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Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax

OMB No. 1545-1150

2014

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury
Internal Revenue Service

► 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.Open to Public
Inspection

A For the 2014 calendar year, or tax year beginning		January 1, 2014	and ending	December 31, 2014
B Check if applicable:		C Name of organization		
<input type="checkbox"/> Address change		KNIGHTS OF COLUMBUS COUNCIL 9132		
<input type="checkbox"/> Name change		Number and street (or P.O. box, if mail is not delivered to street address)		
<input type="checkbox"/> Initial return		1729 Stop Thirty Road, P O Box 206		
<input type="checkbox"/> Terminated		City or town, state or province, country, and ZIP or foreign postal code		
<input type="checkbox"/> Amended return		Hendersonville, Tennessee 37075		
<input type="checkbox"/> Application pending				
G Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) ►				
I Website: ►				
J Tax-exempt status (check only one) — <input type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)(8) <input type="checkbox"/> (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).		
K Form of organization: <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input checked="" type="checkbox"/> Other 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.		► \$ 43070		
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 checked="" type="checkbox"/>				
SCANNED JUN 02 2015	1 Contributions, gifts, grants, and similar amounts received	500		
	2 Program service revenue including government fees and contracts	5087		
	3 Membership dues and assessments	0		
	4 Investment income	0		
	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)	5c 0		
	6 Gaming and fundraising events	0		
	a Gross income from gaming (attach Schedule G if greater than \$15,000)	6a 0		
	b Gross income from fundraising events (not including \$ 0 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 48592		
c Less: direct expenses from gaming and fundraising events	6c 11109			
d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d 37483			
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)	7c 0			
8 Other revenue (describe in Schedule O)	8 0			
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	► 43070			
Expenses	10 Grants and similar amounts paid (list in Schedule O)	17453		
	11 Benefits paid to or for members	600		
	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	1096		
	16 Other expenses (describe in Schedule O)	18653		
17 Total expenses. Add lines 10 through 16	► 37802			
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	5268		
	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)	25589		
	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	► 30857		

For Paperwork Reduction Act Notice, see the separate instructions.

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Form 990-EZ (2013)

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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	19275	22 23708
23 Land and buildings		23
24 Other assets (describe in Schedule O)	6314	24 7149
25 Total assets	25589	25 30857
26 Total liabilities (describe in Schedule O)	0	26 0
27 Net assets or fund balances (line 27 of column (B) must agree with line 21)	25589	27 30857

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? **Fraternal Service Organization**

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.)

persons benefited, and other relevant information for each program title.		
28		
(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a
29		
(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	29a
30		
(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	30a
31	Other program services (describe in Schedule O)	
(Grants \$) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	31a
32	Total program service expenses (add lines 28a through 31a)	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 Q to respond to any question in this Part IV.

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**

b Did the organization file Form 1120-POL for this year? **37b**

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? **38a**

b If "Yes," complete Schedule L, Part II and enter the total amount involved **38b**

39 Section 501(c)(7) organizations. Enter: **39a**

a Initiation fees and capital contributions included on line 9 **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 ► **40b**

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 **40c**

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 **40d**

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

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 **40f**

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

42a The organization's books are in care of ► John Bolger Telephone no. ► 615-264-3129
Located at ► 1759 Stop Thirty Road, Hendersonville, TN 37075 ZIP + 4 ► 37075 **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: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. **42c**

c At any time during the calendar year, did the organization maintain an office outside the U.S.? **42d**

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

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**

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

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**

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

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) **45b**

		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 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	(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
None				

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

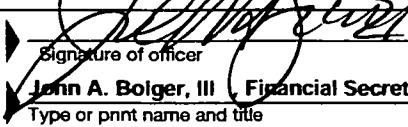
51 Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

d Total number of other independent contractors each receiving over \$100,000 ► 0

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  John A. Bolger, III, Financial Secretary	Date 5/12/2015
Paid Preparer Use Only	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

Knights of Columbus Council 9132
YEAR 2014

Gross Income: 2014:

GOLF TOURNAMENT	\$	19240
SILENT AUCTION		14880
BRASS EVENT		4120
FISH FRY		3624
MEAT SALES		4540
CHRISTMAS CARDS + MAGNETS		1850
MISC		338
GIFTS RECEIVED		520
		<hr/>
Subtotal		49,092

Direct Expenses:

GOLF TOURNAMENT	\$	6475
FISH FRY		1350
MEAT SALES		2215
CARDS + MAGNETS		1069
Subtotal	\$	11,109
		<hr/>

Subtotal \$ 37,583

DUES RECEIVED \$ 287

Total Income \$ 43,070

Council 9132 Knights of Columbus
YEAR 2014

Income 2014

GOLF TOURNAMENT NET = \$ 12,705.00

GROSS RECEIVED + 19,240.00

EXPENSES - 64075.00

Silent Auction 14,880.00

BRASS EVENT 4120.00

Fish Fay GROSS 3624
EXPENSES 1350 NET 2274.00

MEAT SALES GROSS 4540
EXPENSES 2215 NET 2325.00

Christmas Cards + Magnets GROSS 1850
EXPENSES 1065 781.00

Gifts 520.00

misc 338.00

Sub total income 37,983.00
2014

Dues 5287.00

Net Income ~~43,070.00~~

Knights of Columbus Council 9132
Year 2014

Grants + Similar Amounts
PAID OUT :

Wounded Warrior Project	100
Knights of Columbus Iraq Fund	520
Casey's Kitchen Food Kitchen	520
Our Lady of the Lakes Building Fund	5200
" " " " ITAT Project	520
" " " " Publications	773
" " " " Food Pantry	520
" " " " Room at the Inn	800
St. Pius X Church + School	520
St. Vincent de Paul Society	520
Senna Club of Nashville	1020
Seminarians RSVP Program	900
Tennessee State Council	520
Council 15887	300
Our Lady of the Lakes Church Youth	3220
JASON Foundation	520
Unbound	120
Focus	800
OLOL FRATERNS Chapter	620
TOTAL 2014	17453.00

Council 9132 Knights of Columbus
YEAR 2018

General Expenses / Expenditures:

Meeting Food & Expenses	\$ 5,759
Per Capita - Supreme Council	4416
Per Capita - STATE Council	2497
Entertainment	1266
Pro-Life Activities	1600
Fraternal General	3785
 TOTAL	 18653