

Form **990**Department of the Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**  
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 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**Open to Public  
Inspection**A** For the 2016 calendar year, or tax year beginning **JUL 1, 2016** and ending **JUN 30, 2017**

<b>B</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	<b>C</b> Name of organization <b>CATHOLIC COMMUNITY FOUNDATION OF MINNESOTA</b>		<b>D</b> Employer identification number  <b>41-1744184</b>
	Doing business as		<b>E</b> Telephone number  <b>651-389-0300</b>
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	<b>2610 UNIVERSITY AVENUE WEST</b>		<b>500</b>
	City or town, state or province, country, and ZIP or foreign postal code <b>ST. PAUL, MN 55114</b>		
<b>F</b> Name and address of principal officer: <b>ANNE CULLEN MILLER</b> <b>SAME AS C ABOVE</b>			
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: <b>WWW.CCF-MN.ORG</b>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			<b>L</b> Year of formation: <b>1992</b>
			<b>M</b> State of legal domicile: <b>MN</b>

**Part I Summary**

<b>Activities &amp; Governance</b>	<b>1</b> Briefly describe the organization's mission or most significant activities: <b>TO SUPPORT FINANCIALLY THE SPIRITUAL, EDUCATIONAL AND SOCIAL NEEDS OF OUR CATHOLIC COMMUNITY.</b>		
	<b>2</b> Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>27</b>
	<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>27</b>
	<b>5</b> Total number of individuals employed in calendar year 2016 (Part V, line 2a)	<b>5</b>	<b>16</b>
	<b>6</b> Total number of volunteers (estimate if necessary)	<b>6</b>	<b>35</b>
	<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>31,792.</b>
<b>b</b> Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>23,050.</b>	
<b>Revenue</b>	<b>8</b> Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b> <b>13,764,026.</b>	<b>Current Year</b> <b>28,372,666.</b>
	<b>9</b> Program service revenue (Part VIII, line 2g)	<b>935,594.</b>	<b>956,611.</b>
	<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>625,425.</b>	<b>4,796,826.</b>
	<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>0.</b>	<b>0.</b>
	<b>12</b> Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>15,325,045.</b>	<b>34,126,103.</b>
	<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>9,124,167.</b>	<b>13,588,217.</b>
	<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	<b>0.</b>	<b>0.</b>
	<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	<b>1,541,349.</b>	<b>1,503,834.</b>
	<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	<b>0.</b>	<b>0.</b>
	<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>1,015,008.</b>		
	<b>17</b> Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	<b>978,245.</b>	<b>1,054,983.</b>
	<b>18</b> Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>11,643,761.</b>	<b>16,147,034.</b>
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	<b>3,681,284.</b>	<b>17,979,069.</b>	
<b>Net Assets or Fund Balances</b>	<b>20</b> Total assets (Part X, line 16)	<b>Beginning of Current Year</b> <b>272,570,395.</b>	<b>End of Year</b> <b>318,345,733.</b>
	<b>21</b> Total liabilities (Part X, line 26)	<b>153,741,077.</b>	<b>174,870,602.</b>
	<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	<b>118,829,318.</b>	<b>143,475,131.</b>

**Part II Signature Block**

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.

<b>Sign Here</b>	Signature of officer		Date		
	<b>ANNE CULLEN MILLER, PRESIDENT</b>				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	<b>KAREN GRIES</b>	<i>Karen Gries</i>	<b>12/8/2017</b>	<input type="checkbox"/>	<b>P00078514</b>
	Firm's name ▶ <b>CLIFTONLARSONALLEN LLP</b>	Firm's EIN ▶ <b>41-0746749</b>			
	Firm's address ▶ <b>220 SOUTH SIXTH STREET, SUITE 300 MINNEAPOLIS, MN 55402</b>		Phone no. <b>612-376-4500</b>		

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

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**Part III** Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III ☐

**1** Briefly describe the organization's mission:

THE MISSION OF THE CATHOLIC COMMUNITY FOUNDATION OF MINNESOTA IS TO  
SUPPORT FINANCIALLY THE SPIRITUAL, EDUCATIONAL, AND SOCIAL NEEDS OF  
OUR CATHOLIC COMMUNITY.

**2** Did the organization undertake any significant program services during the year which were not listed on the  
prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.  
Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and  
revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 13,908,258. including grants of \$ 13,588,217.) (Revenue \$ 956,611.)  
THE FOUNDATION INSPIRES CATHOLIC PHILANTHROPY AND INVESTS, MANAGES, AND  
DISTRIBUTES CHARITABLE ASSETS AS GUIDED BY OUR DONORS AND OUR CATHOLIC  
IDENTITY.

THE FOUNDATION FACILITATES PLANNED AND CURRENT GIFTS TO ENDOWMENTS AND  
DONOR ADVISED FUNDS WHICH FINANCIALLY SUPPORT NEEDS IN OUR CATHOLIC  
COMMUNITY. IN THE PAST YEAR, OVER 740 CATHOLIC PARISHES, SCHOOLS AND  
OTHER ORGANIZATIONS BENEFITED FROM NEARLY 2,100 GRANTS FROM THE  
FOUNDATION, TOTALING \$14M.

