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Short Form Return of Organization Exempt From Income Tax

OMB No 1545-1150

2014

Department of the Treasury
Internal Revenue ServiceUnder 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.

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A For the 2014 calendar year, or tax year beginning 7/01 , 2014, and ending 6/30 , 2015			
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 type="checkbox"/> Application pending		C Knights of Columbus Colorado St Council 2560 Lumberjack Drive Colorado Springs, CO 80924	
		D Employer identification number 23-7004728	E Telephone number
		F Group Exemption Number ► 0188	
G Accounting Method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual Other (specify) ► _____		H Check ► <input checked="" type="checkbox"/> if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).	
I Website: ► N/A			
J Tax-exempt status (check only one) – <input type="checkbox"/> 501(c)(3) <input checked="" type="checkbox"/> 501(c) (8) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
K Form of organization. <input 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		► \$ 145,062.	
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	143,834.
	2 Program service revenue including government fees and contracts	2	
	3 Membership dues and assessments	3	
	4 Investment income	4	
	5a Gross amount from sale of assets other than inventory	5a	
	b Less: cost or other basis and sales expenses	5b	
	c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5c	
	6 Gaming and fundraising events	6a	
	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 line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)	6b	
	c Less: direct expenses from gaming and fundraising events	6c	
	d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	
	7a Gross sales of inventory, less returns and allowances	7a	
	b Less: cost of goods sold	7b	
	c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a)	7c	
	8 Other revenue (describe in Schedule O)	8	1,228.
	9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	9	145,062.
	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		
15 Printing, publications, postage, and shipping	15		
16 Other expenses (describe in Schedule O)	16	127,241.	
17 Total expenses. Add lines 10 through 16	17	127,241.	
18 Excess or (deficit) for the year (Subtract line 17 from line 9)	18	17,821.	
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	36,898.	
20 Other changes in net assets or fund balances (explain in Schedule O)	20		
21 Net assets or fund balances at end of year. Combine lines 18 through 20	21	54,719.	

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

Form 990-EZ (2014)

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 I.

X

Check if the organization used Schedule O to respond to any question in this part.			
		(A) Beginning of year	(B) End of year
22	Cash, savings, and investments	35,430	50,104
23	Land and buildings	22	23
24	Other assets (describe in Schedule O)	1,468	4,615
25	Total assets	36,898	54,719
26	Total liabilities (describe in Schedule O)	0	0
27	Net assets or fund balances (line 27 of column (B) must agree with line 21)	36,898	54,719

Part II 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.

Expenses
(Required for section 501
(c)(3) and 501(c)(4)
organizations; optional
for others)

What is the organization's primary exempt purpose? See Schedule O

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.

28 See Schedule O

(Grants § _____) If this amount includes foreign grants, check here **28a** 1,628.

29

(Grants \$) If this amount includes foreign grants, check here ▶ **29a**

30. If this amount includes foreign grants, check here 200

If this amount includes foreign grants, check here 30 a

31 Other program services (describe in Schedule O) if this amount includes foreign grants, check here 30a

31 Other program services (describe in Schedule C) If this amount includes foreign grants, check here ▶ 31.a

Part IV List of Officers, Directors, Trustees, and Key Employees (list each one even if not compensated – see the instructions for Part IV)

Part V. Other Information (Note the Schedule A and personal benefit contract statement requirements in See Schedule O the instructions for Part V) Check if the organization used Schedule O to respond to any question in this Part V

	Yes	No
33 Did the organization engage in any significant activity not previously reported to the IRS? If 'Yes,' provide a detailed description of each activity in Schedule O	33	X
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	X
35 a 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)?	35 a	X
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	35 b	
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	35 c	X
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	X
37 a Enter amount of political expenditures, direct or indirect, as described in the instructions ► 37 a 0.	37 b	X
b Did the organization file Form 1120-POL for this year?	38 a	
38 a 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?	38 b	N/A
b If 'Yes,' complete Schedule L, Part II and enter the total amount involved	39 a	N/A
39 Section 501(c)(7) organizations Enter:	39 b	N/A
a Initiation fees and capital contributions included on line 9		
b Gross receipts, included on line 9, for public use of club facilities		
40 a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under section 4911 ► N/A ; section 4912 ► N/A ; section 4955 ► N/A	40 b	
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		
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 ► 0.		
d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization. ► 0.		
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	40 e	X
41 List the states with which a copy of this return is filed ► None		

	Yes	No
42 a The organization's books are in care of ► Jay Doherty Located at ► 2560 Lumberjack Drive Colorado Springs CO	Telephone no ► (719) 265-1958 ZIP + 4 ► 80924	
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. ►	42 b	X

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 the U.S.? If 'Yes,' enter the name of the foreign country: ►	42 c	X
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	Yes	No
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		
44 a Did the organization maintain any donor advised funds during the year? If 'Yes,' Form 990 must be completed instead of Form 990-EZ	44 a	X
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	44 b	X
c Did the organization receive any payments for indoor tanning services during the year?	44 c	X
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	44 d	
45 a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45 a	X
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)	45 b	X

SCHEDULE O
(Form 990 or 990-EZ)Department of the Treasury
Internal Revenue Service**Supplemental Information to Form 990 or 990-EZ**Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ

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

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Name of the organization

Knights of Columbus Colorado St Council

Employer identification number

23-7004728**Form 990-EZ, Part I, Line 8**
Other Revenue

Miscellaneous income	\$ 1,228.
Total	<u>\$ 1,228.</u>

Form 990-EZ, Part I, Line 16
Other Expenses

Advertising and Promotion	\$ 200.
Audit fees	1,750.
Conferences, Conventions, and Meetings	73,023.
Dues and donations	1,587.
Insurance	693.
Miscellaneous	678.
Office Expenses	7,240.
Program expenses	1,628.
State deputy account	908.
State membership	8,817.
State officer allocations	2,225.
State programs	13,122.
Stationery and supplies	6,769.
Supreme convention	7,475.
Telephone and postage	1,126.
Total	<u>\$ 127,241.</u>

Form 990-EZ, Part II, Line 24
Other Assets

	Beginning	Ending
Accounts Receivable	\$ 1,468.	\$ 4,615.
Total	<u>\$ 1,468.</u>	<u>\$ 4,615.</u>

Form 990-EZ, Part III - Organization's Primary Exempt Purpose

The primary function of the State Council is to ensure that local level Knights of Columbus organizations are following the established bylaws and guidelines of the Colorado State Council and Supreme Council.

Form 990-EZ, Part III, Line 28 - Statement of Program Service Accomplishments

The primary function of the State Council is to ensure that local level Knights of Columbus organizations are following the established bylaws and guidelines of the Colorado State Council and Supreme Council.

Name of the organization

Knights of Columbus Colorado St Council

Employer identification number

23-7004728

Form 990-EZ, Part V - Regarding Transfers Associated with Personal Benefit Contracts

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? No