

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)

2018

Department of the Treasury
Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990EZ for instructions and the latest information.Open to Public
Inspection

A For the 2018 calendar year, or tax year beginning

July 1

, 2018, and ending

June 30

, 20 19

B Check if applicable

Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization

Knights of Columbus Council 9240

Number and street (or P.O. box, if mail is not delivered to street address)

Post Office Box 8845

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

Mandeville, LA 70470-8845

D Employer identification number

72-1062954

E Telephone number

985-626-7486

F Group Exemption

Number ► 06-0416470

G Accounting Method: Cash Accrual Other (specify) ►

I Website: ► N/A

H Check ► if the organization is not required to attach Schedule B (Form 990, 990-EZ, or 990-PF).J Tax-exempt status (check only one) — 501(c)(3) 501(c) (8) (insert no) 4947(a)(1) or 527K Form of organization: Corporation Trust Association 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)) are \$500,000 or more, file Form 990 instead of Form 990-EZ.

► \$ 62574

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

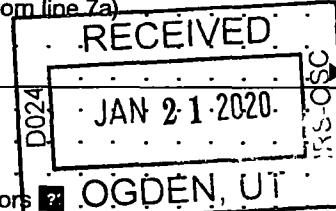
Revenue	1	Contributions, gifts, grants, and similar amounts received	1	2988
	2	Program service revenue including government fees and contracts	2	0
	3	Membership dues and assessments	3	6657
	4	Investment income	4	82
	5a	Gross amount from sale of assets other than inventory	5a	0
	b	Less: cost or other basis and sales expenses	5b	0
	c	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a)		
	6	Gaming and fundraising events:	5c	0
	a	Gross income from gaming (attach Schedule G if greater than \$15,000)	6a	0
	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	52847
	c	Less: direct expenses from gaming and fundraising events	6c	19441
	d	Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c)	6d	33406
	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)		
	8	Other revenue (describe in Schedule O)		
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8		
Expenses	10	Grants and similar amounts paid (list in Schedule O)		
	11	Benefits paid to or for members		
	12	Salaries, other compensation, and employee benefits		
	13	Professional fees and other payments to independent contractors		
	14	Occupancy, rent, utilities, and maintenance		
	15	Printing, publications, postage, and shipping		
	16	Other expenses (describe in Schedule O)		
	17	Total expenses. Add lines 10 through 16		
Net Assets	18	Excess or (deficit) for the year (Subtract line 17 from line 9)		
	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)		
	20	Other changes in net assets or fund balances (explain in Schedule O)		
	21	Net assets or fund balances at end of year. Combine lines 18 through 20		

For Paperwork Reduction Act Notice, see the separate instructions.

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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	28780	22	34494
23 Land and buildings	0	23	0
24 Other assets (describe in Schedule O)	0	24	0
25 Total assets	28780	25	34494
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)	28780	27	34494

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? **Subsidiary Unit of Catholic Mens Fraternal Service Org**

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	Our Lady of the Lake Church and School, Pastoral Support, Youth Programs and Activities, Scouting, Youth Awards, Needs of Parishioners, and Seminarian Assistance	
28	(Grants \$ 7738) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	28a
29	Pro-Life Activities, Catholic Support Programs, Community Outreach Programs, Disaster Relief, and Military Support	
29	(Grants \$ 8615) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	29a
30	Council 9240 Annual Childrens Shopping Spree for Local Underprivileged Families. Council provides funds for families to purchase Christmas presents. Names are provided by OLL Parish Office, Samaratin Center, Food Bank, and St. Vincent DePaul Society.	
30	(Grants \$ 10035) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	30a
31	Other program services (describe in Schedule O)	
31	(Grants \$ 0) If this amount includes foreign grants, check here . . . ► <input type="checkbox"/>	31a
32	Total program service expenses (add lines 28a through 31a)	32 26388

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 O 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 0

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 0

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

a Initiation fees and capital contributions included on line 9 39b

b Gross receipts, included on line 9, for public use of club facilities 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), 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

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 40b

d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization 40c

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 40e

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

42a The organization's books are in care of ► Telephone no. ► Located at ► ZIP + 4 ► 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 ► 42c

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 United States? If "Yes," enter the name of the foreign country ► 42c

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

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	✓	?
34	✓	?
35a	✓	?
35b	✓	?
35c	✓	?
36	✓	?
37a	0	?
37b	✓	?
38a	✓	?
38b	0	?
39a	?	?
39b	?	?
40b	?	?
40c	?	?
40e	✓	?
42b	✓	?
42c	✓	?
43	?	?
44a	✓	?
44b	✓	?
44c	?	?
44d	?	?
45a	✓	?
45b	✓	?

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	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 Schedule C, Part II	Yes	No
		47	
48	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	Yes	No
		48	
49a	Did the organization make any transfers to an exempt non-charitable related organization?	Yes	No
b	If "Yes," was the related organization a section 527 organization?	Yes	No
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."	Yes	No
		49a	
		49b	

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

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	Signature of officer	Date
	Steven J. Decker, Financial Secretary	
	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