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Form **990-EZ****Short Form****Return of Organization Exempt From Income Tax**

OMB No 1545-1150

**2013****Open to Public Inspection**Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/form990).**A** For the 2013 calendar year, or tax year beginning January 1, 2013, and ending December 31, 2013**B** Check if applicable

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

**C** Name of organization**Knights of Columbus - St. Thomas More #10205**

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

Room/suite

**8035 S. Quebec Street**

City or town, state or province, country, and ZIP or foreign postal code

**Centennial CO 80112****D** Employer identification number**84-1145133****E** Telephone number**303-290-9907****F** Group Exemption

Number ▶

**0188****G** Accounting Method: ☒ Cash ☐ Accrual Other (specify) ▶**I** Website: ▶ <http://www.council10205.org>**J** Tax-exempt status (check only one) — ☐ 501(c)(3) ☐ 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** Form of organization: ☐ Corporation ☐ Trust ☐ Association ☒ Other **Religious, Charitable, Fraternal Organization****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 . . . . . ▶ \$

**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 . . . . . ☐

<b>Revenue</b>	<b>1</b>	Contributions, gifts, grants, and similar amounts received . . . . .	<b>1</b>	<b>1682.57</b>
	<b>2</b>	Program service revenue including government fees and contracts . . . . .	<b>2</b>	<b>0</b>
	<b>3</b>	Membership dues and assessments . . . . .	<b>3</b>	<b>7820.65</b>
	<b>4</b>	Investment income . . . . .	<b>4</b>	<b>0</b>
	<b>5a</b>	Gross amount from sale of assets other than inventory . . . . .	<b>5a</b>	<b>0</b>
	<b>5b</b>	Less: cost or other basis and sales expenses . . . . .	<b>5b</b>	<b>0</b>
	<b>5c</b>	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) . . . . .	<b>5c</b>	<b>0</b>
	<b>6</b>	Gaming and fundraising events		
	<b>a</b>	Gross income from gaming (attach Schedule G if greater than \$15,000) . . . . .	<b>6a</b>	<b>16798.00</b>
	<b>b</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) . . . . .	<b>6b</b>	<b>57584.75</b>
<b>c</b>	Less: direct expenses from gaming and fundraising events . . . . .	<b>6c</b>	<b>56135.71</b>	
<b>d</b>	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) . . . . .	<b>6d</b>	<b>18247.04</b>	
<b>7a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>7a</b>	<b>0</b>	
<b>b</b>	Less: cost of goods sold . . . . .	<b>7b</b>	<b>0</b>	
<b>c</b>	Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) . . . . .	<b>7c</b>	<b>0</b>	
<b>8</b>	Other revenue (describe in Schedule O) . . . . .	<b>8</b>	<b>0</b>	
<b>9</b>	<b>Total revenue.</b> Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 . . . . . ▶	<b>9</b>	<b>27750.26</b>	
<b>Expenses</b>	<b>10</b>	Grants and similar amounts paid (list in Schedule O) . . . . .	<b>10</b>	<b>27465.44</b>
	<b>11</b>	Benefits paid to or for members . . . . .	<b>11</b>	<b>0</b>
	<b>12</b>	Salaries, other compensation, and employee benefits . . . . .	<b>12</b>	<b>0</b>
	<b>13</b>	Professional fees and other payments to independent contractors . . . . .	<b>13</b>	<b>0</b>
	<b>14</b>	Occupancy, rent, utilities, and maintenance . . . . .	<b>14</b>	<b>0</b>
	<b>15</b>	Printing, publications, postage, and shipping . . . . .	<b>15</b>	<b>0</b>
	<b>16</b>	Other expenses (describe in Schedule O) . . . . .	<b>16</b>	<b>15741.63</b>
	<b>17</b>	<b>Total expenses.</b> Add lines 10 through 16 . . . . . ▶	<b>17</b>	<b>43207.07</b>
<b>Net Assets</b>	<b>18</b>	Excess or (deficit) for the year (Subtract line 17 from line 9) . . . . .	<b>18</b>	<b>(15456.81)</b>
	<b>19</b>	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) . . . . .	<b>19</b>	<b>35744.02</b>
	<b>20</b>	Other changes in net assets or fund balances (explain in Schedule O) . . . . .	<b>20</b>	<b>0</b>
	<b>21</b>	Net assets or fund balances at end of year. Combine lines 18 through 20 . . . . . ▶	<b>21</b>	<b>20287.21</b>

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 . . . . . ☐

		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments. . . . .	35744.02	22 20287.21
23	Land and buildings . . . . .	0	23 0
24	Other assets (describe in Schedule O) . . . . .	0	24 0
25	<b>Total assets</b> . . . . .	35744.02	25 20287.21
26	<b>Total liabilities</b> (describe in Schedule O) . . . . .	0	26 0
27	<b>Net assets or fund balances</b> (line 27 of column (B) <b>must agree with line 21</b> ) . . . . .	35744.02	27 20287.21

**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?** Religious and Chairtable Fund Raising

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.)

