

APPLICATION FOR TAX-EXEMPTION PENDING IN EO CINCINNATI

Form 990-EZ

Short Form

Return of Organization Exempt From Income Tax

OMB No 1545-1150

2014

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.Open to Public
Inspection

recd by

043680893507122121

ENVELOPE JUN 28 2021
POSTMARK DATE

SCANNED JUN 30 2022

A For the 2014 calendar year, or tax year beginning _____ and ending _____		D Employer identification number	
B Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Application pending		C Name of organization COLUMBUS CLUB ASSOCIATION OF ST. THERESA COUNCIL 2657	
		Number and street (or P.O. box, if mail is not delivered to street address) 1106 E. ROME STREET	Room/suite 102
		E Telephone number (225) 715-9216	
		F Group Exemption Number ► 72-1172210	
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) (2) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		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 ► \$ 60,386.	
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"/>			
Revenue	1 Contributions, gifts, grants, and similar amounts received	1	
	2 Program service revenue including government fees and contracts	2	53,170.
	3 Membership dues and assessments	3	
	4 Investment income	4	817.
	5a Gross amount from sale of assets other than inventory	5a	2,431.
	b Less: cost or other basis and sales expenses	5b	49.
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	2,382.
	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 \$ from fundraising events reported on Schedule O) (Subtract line 6a from the sum of such gross income and contributions if such 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	3,968.	
b Less: cost of goods sold	7b	2,734.	
c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	1,234.	
8 Other revenue (describe in Schedule O)	8		
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	57,603.	
Expenses	10 Grants and similar amounts paid (list in Schedule O)	10	
	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	33,223.
	15 Printing, publications, postage, and shipping	15	
	16 Other expenses (describe in Schedule O)	16	8,455.
	17 Total expenses. Add lines 10 through 16	17	41,678.
Net Assets	18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	15,925.
	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	125,547.
	20 Other changes in net assets or fund balances (explain in Schedule O)	20	-968.
	21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	140,504.
	SEE SCHEDULE O		
RECEIVED IN CORRESPONDENCE IRS - OSC - 12 JUL 06 2021			
OGDEN, UTAH SEE SCHEDULE O			

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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COUNCIL 2657

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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 Sch. 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
39b

a Initiation fees and capital contributions included on line 9
b Gross receipts, included on line 9, for public use of club facilities

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), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) 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), 501(c)(4), and 501(c)(29) 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 ► NONE

42a The organization's books are in care of ► THE ORGANIZATION Telephone no. ► (225) 715-9216
Located at ► 1106 E. ROME STREET, GONZALES, LA ZIP + 4 ► 70737

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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).

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: ►

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

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

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

Yes	No
33	<input checked="" type="checkbox"/>
34	<input checked="" type="checkbox"/>
35a	<input checked="" type="checkbox"/>
35b	<input checked="" type="checkbox"/>
35c	<input checked="" type="checkbox"/>
36	<input checked="" type="checkbox"/>
37a	<input type="text" value="0"/>
37b	<input checked="" type="checkbox"/>
38a	<input checked="" type="checkbox"/>
38b	<input type="text" value="N/A"/>
39a	<input type="text" value="N/A"/>
39b	<input type="text" value="N/A"/>
40b	<input type="text" value="N/A"/>
40c	<input type="text" value="N/A"/>
40d	<input type="text" value="N/A"/>
40e	<input checked="" type="checkbox"/>

Yes	No
42b	<input checked="" type="checkbox"/>
42c	<input checked="" type="checkbox"/>

Yes	No
44a	<input checked="" type="checkbox"/>
44b	<input checked="" type="checkbox"/>
44c	<input checked="" type="checkbox"/>
44d	<input type="checkbox"/>
45a	<input checked="" type="checkbox"/>
45b	<input type="checkbox"/>

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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
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

47 Did the organization engage in lobbying activities or have a section 501(h) election in effect during the tax year? If "Yes," complete Sch. C, Part II

47	Yes	No

48 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

48	Yes	No

49a Did the organization make any transfers to an exempt non-charitable related organization?

