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Form 990-P

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Open to Public Inspection

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-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2014 or tax year beginning and ending Name of foundation A Employer identification number Red Knights Motorcycle Club Louisiana 1 Jefferson, Inc. Number and street (or P.O. box number if mail is not delivered to street address) Room/suite 72-1483139 1312 Lecompte Drive B Telephone number (see instructions) State ZIP code City or town Westwego LA 70094 (504) 319-8885 Foreign province/state/county Foreign country name Foreign postal code C If exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, Address change Name change check here and attach computation Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at Accounting method X Cash If the foundation is in a 60-month termination end of year (from Part II, col (c), (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 87.442 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per purposes books equal the amounts in column (a) (see instructions)) (cash basis only) 1 Contributions, gifts, grants, etc., received (attach schedule) 793 2 Check ► X if the foundation is not required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances ٠, b Less Cost of goods sold - _ Gross profit or (loss) (attach schedule) C 11 Other income (attach schedule) . 24,716 12 Total. Add lines 1 through 11 0 25.512 3 Compensation of officers, directors, trustees, etc 13 Other employee salaries and wages 14 13 OSK Pension plans, employee benefits 15 JUN 1 6 2015 16a Legal fees (attach schedule) Accounting fees (attach schedule) b Other professional fees (attach schedule) COEN C 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 515 and 22 Printing and publications 262 23 Other expenses (attach schedule) 22,148 24 Total operating and administrative expenses. Add lines 13 through 23 22.925 0 0 25 Contributions, gifts, grants paid 1,705 1.705 26 Total expenses and disbursements. Add lines 24 and 25 24,630 0 0 1,705 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 882 **Net investment income** (if negative, enter -0-)

, Form 990-PF (2014)

Б.	-4 II	D-Is-sa Chasta	Attached schedules and amounts in the description column	Beginning of year	End of	year
Fa	rt II	Balance Sheets	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
$\neg \gamma$	1	Cash—non-interest	-bearing .	86,560	87,442	87,442
	2		rary cash investments			
ļ	3	Accounts receivable				
			doubtful accounts			
-	4	Pledges receivable		1		
ļ		_	doubtful accounts		····	
ĺ	5	Grants receivable				
I	6		om officers, directors, trustees, and other			
			s (attach schedule) (see instructions)			
	7		receivable (attach schedule)	* '% , ,		
	•	Less allowance for dou			·_·	
S	8	Inventories for sale				
Assets	9		and deferred charges			
ŝ	_		state government obligations (attach schedule)			
4	10a		orate stock (attach schedule)	 		
	b					
	C	•	orate bonds (attach schedule)	, , ,		· ;
	11		Idings, and equipment basis	- -		
	40	·	preciation (attach schedule)			
	12	Investments—mort				
	13	Investments—other				
	14	Land, buildings, and eq			·· · ····	
	۱	•	preciation (attach schedule)			
	15	Other assets (desc				
	16	,	completed by all filers—see the	00.500	07.440	07.440
\dashv	ļ. <u></u> .	instructions Also, s		86,560	87,442	87,442
S	17		and accrued expenses			
	18	Grants payable				
Liabilities	19	Deferred revenue				'
豆	20 Loans from officers, directors, trustees, and other disqualified persons				,	
<u>=</u>	21		er notes payable (attach schedule)		-	f. , , , , u ,
_	22	Other liabilities (de:				» i
	23		dd lines 17 through 22)	0	0	
S			follow SFAS 117, check here			
S	1	and complete line	s 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted		86,560	87,442	
3al	25	Temporarily restrict	ted			
-	26	Permanently restrict	cted			٠. ٠,
Fund B			do not follow SFAS 117, check here 🕒 🗌			I il y new Sec
Ŧ	i	and complete line				* * * * * *
Net Assets or	27	•	principal, or current funds			
ets	28		urplus, or land, bidg , and equipment fund			
SS	29		ccumulated income, endowment, or other funds			
A	30	Total net assets o	r fund balances (see instructions)	86,560	87,442	
ē	31	Total liabilities an	d net assets/fund balances (see			1 *
		instructions)		86,560	87,442	<u></u>
	art III		hanges in Net Assets or Fund Balances		·	
		net assets or fund b	alances at beginning of year—Part II, column (a)), line 30 (must agree	with	
			ed on prior year's return)		1	86,560
2		r amount from Part I,			2	882
			ded in line 2 (itemize)		3	
		lines 1, 2, and 3			4	87,442
5		eases not included ii	n line 2 (itemize)		5	
			palances at end of year (line 4 minus line 5)—Par	t II, column (b), line 30	6	87,442

