





**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	33	X
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	X
35 a	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	X
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	X
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	X
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	X
37 a	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?	37b	X
38 a	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?	38a	X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved	38b	N/A
39	Section 501(c)(7) organizations Enter	39a	N/A
a	Initiation fees and capital contributions included on line 9	39b	N/A
b	Gross receipts, included on line 9, for public use of club facilities		
40 a	Section 501(c)(3) organizations Enter amount of tax imposed on the organization during the year under section 4911 ► <u>N/A</u> , section 4912 ► <u>N/A</u> , section 4955 ► <u>N/A</u>	40b	N/A
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	40e	X
41	List the states with which a copy of this return is filed ► <u>NONE</u>		
42 a	The organization's books are in care of ► <u>THE ORGANIZATION</u> Located at ► <u>1106 E. ROME STREET GONZALES, LA</u>	Telephone no	► <u>(225) 715-9216</u>
		ZIP + 4	► <u>70737</u>
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 ► <u>See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.</u>	42b	X
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 ► <u>42c</u>	42c	X
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	N/A
44 a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a	X
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	44b	X
c	Did the organization receive any payments for indoor tanning services during the year?	44c	X
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	44d	
45 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	X
b	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)	45b	X

		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	X

**Part VI Section 501(c)(3) organizations only**

All Section 501(c)(3) organizations 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 title of each employee paid more than \$100,000 N/A	(b) 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 ►

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" N/A

(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 ►

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 <i>Joseph Henn</i>	Date <i>6/28/21</i>
	JOSEPH HENN, DIRECTOR	
	Type or print name and title	
Paid	Print/Type preparer's name SEAN O'NEILL, CPA	Preparer's signature <i>Sean O'Neill</i>
Preparer	Firm's name ► O'NEILL, APAC	Date <i>6/25/21</i>
Use Only	Firm's address ► 2140 8TH STREET, SUITE 203 MANDEVILLE, LA 70471	Check <input type="checkbox"/> if self-employed PTIN P01061021 Firm's EIN ► 83-2357705 Phone no 985-400-3120

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

**2012**

**Open to Public  
Inspection**

Name of the organization

COLUMBUS CLUB ASSOCIATION OF ST. THERESE COUNCIL 2657

Employer identification number  
72-1172210

**FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:**

<b>DESCRIPTION OF PROPERTY</b>	<b>AMOUNT</b>
RAYMOND JAMES DIVIDENDS	535

**FORM 990-EZ, PART I, LINE 7, GROSS PROFIT FROM SALES OF INVENTORY:**

**INCOME:**

1. GROSS RECEIPTS	3,148
2. RETURNS AND ALLOWANCES	0
3. LINE 1 LESS LINE 2	3,148
4. COST OF GOODS SOLD (LINE3)	2,653
5. GROSS PROFIT (LINE 3 LESS LINE 4)	495

**COST OF GOODS SOLD:**

6. INVENTORY AT BEGINNING OF YEAR	0
7. MERCHANDISE PURCHASED	2,161
8. COST OF LABOR	0
9. MATERIAL AND SUPPLIES	0
10. OTHER COSTS	492
11. ADD LINES 6 THROUGH 10	2,653
12. INVENTORY AT END OF YEAR	0
10. COST OF GOODS SOLD (LINE 11 LESS LINE 12)	2,653

**FORM 990-EZ, PART I, LINE 7B, OTHER COSTS:**

**DESCRIPTION OF OTHER COSTS:**

STATE AND LOCAL SALES TAXES	84
OPERATING EXPENSES	408

**SCHEDULE O**  
(Form 990 or 990-EZ)

**Supplemental Information to Form 990 or 990-EZ**

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Department of the Treasury  
Internal Revenue Service

Name of the organization

**COLUMBUS CLUB ASSOCIATION OF ST. THERESE COUNCIL 2657**

Employer identification number  
**72-1172210**

**FORM 990-EZ, PART I, LINE 20, CHANGES IN NET ASSETS:**

**CHANGES IN NET ASSETS OR FUND BALANCES:**      **AMOUNT:**

**UNREALIZED GAINS**      **3,170**

**FORM 990-EZ, PART II, LINE 24, OTHER ASSETS:**

<b>DESCRIPTION</b>	<b>BEG. OF YEAR</b>	<b>END OF YEAR</b>
<b>RAYMOND JAMES INVESTMENTS</b>	<b>25,215</b>	<b>28,882</b>

**FORM 990-EZ, PART III, PRIMARY EXEMPT PURPOSE:**

**COLUMBUS CLUB ASSOCIATION OF ST. THERESE COUNCIL 2657 ("ASSOCIATION") IS  
ORGANIZED AS A NON-STOCK, NON-PROFIT CORPORATION UNDER THE LAWS OF THE  
STATE OF LOUISIANA FOR THE PURPOSE OF HOLDING TITLE TO REAL ESTATE FOR  
THE KNIGHTS OF COLUMBUS COUNCIL NO. 2657 ("COUNCIL"), A RELATED  
ORGANIZATION WHICH IS TAX-EXEMPT UNDER IRC SECTION 501(C) (8).**

**THE ASSOCIATION OWNS A BUILDING LOCATED IN GONZALES, LA AND LEASES  
IT TO THE COUNCIL FOR ITS MEETINGS AND SOCIAL EVENTS. THE ASSOCIATION  
ALSO RENTS THE BUILDING TO OTHER RELIGIOUS ORGANIZATIONS, SECULAR  
ORGANIZATIONS, AND PRIVATE INDIVIDUALS FOR THEIR MEETINGS AND SOCIAL  
EVENTS.**

**THE REVENUES ARE USED TO SUPPORT THE COUNCIL WITH ITS PROGRAM SERVICE  
ACTIVITIES, SUCH AS FOOD DRIVES, DONATIONS TO FOOD PANTRIES AND SOUP  
KITCHENS, AND HELPING THOSE IN NEED.**

**SCHEDULE O**  
**(Form 990 or 990-EZ)**

## **Supplemental Information to Form 990 or 990-EZ**

OMB No 1545-0047

2012

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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**Name of the organization**

### Names of the organization

## **COLUMBUS CLUB**

COLUMBUS CLUB ASSOCIATION OF ST. THERESA COUNCIL 2657

**Employer identification number**

72-1172210

**FORM 990-EZ, PART V, INFORMATION REGARDING PERSONAL BENEFIT CONTRACTS:**

THE ORGANIZATION DID NOT, DURING THE YEAR, RECEIVE ANY FUNDS, DIRECTLY,

OR INDIRECTLY, TO PAY PREMIUMS ON A PERSONAL BENEFIT CONTRACT.

THE ORGANIZATION, DID NOT, DURING THE YEAR, PAY ANY PREMIUMS, DIRECTLY,

OR INDIRECTLY, ON A PERSONAL BENEFIT CONTRACT.