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Form **990-EZ**

Short Form **Return of Organization Exempt From Income Tax**

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

2014

OMB No. 1545-1150

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-EZ and its instructions is at www.irs.gov/form990. A For the 2014 calendar year, or tax year beginning JULY 1 , 2014, and ending JUNE ,20 15 C Name of organization B Check if applicable: D Employer identification number Address change KNIGHTS OF COLUMBUS 656 23-7089341 E Telephone number Name change Number and street (or P O box, if mail is not delivered to street address) Room/suite Initial return 1631 FOXFIRE LANE PO BOX 2029 765-450-8906 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code F Group Exemption Amended return KOKOMO, IN 46902 Number ▶ Application pending X Accrual Other (specify) G Accounting Method: Cash H Check ▶ ☐ if the organization is not l₂ළWebsite: ▶ required to attach Schedule B J_Tax-exempt status (check only one) — ☐ 501(c)(3) 🗵 501(c) (8) ◀ (insert no.) ☐ 4947(a)(1) or (Form 990, 990-EZ, or 990-PF). K Form of organization: X Corporation ☐ Trust ☐ Association 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 173,130.00 Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Part I Check if the organization used Schedule O to respond to any question in this Part I. Contributions, gifts, grants, and similar amounts received 83,200 2 Program service revenue including government fees and contracts 2 52,933 3 3 10,715 4 Investment income 4 5a Gross amount from sale of assets other than inventory b Less: cost or other basis and sales expenses Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) 5c 0.00 6 Gaming and fundraising events Gross income from gaming (attach Schedule G if greater than Revenue 14,541 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) . . . 6b Less: direct expenses from gaming and fundraising events . . . 6¢ 9,740 Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract 3.2 6d 4,801.00 Gross sales of inventory, less returns and allowances 7a b C Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) 7c 0.00 Other revenue (describe in Schedule O) 8 8 11,741 9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 9 163,390.00 10 Grants and similar amounts paid (list in Schedule O) . . . $\|\mathcal{C}\|_{H^2}$ 10 53,322 Benefits paid to or for members 11 11 Salaries, other compensation, and employee benefits... 12 12 24,430 13 Professional fees and other payments to independent contractors 13 1,100 14 14 19,659 15 Printing, publications, postage, and shipping 15 3,455 16 16 48,049 17 Total expenses. Add lines 10 through 16 17 150,015.00 Excess or (deficit) for the year (Subtract line 17 from line 9) 18 18 13,375.00 Net Assets Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with 19 19 35,849.00 Other changes in net assets or fund balances (explain in Schedule O) 20 20 Net assets or fund balances at end of year. Combine lines 18 through 20 21 49,224.00 For Paperwork Reduction Act Notice, see the separate instructions. Form **990-EZ** (2014)

Pa	t ll Balance Sheets (see the instructions					
	Check if the organization used Schedule	O to respond to a	ny question in this			
				(A) Beginning of year		(B) End of year
22	Cash, savings, and investments			13,269	-	17,797
23	Land and buildings			20,806		27,505
24	Other assets (describe in Schedule O)			3,000 37,075.00		3,000
25	Total assets		, , , , , , , , , , , , , , , , , , ,	1,226	-	48,302.00 2,078
26 27	Net assets or fund balances (line 27 of column			35,849.00		46,224.00
Par					21	40,224.00
-	Check if the organization used Schedule	•		•		Expenses
Wha	is the organization's primary exempt purpose?					uired for section
Desc as m	ribe the organization's program service accomplice assured by expenses. In a clear and concise mons benefited, and other relevant information for each	shments for each o	f its three largest p			(c)(3) and 501(c)(4) inizations; optional for irs.)
28	PROMOTE SOCIAL AND INTELLECTUAL F					
	656 MAINTAIN A LOCAL CHAPTER HALL					
	2014/2015 HOSTED THE ANNUAL STATE	·····		NIGHTS.		
		includes foreign gra		· · · > 📙	28 a	1
29	PROVIDE CHARITABLE EFFORTS AND FU	····				
	THE IDEALS OF CHARITY, UNITY, FRA			THE KNIGHTS		
	PROVIDE SUPPORT TO THE LOCAL CATHO (Grants S) If this amount	includes foreign gra			20-	
30					29 a	
30						
				•••		
	(Grants \$) If this amount	includes foreign gra	ints, check here	▶ □	30a	,
31	Other program services (describe in Schedule O)					
		includes foreign gra			31a	,]
32	Total program service expenses (add lines 28a	through 31a)		>	32	<u> </u>
Par					nstru	ctions for Part IV)
	Check if the organization used Schedule	O to respond to a			<u> </u>	<u></u> . 🛚
	(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC (if not paid, enter -0-)		```	Estimated amount of ther compensation
BRA	OLEY WILLIS					
GRA	ND KNIGHT	10	1,200)	0	0
JOS:	PH ANDERSON	.]				
	JTY GRAND KNIGHT	5	()	이	0
	AAEL MOORE				_ ا	
	ANCIAL SECRETARY	5)	<u> </u>	0
	/EN WATSON NCELLOR	5		,	اہ	0
	GORY CLARK		(' 	<u> </u>	0
	DRDER	5			0	0
	AS SHANLEY	ļ <u> </u>		<u>'</u>	-	
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WAY	NE ABNEY				\top	
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WIL	JIAM GRAVES]				
TRU	STEE	5			0	0
	·		I	1	- 1	