Page 2

Page 3

r ait iv	(a) List and describe th	e kind(s) of property sold (e.g., real estate use, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)			
1a									
b			- · · · · ·	<u> </u>		-			
d							-		
ее					<u> </u>				
(e) Gr	oss sales price	(f) Depreciation allowed (or allowable)	, ,,,	or other basis pense of sale			o or (loss) f) minus (g)		
a		······································							
b									
C									
<u>d</u>	· · · · · · · · · · · · · · · · · · ·			<u> </u>					
<u>e</u>	<u> </u>								
Com	plete only for assets sh	owing gain in column (h) and owned	by the foundati	on on 12/31/69		(I) Gains (Col	(h) gain minus		
(i) FM \	/ as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i)		col (k), but not	less than -0-) or om col (h))		
a									
b									
С									
d			,						
е			1						
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }					2		0		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)					-				
		line 8, column (c) (see instruction							
	line 8	(5) (222	, (,,	}	3		0		
		er Section 4940(e) for Redu	iced Tax on	Net Investment	_	ne			
Was the four	10(d)(2) applies, leave idation liable for the s oundation does not q	ection 4942 tax on the distributal ualify under section 4940(e) Do	ble amount of a not complete t	any year in the base his part	e perio	d?	Yes No		
		unt in each column for each year			ng anv	entries	·		
	(a)		1		.g u,	CHUICS	(d)		
	ise period years ir (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) e of nonchantable-use as	ribution ratio divided by col. (c))				
Calcidat yea	2013		1.800		0	(\omega) (0 00000		
	2012		1,120		0		0 000000		
	2011		.,.20	.	<u>ŏ</u>		0 000000		
	2010				-		0 000000		
	2009						0 000000		
	2000	· · · · · · · · · · · · · · · · · · ·		-					
2 Total	of line 1, column (d)					2	0 000000		
		or the 5-year base period—divide	the total on lin	ne 2 by 5, or by the	ŀ	-	0 000000		
 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2014 from Part X, line 5 Multiply line 4 by line 3 					-	3	0 000000		
					-	4			
					-	5	·		
6 Enter	1% of net investment	income (1% of Part I, line 27b)				6	0		
7 Add II	nes 5 and 6					7	0		
8 Enter	qualifying distribution	s from Part XII, line 4				8	0		
If line		er than line 7, check the box in P	art VI, line 1b,	and complete that	part us				