<b>28</b>	<b>Bronco Ticket Raffle</b> Proceeds from Raffle of donated 2 tickets, parking and infield passes to 8 different home Bronco Games Distributed to 25 different Charitable Organizations (Grants \$ <b>25129.17</b> ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>28a</b>	<b>435.84</b>
<b>29</b>	<b>Tootsie Roll Drive for the handicapped and Disadvantaged</b> Proceeds Distributed to 5 local Charitable Organizations and Colorado Special Olympics (Grants \$ <b>9421.15</b> ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>29a</b>	<b>893.92</b>
<b>30</b>	<b>Two Food Drives</b> Distributed 4 truck load of donated foods plus monetary contributions to three Food Banks (Grants \$ <b>3159.00</b> ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>30a</b>	<b>161.34</b>
<b>31</b>	Other program services (describe in Schedule O) . . . . . (Grants \$ <b>2336.27</b> ) If this amount includes foreign grants, check here . . . . ▶ <input type="checkbox"/>	<b>31a</b>	<b>0</b>
<b>32</b>	<b>Total program service expenses</b> (add lines 28a through 31a) . . . . . ▶	<b>32</b>	<b>1491.10</b>

**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
<b>33</b> 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 . . . . .	<b>33</b>	✓
<b>34</b> 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) . . . . .	<b>34</b>	✓
<b>35a</b> 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>35a</b>	✓
<b>b</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 . . . . .	<b>35b</b>	
<b>c</b> 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 . . . . .	<b>35c</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 tax year 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> 0	
<b>39</b> Section 501(c)(7) organizations. Enter:		
<b>a</b> Initiation fees and capital contributions included on line 9 . . . . .	<b>39a</b> 0	
<b>b</b> Gross receipts, included on line 9, for public use of club facilities . . . . .	<b>39b</b> 0	
<b>40a</b> Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ 0 ; section 4912 ▶ 0 ; section 4955 ▶ 0 . . . . .		
<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 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 . . . . .	<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 . . . . . ▶ 0		
<b>d</b> Section 501(c)(3) and 501(c)(4) organizations. Enter amount of tax on line 40c reimbursed by the organization . . . . . ▶ 0		
<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>Colorado</b> . . . . .		
<b>42a</b> The organization's books are in care of ▶ <b>Vito Gennaro</b> Telephone no. ▶ <b>720-536-5279</b> Located at ▶ <b>9787 Jefferson Pkwy Apt A1, Englewood CO 80112</b> ZIP + 4 ▶ <b>80112-5960</b> . . . . .		
<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)? If "Yes," enter the name of the foreign country: ▶ <b>N/A</b> 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>42b</b>	✓
<b>c</b> 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: ▶ <b>N/A</b> . . . . .	<b>42c</b>	✓
<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> . . . . .		<input type="checkbox"/>
<b>44a</b> Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ . . . . .	<b>44a</b>	✓
<b>b</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 . . . . .	<b>44b</b>	✓
<b>c</b> Did the organization receive any payments for indoor tanning services during the year? . . . . .	<b>44c</b>	✓
<b>d</b> If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O . . . . .	<b>44d</b>	
<b>45a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	<b>45a</b>	✓
<b>45b</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) . . . . .	<b>45b</b>	✓

- 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 . . . . .

	Yes	No
<b>46</b>		<input checked="" type="checkbox"/>

**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 . . . . . ☐

- 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 . . . . .

	Yes	No
<b>47</b>		<input checked="" type="checkbox"/>

- 48** 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"/>
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- 49a** Did the organization make any transfers to an exempt non-charitable related organization? . . . . .

<b>49a</b>		<input checked="" type="checkbox"/>
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- b** If "Yes," was the related organization a section 527 organization? . . . . .

<b>49b</b>		
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- 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	(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."