Part				
-	instructions for Part V) Check if the organization used Schedule O to respond to any question in this	Part		
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a		Yes	No
	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
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		х
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		<u> </u>
С	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		х
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		х
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a 0			
b	Did the organization file Form 1120-POL for this year?	37b		Х
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		X
b	If "Yes," complete Schedule L, Part II and enter the total amount involved			
39	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on line 9	_		
40a	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 ►			
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	40b		
С	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			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	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	40e		X
41	List the states with which a copy of this return is filed ► INDIANA			
42a	The organization's books are in care of ► MICHAEL MOORE Telephone no. ► 765	-450-	-890	6
	Located at ► 1631 FOXFIRE LANE KOKOMO IN ZIP + 4 ► 469	02		
b	At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Yes	No
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b		Х
	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).			
С	At any time during the calendar year, did the organization maintain an office outside the U.S.?	42c		Х
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		. •	
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	Yes	No 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	44b		X
С	Did the organization receive any payments for indoor tanning services during the year?	44c	 	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	44d		Λ
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		X
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the	700		17
	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		X

true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Preparer's signature

Matthew L

SUITE A KOKOMO IN 46902

GRAND KNIGHT

WILLIS,

Firm's address ▶ 4101 S DIXON RD,

► SALE & COMPANY

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

Type or print name and title

Print/Type preparer's name

MATTHEW G SALE

Fırm's name

Sign

Here

Paid

Preparer

Use Only

Date

Date

05/09/16

SCHEDULE O (Form 990 or 990-EZ)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► 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.

Open to Public Inspection

Name of the organization			Employer Identification r	number
KNIGHTS OF COLUMBUS 656		23-7089341		
PART I OTHER REVENUE RENTAL INC	COME 11,741			
				
LINE 10 GRANTS & SIMILAR AMOUNTS	PAID			
ST JOAN OF ARC & ST PAT SCHOOL	24,000	GIBAULT SCHOOL	·····	9,410
ST JOAN OF ARC CHURCH	5,600	SEMINARY SCHOOL SO	CHOLARSHIPS	4,000
ST PATRICK CHURCH	3,784	SUPPORT OUR SEMINA	ARIANS	888
CULTURE OF LIFE	507	CHAD GRUBE DONATIO	ON FOR CANCER	1,871
INDIANA RIGHT TO LIFE, KOKOMO URB	AN OUTREACH,	THE CROSSING, BONA V	/ISTA, WE CARE	, &
UNITED WAY ALL \$500 TOTAL OF	3,000	MISCELLANEOUS		762
TOTAL 53,822			,	
·····			·	
LINE 15 OTHER EXPENSES			·	
ADVERTISING 1,496		•••		
BANK FEES 351				
DUES/SUBS/LICENSES 4,631				
OFFICE SUPPLIES 477				
MISC SUPPLIES 352	••••			
CONVENTION EXP 510	•••••	·		•••••
MEMBER/COUNCIL EXP 10,016				•••••
WEBSITE 314		···		
BAR CGS EXPENSES 22,368	····			
STATE GOLF EXP 7,534				
TOTAL 48,049	•••••			
			•••••	

Schèdule O (Form 990 or 990-EZ) (2014)	Page 2
Name of the organization	Employer Identification number
KNIGHTS OF COLUMBUS 656	23-7089341
PART III	
CATHOLIC GENTLEMAN ORGANIZED TO PROVIDE CHARITABLE FUNDS AND EFFORT	S TO THE COMMUNITY,
ORGANIZED AS A FRATERNAL ORGANIZATION WITH THE IDEAL OF EXEMPLIFYIN	
CHARITY, UNITY, FRATERNITY, AND PATRIOTISM. ALSO, COMMITTED TO THE	
	DEFENSE OF THE
PRIESTHOOD AND THE PRESERVATION AND DEFENSE OF THE FAMILY.	
Dan TV	
PART IV	
PAYMENTS TO THE GRAND KNIGHT OF \$1,200 WERE FOR PAYMENTS WHEN MR. W	ILLIS WAS FINANCIAL
SECRETARY. THE KNIGHTS OF COLUMBUS 656 PAYS THE FINANCIAL SECRETAR	Y \$200 A MONTH FOR
THEIR SERVICES.	
	••••••