	0-PF (2014) Red Knights Motorcycle Club Louisiana 1 Jefferson, Inc.					2-148313	9 1	Page 4	
Part \				e insi	truction	ons)			
1a			ter "N/A" on line 1	1	1 m		٠.		
b	Date of ruling or determination letter (attach copy of letter if nec Domestic foundations that meet the section 4940(e) requirements in Part \			- (1			-	
	here \bigsize and enter 1% of Part I, line 27b	v, che	CK	1	1			+-	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organic	izatior	ns enter 4% of						
_	Part I, line 12, col (b)		10 011101 470 01	J				~	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	s only	Others enter -0-)		2		o		
3	Add lines 1 and 2		,		3		0		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)								
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-								
6	Credits/Payments ⁻				~				
а	2014 estimated tax payments and 2013 overpayment credited to 2014	6a]		-		
b	Exempt foreign organizations—tax withheld at source	6b							
С	Tax paid with application for extension of time to file (Form 8868)	6c			.	,	•		
_d	Backup withholding erroneously withheld	6d				-		ļ	
7	Total credits and payments Add lines 6a through 6d				7		0		
8 9	Enter any penalty for underpayment of estimated tax. Check here								
10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10								
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded 10							1	
Part \			7.0.0.000		<u> </u>		0	1	
1a	During the tax year, did the foundation attempt to influence any national, si	tate. c	or local legislation of	r dıd	ıt		Yes	No	
	participate or intervene in any political campaign?	,				1a	-	Х	
b	Did it spend more than \$100 during the year (either directly or indirectly) for	r polit	ical purposes (see						
	Instructions for the definition)?	·				1b		Х	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activi	ties a	nd copies of any m	ateria	als				
	published or distributed by the foundation in connection with the activities								
С	Did the foundation file Form 1120-POL for this year?					1c		X	
d	Enter the amount (if any) of tax on political expenditures (section 4955) im		- •				1		
	(1) On the foundation \blacktriangleright \$ (2) On foundation mai						' ^a		
е	Enter the reimbursement (if any) paid by the foundation during the year for on foundation managers ► \$	politi	cal expenditure tax	ımpo	sed	ļ			
2	on foundation managers \$	rono	stad to the IDCO						
_	If "Yes," attach a detailed description of the activities	rrepo	ited to the ins			2	<u> </u>	X	
3	Has the foundation made any changes, not previously reported to the IRS, in its g	overni	na instrument article						
•	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conform		-	3		3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or mo		• •			4a	 	T X	
b								†	
5	Was there a liquidation, termination, dissolution, or substantial contraction	during	g the year?			4b 5	N/A	X	
	If "Yes," attach the statement required by General Instruction T								
6	Are the requirements of section 508(e) (relating to sections 4941 through 4	1945)	satisfied either						
	 By language in the governing instrument, or 					., ا	,;'`		
	By state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so to the state legislation that effectively amends the governing instrument so the state legislation that effectively amends the governing instrument so the state legislation that effectively amends the state legislation that effective	hat no	o mandatory directi	ons tl	hat				
_	conflict with the state law remain in the governing instrument?					6	X	↓	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co			art XV		7	X_	ļ	
8a	Enter the states to which the foundation reports or with which it is registered LA	a (se	e instructions)	-					
h	If the answer is "Yes" to line 7, has the foundation furnished a conv of Form	n 000	DE to the Atterney	Con.					

(or designate) of each state as required by General Instruction G? If "No," attach explanation

"Yes," complete Part XIV

names and addresses

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

8b

9

10

Part '	At any time during the year, did the foundation, directly or indirectly, own a controlled entity with meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)					
11	meaning of section 512(b)(13)2 If "Ves." attach schedule (see instructions)	ın the				
	hearing of section of 2(5)(10). If Tes, attach schedule (see instructions).			11		Х
	Did the foundation make a distribution to a donor advised fund over which the foundation or a d	ısqualıfied				
	person had advisory privileges? If "Yes," attach statement (see instructions)			12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption a	pplication?		13	X	
	Website address ► www.redknightsla.com			·		
	***************************************	ne no 🕨	(504) 34	7-044	1	
		ZIP+4 ▶	70058			.
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Chec	k here	1			▶ [
	and enter the amount of tax-exempt interest received or accrued during the year	> [15		т	
	At any time during calendar year 2014, did the foundation have an interest in or a signature or o	other author	ority	1	Yes	No
	over a bank, securities, or other financial account in a foreign country?			16	L.,	_ X_
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F	- 90-22 1)	IT			
Part	"Yes," enter the name of the foreign country Statements Regarding Activities for Which Form 4730 May Be Require			<u> </u>		L
		ea		 	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			1 /	***	INO
	During the year did the foundation (either directly or indirectly)	П.,	[27] A.	2741		٠
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	∐ Yes	⊠ No	, 1	\$ T 1	
	disqualified person?	☐ Yes	X No	1	1 3 mgm	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	☐ Yes	=	, , , ,~	355.	'
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	☐ Yes	=	ł	. ,	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		٠ ب			
	the benefit or use of a disqualified person)?	☐ Yes	X No	1	*,	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			1	``	
	foundation agreed to make a grant to or to employ the official for a period after			٠.	1	
	termination of government service, if terminating within 90 days)	☐ Yes	X No	14.	1 1	
	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions descr					
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instru	uctions)?		1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here		▶□			
	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted	d acts, tha	t			
	were not corrected before the first day of the tax year beginning in 2014?			1c	 	X
	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was	s a private	•		78.5	

