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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 private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public.

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form990.

OMB No 1545-1150

2013**Open to Public
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A For the 2013 calendar year, or tax year beginning January 1, 2013, and ending December 31, 2013	
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Knights of Columbus St Matthews Council 10852 Number and street (or P O box, if mail is not delivered to street address) Room/suite 9009 Bryant Farms RD City or town, state or province, country, and ZIP or foreign postal code Charlotte, NC 28277-1611
D Employer identification number 56 1830791	
E Telephone number 704 341 3312	
F Group Exemption Number ▶ 0188	
G Accounting Method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ▶	
H Check <input checked="" type="checkbox"/> 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) — <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (8) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	
K Form of organization. <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input checked="" type="checkbox"/> Other Fraternal	
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, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ ▶ \$ 113674	

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 <input type="checkbox"/>		
Revenue	1 Contributions, gifts, grants, and similar amounts received	1 103754
	2 Program service revenue including government fees and contracts	2
	3 Membership dues and assessments	3 9821
	4 Investment income	4 99
	5a Gross amount from sale of assets other than inventory 5a	
	b Less: cost or other basis and sales expenses 5b	
	c 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 113674	
Expenses	10 Grants and similar amounts paid (list in Schedule O) 10 17295	
	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 3494	
	16 Other expenses (describe in Schedule O) 16 104285	
	17 Total expenses. Add lines 10 through 16 ▶	17 125074
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 (11400)	
	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 80509	
	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 69109

For Paperwork Reduction Act Notice, see the separate instructions.

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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 ☐

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

Part III	Statement of Program Service Accomplishments (see the instructions for Part III)	Expenses
	Check if the organization used Schedule O to respond to any question in this Part III <input type="checkbox"/>	(Required for section

Check if the organization used Schedule O to respond to any question in this Part III ☐ (Required for section

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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)

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 ☐

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

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

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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 ▶		
42a The organization's books are in care of ▶ <u>John Coudriet</u> Telephone no. ▶ <u>704 543 9621</u> Located at ▶ <u>9407 Olivia Lane Charlotte NC</u> ZIP + 4 ▶ <u>28277</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: ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .	Yes	No
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 ▶ <input type="checkbox"/> 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)		✓

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.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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2013

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Name of the organization

Knights of Columbus St Matthews Council 10852

Employer identification number

56 1830791

Payments to Affiliates Schedule

January - 3750

February

March

April- 1250

May - 2295

June - 1250

July - 1250

August - 1250

September - 1250

October - 1250

November - 1250

December - 1250

Total - 17295