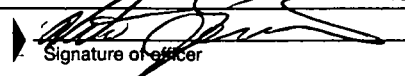
(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

**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.

<b>Sign Here</b>	Signature of officer 	Date <u>5/12/14</u>
	<b>Vito Gennaro</b> Treasurer Type or print name and title	

<b>Paid Preparer Use Only</b>	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

2013 99EZ	
Knights of Columbus - St. Thomas More #10205	EIN
Schedule G	84-1145133

**Gross Income from Fund Raising**

Fish Fry's (6 Fridays)	31,759.75
Tootsie Roll Drive	9,421.15
Men's Camping Social	105.00
Men's Lenten Retreat	365.00
State Football Sweepstakes	58.00
Christmas Food Drive	2,013.00
Widows/Orphan Fund	500.00
Easter Food Drive	1,171.00
Petty Cash Return	400.00
Peaches Sales	2,909.00
Italian Family Feast	4,825.85
St. Patrick's Day Celebration	1,611.00
Lou Collignon Memorial	2,446.00
<b>Total</b>	<b>57,584.75</b>

2013 99EZ	
Knights of Columbus - St. Thomas More #10205	EIN
Schedule G	84-1145133

**Gross Income from Gaming**

Raffle - Council - Main Annual Fund Raiser	14,161.00
Raffle - Support Auxiliary Charities	216.00
50/50 Fish Fry's (6)	1,151.00
Raffle - Support STM Youth Group ASB	1,270.00
<b>Total</b>	<b>16,798.00</b>

<b>2013 99EZ</b>	
<b>Knights of Columbus - St. Thomas More #10205</b>	<b>EIN</b>
<b>Schedule O</b>	<b>84-1145133</b>

### Expenses

1st Degree Ceremony Expense	25.59
Major Degree Expense	250.00
Knights to Christ Books (\$7.25 ea.)	200.00
Postage	309.99
Travel Expense	109.62
Truck Banners	54.00
Office Supplies	358.10
Liability Insurance	450.00
Website URL Renewal (Go Daddy - 3yr)	154.53
E-mail Service	238.00
Installation of Council Officers	66.98
Marketing Materials (non project)	452.25
Centurion Prod. Costs (Signal Graphics)	12.14
Printing (Council Directory / Training Materials)	165.00
Greeting Cards	27.00
Knights Satisfaction Survey	479.14
Bank Service Charge / Cr Card Chg	324.01
Social Meeting Expenses/Food & Bev	2,499.65
Knights Training Refreshments	18.38
KC Metro Annual Dues	50.00
Catholic Register Ad - Clergy Appr.	85.00
KC State Per Capita	2,725.00
KC State - Knights Call & Delegates Ass.	20.00
KC State Convention Lodging/Food	390.93
KC State Convention Ad	65.00
KC Supreme Per Capita	1,441.39
KC Supreme Supplies (Brochures etc )	345.00
Culture of Life	420.59
Expense - Advance	4,900.00
Expense - Advance Returned	(4,858.08)
Knights RE (Babysitting)	204.00
Knights RE (Refreshments)	209.85
Broncos Raffle Social	816.27
Memorial Mass / Reception	141.90
Communion Breakfast	413.00
Council Free Throw Contest	177.00
College Scholarships - 2@\$1000	2,000.00
Misc.	0.40
<b>Total</b>	<b>15,741.63</b>



<b>2013 99EZ</b>	
<b>Knights of Columbus - St. Thomas More #10205</b>	<b>EIN</b>
<b>Schedule O</b>	<b>84-1145133</b>

**Grants Paid**

STM Jericho Jog	500.00
Charitable Contributions TBD	4,500.00
STM Parish Donation	1,500.00
STM Youth (ASB Program) - Raffle Proc.	2,020.00
STM American Heritage Girls	250.00
QAMA	500.00
Seminarians 5@ \$500	3,000.00
Pennies from Heaven	1,151.00
Christ IN The City	1,000.00
Franciscan University Belize Trip	200.00
STM Boy Scouts 770	200.00
Eagle Scout Project - Jackson Baker	100.00
Gabriel House	500.00
K of C Supreme Coats for Kids	1,908.17
Disclaced Carmelite Friars	3,000.00
Augustine Institute	200.00
KofC St. Andrew Council Oklahoma	200.00
Travel Tyme - Fr. Baptist Trip	1,200.00
STM Priest Golf Outing / Tourney	3,000.00
STM Respect For Life	200.00

**Other Program Services**

Council Approved Disbursements	600.00
Christ the King Shiprock NM	211.68
Eagle Scouts	600.00
Fr. Andrew 25th Aniversary Gift	200.00
Essay Contest	26.66
Sacred Heart Christmas Party	697.93

**Other Program Services Total** **2,336.27**

**Grand Total** **27,465.44**