At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and Yes X No 6e, Part XIII) for tax year(s) beginning before 2014? If "Yes," list the years 20____, 20____, 20_____, 20____ b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions) 2b c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here **▶** 20 ____, 20 ____, 20 ____, 20 ____ Did the foundation hold more than a 2% direct or indirect interest in any business enterprise Yes X No at any time during the year? b If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or

disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014)

Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014? 3b l N/A

4a

4b

N/A

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	つ 1	1463	120	`

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Part	VII-B Statements Regarding Activities	tor wr	nich Form 4	1/20 N	iay be Ke	quirec	(contin	uea)			
5a	During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to in			section	4945(e))?		Yes	ΧΝο			, ,
	(2) Influence the outcome of any specific public eledirectly or indirectly, any voter registration drive		ee section 49	955), or	to carry on,		☐ Yes	X No		-, * q	,
	(3) Provide a grant to an individual for travel, study,		er sımılar pur	oses?			Yes	X No		٠,	'
	(4) Provide a grant to an organization other than a section 4945(d)(4)(A)? (see instructions)	charitat	ole, etc , orga	nızatıor	n described	ın	☐ Yes	X No			1
	(5) Provide for any purpose other than religious, ch purposes, or for the prevention of cruelty to child	aritable dren or	e, scientific, lit animals?	erary, o	r education	al	Yes	∑ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the tr	ransacti				eptions	describe	d in			
	Regulations section 53 4945 or in a current notice r	regardır	ng disaster as	sistanc	e (see instr	uctions))?		5b	N/A	
С	Organizations relying on a current notice regarding If the answer is "Yes" to question 5a(4), does the forbecause it maintained expenditure responsibility for	oundatio	on claim exen				☐ Yes	▶ □□ No			
	If "Yes," attach the statement required by Regulation	ns sect	tion 53 4945–	5(d)							
6a	Did the foundation, during the year, receive any fun on a personal benefit contract?				ay premiur	ns	☐ Yes	⊠ No			j
b	Did the foundation, during the year, pay premiums,	directly or indirectly, on a pe			ersonal ben	efit con	tract?		6b		X
	If "Yes" to 6b, file Form 8870										
7a	At any time during the tax year, was the foundation a pa If "Yes," did the foundation receive any proceeds of					o transc	Yes	X No	7b	N/A	J
b Part	VIII Information About Officers, Director							aid Em			
· are	and Contractors	,				, ,			J J -	,	
1	List all officers, directors, trustees, foundation r	nanage	ers and their	compe	nsation (se	e instr	uctions)				
	(a) Name and address	houi	e, and average rs per week ed to position	(If n	mpensation ot paid, ter -0-)	emplo	Contribution yee benefit erred compe	plans	(e) Expe	ense ac allowan	
See A	ttached Statement										
			00		. 0	-					
			00		0						
			00		0						
			00					,			
2	Compensation of five highest-paid employees (othor th	00	cluded	on line 1	egg ins	truction	s) If no	a en	er -	
2	"NONE."	ouiei u	ian those m	ciuucu		300 1113	, a do a di di	3). 11 1101	10, 011		
	(a) Name and address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	/eek	(c) Compensation		(d) Contributions to employee benefit plans and deferred compensation		(e) Expense account other allowances		
NON											
							·				
							11				
							-				
Total	number of other employees paid over \$50,000		L		L		L	•			

Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	iployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
-		
		
		
	number of others receiving over \$50,000 for professional services	
Total	number of others receiving over \$50,000 for professional services	
Pa	t IX-A Summary of Direct Charitable Activities	
List	the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
	Marrero Estelle FD #84	
٠.	Mariero Estelle i D #04	
•		600
2	Daniel Wedge IV Benefit Fundraiser	
		070
٠.	Manualla Sabaal Fastor Bida	370
3	Magnolia School Easter Ride	
•		325
4	Westwego Jr Fire Dept	
·		
	A NOTICE OF THE PROPERTY OF TH	150
	rt IX-B Summary of Program-Related Investments (see instructions) scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
	None	
		· · · · · · · · · · · · · · · · · · ·
2		
All	other program-related investments. See instructions	
3		
Tota	Add lines 1 through 3	0