49a	Yes	No

b If "Yes," was the related organization a section 527 organization?
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 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 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 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 ► *Joseph E. Henn* *6/28/21*
Signature of officer
► **JOSEPH HENN, PRESIDENT**
Type or print name and title

Paid Preparer Use Only	Print/Type preparer's name SEAN P. O'NEILL, CPA	Preparer's signature <i>Sean P. O'Neill</i>	Date 4/25/21	Check <input type="checkbox"/> if self-employed	PTIN P01061021
	Firm's name ► O'NEILL, APAC	Firm's EIN ► 83-2357705			
	Firm's address ► 2140 8TH STREET, SUITE 203 MANDEVILLE, LA 70471	Phone no (985) 400-3120			

May the IRS discuss this return with the preparer shown above? See instructions

► Yes No

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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

OMB No 1545-0047

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Inspection

Name of the organization

COLUMBUS CLUB ASSOCIATION OF ST. THERESA
COUNCIL 2657Employer identification number
72-1172210**FORM 990-EZ, PART I, LINE 4, OTHER INVESTMENT INCOME:**

<u>DESCRIPTION OF PROPERTY:</u>	<u>AMOUNT:</u>
RAYMOND JAMES DIVIDENDS	817.

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

1. GROSS RECEIPTS	3,968.
2. RETURNS AND ALLOWANCES	0.
3. LINE 1 LESS LINE 2	3,968.
4. COST OF GOODS SOLD (LINE 13)	2,734.
5. GROSS PROFIT (LINE 3 LESS LINE 4)	1,234.

COST OF GOODS SOLD:

6. INVENTORY AT BEGINNING OF YEAR	0.
7. MERCHANDISE PURCHASED	2,160.
8. COST OF LABOR	0.
9. MATERIALS AND SUPPLIES	0.
10. OTHER COSTS	574.
11. ADD LINES 6 THROUGH 10	2,734.
12. INVENTORY AT END OF YEAR	0.
13. COST OF GOODS SOLD (LINE 11 LESS LINE 12)	2,734.

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

<u>DESCRIPTION OF OTHER COSTS:</u>	<u>AMOUNT:</u>
STATE AND LOCAL SALES TAXES	153.
OPERATING EXPENSES	421.

TOTAL INCLUDED ON FORM 990-EZ, PART I, LINE 7B

574.

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08-27-14

Schedule O (Form 990 or 990-EZ) (2014)

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
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Name of the organization

COLUMBUS CLUB ASSOCIATION OF ST. THERESE
COUNCIL 2657Employer identification number
72-1172210**FORM 990-EZ, PART I, LINE 16, OTHER EXPENSES:**

DESCRIPTION OF OTHER EXPENSES:	AMOUNT:
INVESTMENT FEES	50.
DEPOSIT REFUNDS	8,405.
TOTAL TO FORM 990-EZ, LINE 16	8,455.

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

CHANGES IN NET ASSETS OR FUND BALANCES:	AMOUNT:
UNREALIZED LOSSES	-968.

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

DESCRIPTION	BEG. OF YEAR	END OF YEAR
RAYMOND JAMES INVESTMENTS	36,643.	38,949.

FORM 990-EZ, PART III, LINE 28, PROGRAM SERVICE ACCOMPLISHMENTS:

THE PROPERTY IS LEASED TO THE COUNCIL AT DISCOUNTED RATES

FOR MEETINGS, SOCIAL EVENTS, AND FUNDRAISING EVENTS. IT IS

ALSO LEASED TO OTHER RELIGIOUS AND SECULAR ORGANIZATIONS,

AND PRIVATE INDIVIDUALS FOR THEIR MEETINGS AND SOCIAL EVENTS.

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
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Schedule O (Form 990 or 990-EZ) (2014)

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.

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COLUMBUS CLUB ASSOCIATION OF ST. THERESE
COUNCIL 2657

Employer identification number
72-1172210

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.

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.