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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2011

Open to Public
InspectionDepartment of the Treasury
Internal Revenue Service

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, 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.

A For the 2011 calendar year, or tax year beginning

July 1

, 2011, and ending

June 30, 2012

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)

818 Cox Way

D Employer identification number

930685365

E Telephone number

503-873-5008

F Group Exemption

Number ► 0188

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) (8) (insert no.) 4947(a)(1) or 527K 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 ► \$ 45,396

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	106
	2 Program service revenue including government fees and contracts	0
	3 Membership dues and assessments	1207
	4 Investment income	62
	5a Gross amount from sale of assets other than inventory	5a 0
	b Less: cost or other basis and sales expenses	5b 0
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	0
	6 Gaming and fundraising events	
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a 0
	b Gross income from fundraising events (not including \$ 106 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 44,020
	c Less: direct expenses from gaming and fundraising events	6c 23,079
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d 20,941
	7a Gross sales of inventory, less returns and allowances	7a 0
	b Less: cost of goods sold	7b 0
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	0
	8 Other revenue (describe in Schedule O)	0
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	22,316
Expenses	10 Grants and similar amounts paid (list in Schedule O)	7245
	11 Benefits paid to or for members	0
	12 Salaries, other compensation, and employee benefits	0
	13 Professional fees and other payments to independent contractors	0
	14 Occupancy, rent, utilities, and maintenance	0
	15 Printing, publications, postage, and shipping	232
	16 Other expenses (describe in Schedule O)	9459
	17 Total expenses. Add lines 10 through 16	16,936
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	5380
	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)	86,279
	20 Other changes in net assets or fund balances (explain in Schedule O)	0
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	91,659

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 10642I

Form 990-EZ (2011)

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	69,279	22 75,659
23 Land and buildings	20	23 0
24 Other assets (describe in Schedule O)	17,000	24 16,000
25 Total assets	86,279	25 91,659
26 Total liabilities (describe in Schedule O)	20	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	86,279	27 91,659

Part III Statement of Program Service Accomplishments (see the instructions for Part III.)Check if the organization used Schedule O to respond to any question in this Part III What is the organization's primary exempt purpose? Charitable Brotherhood

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 Provide funds and volunteers for youth, Silverton High School, Parochial School, St Paul Parish, and Catholic Education 75 people (Grants \$ 2795)	If this amount includes foreign grants, check here <input type="checkbox"/> ► <input type="checkbox"/> 28a
29 Provide funds and volunteers for Parish activities, community activities, community projects, missions, police and clergy retirement 175 people (Grants \$ 1350)	If this amount includes foreign grants, check here <input type="checkbox"/> ► <input type="checkbox"/> 29a
30 Provided funds for assistance for those in need of food, shelter, & clothing 50 people (Grants \$ 3100)	If this amount includes foreign grants, check here <input type="checkbox"/> ► <input type="checkbox"/> 30a
31 Other program services (describe in Schedule O) (Grants \$)	If this amount includes foreign grants, check here <input type="checkbox"/> ► <input type="checkbox"/> 31a
32 Total program service expenses (add lines 28a through 31a)	► <input type="checkbox"/> 32

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

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
David Stravitz PO Box 1437 Silverton OR 97381	Grant knight .5	0	0	0
Don Nunz 11565 State St. Salem OR 97317	Deputy Grant knight .5	0	0	0
Bill Seuber 10668 Kaufman Rd Silverton OR 97381	Financial Secretary 1	0	0	0
Jack DeSantis 207 N. Agate St, Silverton OR 97381	Chancellor .2	0	0	0
(Bill) Cordill 795 Shelokum Drive Silverton OR 97381	Recorder .3	0	0	0
Frank Mole 946 Oak St. Silverton OR 97381	Lecturer .10	0	0	0
Don Cussetti 818 Barger St. Silverton OR 97381	Advocate .10	0	0	0
Salmon Crnch	Writer .05	0	0	0
Bob Bailey 818 Cox Way Silverton OR 97381	Treasurer .20	0	0	0
John Hinman 6633 Davis Lane Silverton OR 97381	Trustee	0	0	0
Ted Seuber 10668 Kaufman Rd Silverton OR 97381	Trustee	0	0	0
Chris Fleishman 604 Rosemary Silverton, OR 97381	Trustee	0	0	0

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

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 33 ✓

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) 34 ✓

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)? 35a ✓

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 35b

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 35c ✓

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 36 ✓

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ► 37a 37b ✓

b Did the organization file Form 1120-POL for this year? 38a ✓

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? 38b

b If "Yes," complete Schedule L, Part II and enter the total amount involved 39a

39 Section 501(c)(7) organizations. Enter: 39b

a Initiation fees and capital contributions included on line 9 40a

b Gross receipts, included on line 9, for public use of club facilities 40b ✓

40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► _____ ; section 4912 ► _____ ; section 4955 ► _____ 40c

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 40d

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 40e ✓

d Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization 40f

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. 40g

41 List the states with which a copy of this return is filed. ► OREGON

42a The organization's books are in care of ► Robert Gooley Telephone no. ► 503-877-5008
Located at ► 818 Cox Way Silverton, OR ZIP + 4 ► 97381-2285 42b ✓

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: ► 42c ✓
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

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 ✓

44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ 44b ✓

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 44c ✓

c Did the organization receive any payments for indoor tanning services during the year? 44d

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 ✓

45a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 45b ✓

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)

		Yes	No
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	✓

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

		Yes	No
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	✓
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	48	✓
49a	Did the organization make any transfers to an exempt non-charitable related organization?	49a	✓
b	If "Yes," was the related organization a section 527 organization?	49b	
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
None				

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
None		

d Total number of other independent contractors each receiving over \$100,000 ►
 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	► <i>Robert Gooley</i>	Date <i>10-12-2012</i>
	Signature of officer	Date
	► <i>Robert Gooley Treasurer</i>	Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> 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

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

Employer identification number
930685365

10) Grants and Similar amounts Paid

1. Fr Bernard Youth Center	500.00
2. Seminarian Support	1600.00
3. St. Paul Cemetery Support	500.00
4. Franciscan Missionary	200.00
5. St. Paul Parish Youth	195.00
6. Our Lady of Guadalupe	300.00
7. St. Joseph Shelter	200.00
8. Fr. Taaffe Foundation	1,500.00
9. St Michael the Archangel	200.00
10 Silverton Area Community Aid	1000.00
11 Benedictine Sisters	250.00
12 Birthright of Salem	200.00
13 St Maurs Mission	100.00
14 St Paul Parish	500.00
Total	\$7245.00

(16) Other Expenses

1. Coffee and Refreshments	1790.00
2. Knights of Columbus Supreme	517.00
3. Per Capita	1003.00
4. Meeting Refreshment	433.00
5. Insurance	245.00
6. State Convention	219.00
7. Church Bulletin Sponsor	518.00
8. First Christian Church	500.00
9. Women of Faith Activity	400.00

Name of the organization

Employer identification number

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10. Fundraising Food Booth Repair 3834.00

Total \$9659.⁰⁰