJ Clergy & Staff	1,500.00
RSVP Support	1,896.00
Special Charity	17,134.36
<b>Total Gifts Given</b>	<b>22,475.41</b>
Keep Chrst in Christmas	176.19
Liability Insurance	290.00
Meeting Refreshments	306.92
Miscellaneous Expenses	1,587.07
Office Supplies	
Postage	283.83
Supplies	263.20
Office Supplies - Other	237.51
<b>Total Office Supplies</b>	<b>784.54</b>
Other Administrative	295.00
Per Capita	501.57
<b>Total Expense</b>	<b>35,539.38</b>
<b>Net Income</b>	<b>11,595.41</b>