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<u>Part</u>	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundation	ns,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	=
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part .			
	foundations and certain foreign organizations check here and do not complete this part		
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2014 from Part VI, line 5		
b	Income tax for 2014 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	i _ l	_
	line 1	7	0
Part	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	Ž	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1,705
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	1,705
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions) .	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,705
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating will	nether the found	dation
	qualifies for the section 4940(e) reduction of tax in those years		

	Ann on a street moonie		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from line 7	Part XI,	Corpus	Years pnor to 2013	2013	2014
2	Undistributed income, if any, as of the	end of 2014				
а	Enter amount for 2013 only				0	
b	•	20, 20			- - -	
3	Excess distributions carryover, if an					
a	From 2009					
b	From 2010				N.	
c	From 2011					
d	From 2012 .	1,120				
e	From 2013 .	1,800				
f	Total of lines 3a through e	1,000	2,920			
4	Qualifying distributions for 2014 fro	m Part XII	2,020	· · · · · · · · · · · · · · · · · · ·		
•	line 4 ► \$ 1,705	in rait XII,				
а	Applied to 2013, but not more than	line 2a				
	Applied to 2013, but not more than Applied to undistributed income of	r				
D	(Election required—see instructions					
С	Treated as distributions out of corp	· _				
C	required—see instructions)	us (Election				
d	Applied to 2014 distributable amou	n+		······································		· · · · · · · · · · · · · · · · · · ·
	Remaining amount distributed out of		1,705	 		
5	Excess distributions carryover appl		1,705			
5	(If an amount appears in column (d					
	amount must be shown in column (
6	Enter the net total of each column as indicated below:					
0						
_	Corpus Add lines 3f, 4c, and 4e S	4,625				
a b	Prior years' undistributed income \$		4,023	· · · · · · · · · · · · · · · · · · ·		
IJ	line 4b from line 2b	Subtract	i	0		
С	Enter the amount of prior years' un	distributed			· · · · · · · · · · · · · · · · · · ·	7 ·
·	income for which a notice of deficie	1				
	been issued, or on which the section	-				
	tax has been previously assessed	11 4342(a)				
d	Subtract line 6c from line 6b Taxab	امار		····		
u	amount—see instructions					
е	Undistributed income for 2013 Sub	tract line				· ·
•	4a from line 2a Taxable amount—					
	instructions				0	
f	Undistributed income for 2014 Sub	ntract lines			· · · · · · · · · · · · · · · · · ·	
•	4d and 5 from line 1 This amount i					
	distributed in 2015	mast be				
7	Amounts treated as distributions or	it of corpus				<u> </u>
•	to satisfy requirements imposed by	. 1				
	170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions) B Excess distributions carryover from 2009 not					
8						
•	applied on line 5 or line 7 (see insti					
9	Excess distributions carryover to					
J	Subtract lines 7 and 8 from line 6a		4,625			
10	Analysis of line 9	ŀ	7,023			
а	_ `					
a b	Excess from 2011					
C	Excess from 2012	1,120				
-	Excess from 2012					1
d	Excess from 2014	1,800			1	

The form in which applications should be submitted and information and materials they should include

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines

factors

Total

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or contribution status of Amount recipient Name and address (home or business) or substantial contributor a Paid during the year Marrero Estelle FD #84 Charitable 600 Daniel Wedge IV Benefit Fundraiser Charitable 370 Magnolia School Easter Ride Charitable 325 Westwego Jr Fire Dept Charitable 150 Myrtle C Thibodeaux Elem School Charitable 100 Christmas Baskets Charitable 100 **Girl Scouts** Charitable 60 Total 3a 1,705 Approved for future payment

