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Form **990-EZ**Department of the Treasury
Internal Revenue Service**Short Form**
Return of Organization Exempt From Income TaxUnder 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, organizations that operate one or more hospital facilities, and certain controlling organizations as defined in section 512(b)(13) must file Form 990 (see instructions). All other organizations with gross receipts less than \$200,000 and total assets less than \$500,000 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

2011**Open to Public
Inspection**

A For the 2011 calendar year, or tax year beginning **July 1**, 2011, and ending **June 30**, 20 **12**

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization
Knights of Columbus
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
P.O. Box 417
 City or town, state or country, and ZIP + 4
Marco Island, Florida 34146

D Employer identification number
23-7322840

E Telephone number

F Group Exemption Number ►

G Accounting Method: ☒ Cash ☐ Accrual Other (specify) ►

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

I Website: ►

J Tax-exempt status (check only one) — ☐ 501(c)(3) ☒ 501(c) () ◀ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Check ☐ if the organization is not a section 509(a)(3) supporting organization or a section 527 organization and its gross receipts are normally not more than \$50,000. A Form 990-EZ or Form 990 return is not required though Form 990-N (e-postcard) may be required (see instructions). But if the organization chooses to file a return, be sure to file a complete return.

L Add lines 5b, 6c, and 7b, to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, line 25, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ► \$ **146,880**

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I.)Check if the organization used Schedule O to respond to any question in this Part I ☒

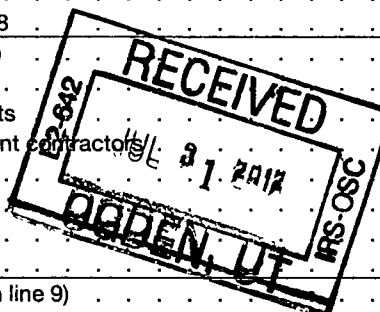
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	140,365
	2	Program service revenue including government fees and contracts	2	
	3	Membership dues and assessments	3	6,431
	4	Investment income	4	84
	5a	Gross amount from sale of assets other than inventory 5a		
	5b	Less: cost or other basis and sales expenses 5b		
	5c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c		
	6	Gaming and fundraising events		
	a	Gross income from gaming (attach Schedule G if greater than \$15,000) 6a		
b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000) 6b			
c	Less: direct expenses from gaming and fundraising events 6c			
d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) 6d			
7a	Gross sales of inventory, less returns and allowances 7a			
b	Less: cost of goods sold 7b			
c	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c			
8	Other revenue (describe in Schedule O) 8			
9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ► 9		146,880	
Expenses	10	Grants and similar amounts paid (list in Schedule O) 10		
	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		3,229
	16	Other expenses (describe in Schedule O) 16		144,211
	17	Total expenses. Add lines 10 through 16 ► 17		147,440
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9) 18		(560)
	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		57,337
	20	Other changes in net assets or fund balances (explain in Schedule O) 20		
	21	Net assets or fund balances at end of year. Combine lines 18 through 20 ► 21		56,777

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 10642I

Form **990-EZ** (2011)

SCANNED AUG 10 2012



Part II Balance Sheets. (see the instructions for Part II.)

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

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	57,337	22 56,777
23	Land and buildings		23
24	Other assets (describe in Schedule O)		24
25	Total assets	57,337	25 56,777
26	Total liabilities (describe in Schedule O)		26
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	57,337	27 56,777

Part III	Statement of Program Service Accomplishments (see the instructions for Part III.)
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Check if the organization used Schedule O to respond to any question in this Part III . . . ☒

What is the organization's primary exempt purpose? **CATHOLIC CHURCH CHARITIES**

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

Expenses

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

28	CATHOLIC CHARITIES		
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	28a	0
29			
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	29a	
30			
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	30a	
31	Other program services (describe in Schedule O) ▶ ☐		
	(Grants \$) If this amount includes foreign grants, check here ▶ ☐	31a	0
32	Total program service expenses (add lines 28a through 31a) ▶	32	0

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

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

[illegible]

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

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O		✓
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)		✓
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?		✓
b If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O		✓
c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III		✓
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N		✓
37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a		
b Did the organization file Form 1120-POL for this year?		✓
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?		✓
b If "Yes," complete Schedule L, Part II and enter the total amount involved 38b		
39 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on line 9 39a		
b Gross receipts, included on line 9, for public use of club facilities 39b		
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶		
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 did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		✓
c 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 ▶		
d Section 501(c)(3) and 501(c)(4) organizations. 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? If "Yes," complete Form 8886-T.		✓
41 List the states with which a copy of this return is filed. ▶ FLORIDA		
42a The organization's books are in care of ▶ Bernard Perry Telephone no. ▶ 239-393-2322		
Located at ▶ 940 Sea Oats Court, Marco Island, Florida ZIP + 4 ▶ 34145		
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)?	Yes	No
If "Yes," enter the name of the foreign country: ▶		✓
See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts		
c At any time during the calendar year, did the organization maintain an office outside 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 ▶ 43		
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ		✓
c Did the organization receive any payments for indoor tanning services during the year?		✓
d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		✓
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions)		✓

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

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 47–49b and 52, and complete the tables for lines 50 and 51.