0

3b

Pа	<u>π</u> ΧVI-	A Analysis of Income-Producing Ac	ctivities				
Ente	er gross	amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	
	D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	_	am service revenue			 	20.040	
		1 Run			03	22,019	
			<u> </u>				
	°. —		-				
	d		-				
	е				ļ		
	f						
	g Fe	es and contracts from government agencies		<u> </u>			
2	Memb	pership dues and assessments			03	3,490	
3	Interes	st on savings and temporary cash investments				3	
4	Divide	ends and interest from securities				-	
5	Net re	ental income or (loss) from real estate				国際の大きな	THE STATE OF THE S
	a Do	ebt-financed property					
		ot debt-financed property					
6		ental income or (loss) from personal property					-
7		investment income					·
8		r (loss) from sales of assets other than inventory					
9		come or (loss) from special events .			 		-
10		profit or (loss) from sales of inventory			†	······	
11		revenue a			 		
••	b			 	<u> </u>		
	° –						
	д —				 		
	<u> </u>		-				
40	6	4-1 Add1: /h\ /d\d /s\	with the same and a second		7 . 3	05.540	
		tal Add columns (b), (d), and (e)	A STATE OF THE STA	0	通知。	25,512	0
		Add line 12, columns (b), (d), and (e)				13	25,512
		heet in line 13 instructions to verify calculations					
	rt XVI-						
	e No. ▼	Explain below how each activity for which incon accomplishment of the foundation's exempt pur	ne is reported in co poses (other than	blumn (e) of Part A by providing fund	KVI-A contributed s for such purpose	importantly to the es) (See instruction	ons)
				•		-	
			·				
			•				
		·					·
		 	· · · · · · · · · · · · · · · · · · ·				
							
							
				····			
		· · · · · · · · · · · · · · · · · · ·					
			<u>-</u>		·	· · · · · · · · · · · · · · · · · · ·	
							
							
						·	-
							·

Paid

Preparer

Use Only

Firm's name > Uzee, Butler, Arceneaux &

Firm's address ▶ 2067 Paxton Street, Harvey, LA 70058

orm 99	0-PF			ouisiana 1 Jefferson, Inc			72-1483		Pa	ge 13
P <u>art</u>	XVI	Information	Regarding Trans	fers To and Transaction	s and Re	lationships Wi	th Noncharita	able		
	_		ganizations							
1				gage in any of the following					Yes	No
			e Code (other than se	ection 501(c)(3) organizations	s) or in sect	ion 527, relating to	political			
	_	anizations?								l
а			porting foundation to a	ı noncharıtable exempt orgar	nzation of		-			
		Cash	•				L	1a(1)		Х
		Other assets					L	1a(2)		X
b		er transactions					-			
			a noncharitable exem	. •			<u>[</u>	1b(1)		Х
				le exempt organization			Ľ	1b(2)		X
			equipment, or other a	assets			Ľ	1b(3)		X
		Reimbursement ai	•				<u>[</u>	1b(4)		X
		Loans or loan gua						1b(5)		X
				or fundraising solicitations			Ļ	1b(6)		X
С				s, other assets, or paid emplo			L	1c		X
d				plete the following schedule. C						
	valu valu	e of the goods, other e in any transaction	er assets, or services gi i or sharing arrangemer	ven by the reporting foundation it, show in column (d) the value	i. If the foun e of the good	dation received less ds, other assets, or	s than fair market services received	t d		
a) Line	no	(b) Amount involved	(c) Name of nonch	naritable exempt organization	(d) Desc	enption of transfers, tran	sactions, and sharir	ng arran	ngemen	ıts
_		· -								
					ļ	,				
					ļ					
		 			ļ					
			ļ							
										
					ļ					
			· · · · · · · · · · · · · · · · · · ·		-					
2a	ls th	ne foundation direc	L ctly or indirectly affiliat	ed with, or related to, one or	more tax-e	xempt organizatio	ns			
			` '	ner than section 501(c)(3)) or	in section	527?		Yes	X N	lo
b	11 T	(a) Name of organ	following schedule	(b) Type of organization	т	(a) D-	scription of relations	ehir.		
		(a) Name of organ	iizatori	(b) Type of organization		(6) De	scription of relations	silib		
			· · · · · · · · · · · · · · · · · · ·		1					
					+	, , , , , , , , , , , , , , , , , , , ,				
				um, including accompanying schedules and			and belief, it is true,			
Sign	con	rect, and complete Declarat	on of preparer (other than taxpay	er) is based on all information of which prepare	arer has any knov	wledge	May the IRS	discuss	this retu	ırn
lere		yrround!	auron-Al	, 16-1-15 <u>1</u> 4	70 C DY	KORL	with the prep	arer sho	wn belo	<u>~</u>
.0.0		gnature of officer or trus	stee	Date Title			(see instructi	ions)? []	X Yes	N
) _ ! -!		Print/Type preparer	s name	Preparer's Anature	<u>n – </u>	Date	Check I if P	TIN		
Paid		James L Butler		I KAHATUN	H	5/25/2015		0128	7460	

Bowes, CPAs

62-1369398

504-347-0441

Firm's EIN

Phone no

886°8

(Rev January 2014)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.
Information about Form 8868 and its instructions is at www.irs.gov/form8868.

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box • If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Type or Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Red Knights Motorcycle Club Louisiana 1 Jefferson, Inc. print 72-1483139 Number, street, and room or suite no. If a PO box, see instructions Social security number (SSN) File by the due date for 1312 Lecompte Drive filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions Westwego, LA 70094 Enter the Return code for the return that this application is for (file a separate application for each return) 04 **Application** Application Return Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 06 12 The books are in the care of James Butler, CPA Telephone No ► (504) 347-0441 Fax No ▶ If the organization does not have an office or place of business in the United States, check this box • If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is If it is for part of the group, check this box for the whole group, check this box and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , to file the exempt organization return for the organization named above. The extension 8/15/2015 is for the organization's return for ► X calendar year 2014 or tax year beginning , and ending 2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Change in accounting period

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using

If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit

EFTPS (Electronic Federal Tax Payment System) See instructions

nonrefundable credits See instructions

0

0

0

3a

3b

Part I, Line 11 (990-PF) - Other Income

		24,716		0
		Revenue		
		and Expenses	Net Investment	Adjusted
	Description	per Books	Income	Net Income
1	Auction	865	0	
2	Dues	3,490	0	
3	50/50	1,346	0	
4	Miscellaneous		0	
_ 5	Pins	400	0	
6	Patches	82	0	
7	Flags/Hats	52	0	
8	Registration	2,746	0	
9	Sponsors	4,000	0	
_10	T-Shirts	910	Ö	
11	Raffle	8,136	0	
12	Vendors	950	0	
13	Decals/Emblams	269	0	
14	Parade of prizes	400	0	
15	Additional card pull	630	0	
16	Dixie	440	0	

Part I, Line 23 (990-PF) - Other Expenses

	Line 23 (990-11) - Other Expens	22,148	Ó) (
Ĭ		Revenue and Expenses	Net Investment	Adjusted Net	Disbursements for Charitable
	Description	per Books	Income	Income	Purposes
1	911 Expense	8,576			
2	Appreciation	283			
3	Awards/Prizes	1,986			
4	Bank fees	20			
5	Calling post	450			
6	Club expense	812			
7	Dues	941			
8	Insurance/Permits	621			
9	T-Shirts	3,425			
10	Miscellaneous	370			
11	Pins	450			
12	Patches	225			
13	Storage	600			
14	Raffle	1,800			
15	Dixie	1,537			
16	Flags/Hats	52			

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

L	Name	Check "X" if Business	Street	Q <u>F</u>	State	Zip Code	Foreign Country	<u></u>	Avg Hrs Per Week	Compensation	Benefits	Expense-	- I
`	Steven Guillot		1312 Lecompte		5	70094		President	1.00				
	Joseph Peterson		725 Dr Gorman Drive	Belle Chasse	4	70037		Vice President	1 00				1 .
1	Shelley Peterson		725 Dr. Gorman Drive	Belle Chasse	5	70037		Secretary	100				
<u></u>	Susan Leonard		832 First Avenue	Нагчеу	5	70058		Treasurer	1 00				
4	Stephen F Hux		205 Anthony Avenue	Harahan		70123		Rider Captain	1.00				
- Co						_							