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

- 47** Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II **47** ☐ Yes ☐ No
- 48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E **48** ☐ Yes ☐ No
- 49a** Did the organization make any transfers to an exempt non-charitable related organization? **49a** ☐ Yes ☐ No
- b** If "Yes," was the related organization a section 527 organization? **49b** ☐ Yes ☐ No
- 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) Reportable compensation (Forms W-2/1099-MISC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

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

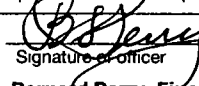
- 51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(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 **d**

- 52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A ☐ Yes ☐ No

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

Sign Here  Signature of officer Date **July 28, 2012**
Bernard Perry, Financial Secretary
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
Firm's name ▶	Firm's EIN ▶			
Firm's address ▶	Phone no ▶			

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

Knights of Columbus, Council 6344, Marco Island, Florida 34146

Employer identification number

23-7322840

Part I, Line 16, OTHER EXPENSES, Dues paid to Florida and Supreme Council, expenses incurred for programs to generate revenue for contributions to charity. These expenses include the following programs: Bingo, Fish Fry and Dinners. Primary donation is to the Catholic Faith Appeal.

Part II, Line 28, PROGRAM ACCOMPLISHMENTS: The San Marco Knights of Columbus conduct a variety of programs (see line 16 description) to generate net revenues that are used to support Catholic Charities. In 2011-2012 Net Revenues were contributed to the Catholic Faith Appeal, The Diocese of Venice and related Catholic Charities.

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(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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10:07 AM
07/28/12
Cash Basis

Knights of Columbus - Council #6344

Balance Sheet

As of June 30, 2012

	<u>Jun 30, 12</u>
ASSETS	
Current Assets	
Checking/Savings	
Event Cash Fund	100.00
Mutual of Omaha	7,933.61
Mutual of Omaha Bank CD 1	10,075.07
Mutual of Omaha Bank CD 2	10,000.00
Mutual of Omaha Bank CD 3	10,000.00
Mutual of Omaha Bank CD 4	10,000.00
Mutual of Omaha Bank MM	8,667.90
Total Checking/Savings	<u>56,776.58</u>
Total Current Assets	<u>56,776.58</u>
TOTAL ASSETS	<u>56,776.58</u>
LIABILITIES & EQUITY	
Equity	
Retained Earnings	57,336.84
Net Income	-560.26
Total Equity	<u>56,776.58</u>
TOTAL LIABILITIES & EQUITY	<u>56,776.58</u>

11:06 AM
07/21/12
Cash Basis

Knights of Columbus - Council #6344

Profit & Loss

July 2011 through June 2012

Jul '11 - Jun 12

Ordinary Income/Expense

Income

REVENUES

Advertisement Revenues-Banner	2,100.00
Badges	140 00
Bingo	37,730.68
Door Donations	1,237.00
Dues	6,431 00
Fish Fry Programs	41,311 00
Funds for physically Challenge	10,492 53
Golf Tournament	16,285.00
Interests Revenues	83.80
Meeting revenue	44 00
Misc Revenues	184.85
Other Donations	1,000.00
Shirts	380.00
Social	5,313 00
Spaghetti Dinner	13,693 00
St Patrick & St Joseph Dinners	9,753 00
St. Vincent de Paul	701.00

Total REVENUES	146,879 86
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Total Income	146,879 86
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Expense

ADMINISTRATIVE EXPENSES

Bank Charges	126.00
Convention(3rd Degree)	474 79
Dues per Capita (State)	2,205.20
Dues per Capita (Supreme)	1,642 67
Initiation Expenses	55.00
Insurance	387.23
Meeting Expenses	84.48
Misc Adm Expenses	94.00
Office Supplies	1,390.52
Postage & Shipping	1,230.55
Printing	135.85
Telephone	526.17

Total ADMINISTRATIVE EXPENSES	8,352 46
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Columbiettes	133 40
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DEVELOPMENT EXPENSES

Advertising	186.28
Badges	150.25
Banner Publication	1,998.17
Knights Shirts	569 54
Misc Development Expenses	568.31
Postage	89.00

Total DEVELOPMENT EXPENSES	3,561.55
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Nonprofit License	125 00
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11:06 AM
07/21/12
Cash Basis

Knights of Columbus - Council #6344

Profit & Loss

July 2011 through June 2012

	<u>Jul '11 - Jun 12</u>
PROGRAM EXPENSES	
Al Bismonte Mission	599.00
Bingo	8,035.04
Catholic Faith Appeal	57,000.00
Charity Donations	5,145.00
Christmas Island Style	796.09
Christmas Parade	654.91
Diocese of Venice	500.00
Fish Fry Programs	14,917.85
Flags	110.00
Funds for physically Challenged	10,241.20
Golf Tournament	7,605.92
Guadalupe Soup Kitchen	1,000.00
Habitat for Humanity of Collier	1,000.00
Misc Program Expenses	709.74
Providence House	2,000.00
San Marco Pro Life	2,000.00
Social	6,729.76
Spaghetti Dinners	8,325.90
St Patrick & St Joseph Dinners	5,899.38
St. Vincent dePaul	467.92
SW FL Run for Life	500.00
Vocations	1,000.00
PROGRAM EXPENSES - Other	20.00
Total PROGRAM EXPENSES	<u>135,257.71</u>
Reconciliation Discrepancies	<u>10.00</u>
Total Expense	<u>147,440.12</u>
Net Ordinary Income	<u>-560.26</u>
Net Income	<u><u>-560.26</u></u>