**4b** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4c** (Code: ) (Expenses \$ including grants of \$ ) (Revenue \$ )

**4d** Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ ) (Revenue \$ )

**4e** Total program service expenses ▶ 13,908,258.

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**Part IV Checklist of Required Schedules**

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<b>X</b>	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ?	<b>X</b>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<b>X</b>
4 <b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>		<b>X</b>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		<b>X</b>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	<b>X</b>	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<b>X</b>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<b>X</b>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>	<b>X</b>	
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	<b>X</b>	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<b>X</b>	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	<b>X</b>	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		<b>X</b>
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		<b>X</b>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<b>X</b>	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<b>X</b>	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<b>X</b>	
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		<b>X</b>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<b>X</b>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<b>X</b>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	<b>X</b>	
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		<b>X</b>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		<b>X</b>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>		<b>X</b>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		<b>X</b>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<b>X</b>

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**Part IV Checklist of Required Schedules** (continued)

	Yes	No
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	<b>X</b>	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		<b>X</b>
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	<b>X</b>	
<b>24a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a		<b>X</b>
<b>b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
<b>c</b> Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
<b>d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
<b>25a</b> <b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I		<b>X</b>
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		<b>X</b>
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		<b>X</b>
<b>28</b> Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
<b>a</b> A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		<b>X</b>
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	<b>X</b>	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		<b>X</b>
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		<b>X</b>
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		<b>X</b>
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		<b>X</b>
<b>34</b> Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	<b>X</b>	
<b>35a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<b>X</b>
<b>b</b> If "Yes" to line 35a, 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," complete Schedule R, Part V, line 2		
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		<b>X</b>
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI		<b>X</b>
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	<b>X</b>	

**Note.** All Form 990 filers are required to complete Schedule O

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**Part V Statements Regarding Other IRS Filings and Tax Compliance**

Check if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
2b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
3b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	X	
4a	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)?		X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
5c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
7a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
7b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
7c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
7d	If "Yes," indicate the number of Forms 8282 filed during the year		8
7e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
7f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
7g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
7h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		X
9	<b>Sponsoring organizations maintaining donor advised funds.</b>		
9a	Did the sponsoring organization make any taxable distributions under section 4966?		X
9b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		X
10	<b>Section 501(c)(7) organizations.</b> Enter:		
10a	Initiation fees and capital contributions included on Part VIII, line 12		
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	<b>Section 501(c)(12) organizations.</b> Enter:		
11a	Gross income from members or shareholders		
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
12a	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?		
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
13	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
13a	Is the organization licensed to issue qualified health plans in more than one state?		
13b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
13c	Enter the amount of reserves on hand		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
14b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		

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**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part VI ☒ X

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b> Enter the number of voting members of the governing body at the end of the tax year	<b>1a</b>	27	
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
<b>b</b> Enter the number of voting members included in line 1a, above, who are independent	<b>1b</b>	27	
<b>2</b> Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	<b>2</b>		X
<b>3</b> Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	<b>3</b>		X
<b>4</b> Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	<b>4</b>		X
<b>5</b> Did the organization become aware during the year of a significant diversion of the organization's assets?	<b>5</b>		X
<b>6</b> Did the organization have members or stockholders?	<b>6</b>		X
<b>7a</b> Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>7a</b>		X
<b>b</b> Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7b</b>		X
<b>8</b> Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
<b>a</b> The governing body?	<b>8a</b>	X	
<b>b</b> Each committee with authority to act on behalf of the governing body?	<b>8b</b>	X	
<b>9</b> Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	<b>9</b>		X

**Section B. Policies** (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
<b>10a</b> Did the organization have local chapters, branches, or affiliates?	<b>10a</b>		X
<b>b</b> If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	<b>10b</b>		
<b>11a</b> Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<b>11a</b>	X	
<b>b</b> Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
<b>12a</b> Did the organization have a written conflict of interest policy? If "No," go to line 13	<b>12a</b>	X	
<b>b</b> Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<b>12b</b>	X	
<b>c</b> Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<b>12c</b>	X	
<b>13</b> Did the organization have a written whistleblower policy?	<b>13</b>	X	
<b>14</b> Did the organization have a written document retention and destruction policy?	<b>14</b>	X	
<b>15</b> Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
<b>a</b> The organization's CEO, Executive Director, or top management official	<b>15a</b>	X	
<b>b</b> Other officers or key employees of the organization	<b>15b</b>		X
If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
<b>16a</b> Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	<b>16a</b>		X
<b>b</b> If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	<b>16b</b>		

**Section C. Disclosure**

**17** List the states with which a copy of this Form 990 is required to be filed **►MN, FL**

**18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
☐ Own website    ☐ Another's website    ☒ Upon request    ☐ Other (explain in Schedule O)

**19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

**20** State the name, address, and telephone number of the person who possesses the organization's books and records: **►**  
**HELEN TWOMEY - (651) 389-0871**  
**2610 UNIVERSITY AVENUE WEST, SUITE 500, ST. PAUL, MN 55114**

**CATHOLIC COMMUNITY FOUNDATION  
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**Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII ☐

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) THOMAS A. LETSCHER VICE CHAIR	2.00	X		X				0.	0.	0.
(2) MARY E. SCHAFFNER SECRETARY	2.00	X		X				0.	0.	0.
(3) JULIE K. HURLEY TREASURER	2.00	X		X				0.	0.	0.
(4) JOSEPHINE BAILEY DIRECTOR	2.00	X						0.	0.	0.
(5) JOHN C. BEUERLEIN DIRECTOR	2.00	X						0.	0.	0.
(6) KATHY COONEY DIRECTOR	2.00	X						0.	0.	0.
(7) THOMAS E. GAINOR DIRECTOR	2.00	X						0.	0.	0.
(8) JULIE GEREND DIRECTOR	2.00	X						0.	0.	0.
(9) DAVID HEINSCH DIRECTOR	2.00	X						0.	0.	0.
(10) ELIZABETH KEYES DIRECTOR	2.00	X						0.	0.	0.
(11) PAUL R. KNAPP, SR. DIRECTOR	2.00	X						0.	0.	0.
(12) EDWARD J. KOCOUREK DIRECTOR	2.00	X						0.	0.	0.
(13) EMERY KOENIG DIRECTOR	2.00	X						0.	0.	0.
(14) REVEREND CHARLES LACHOWITZER DIRECTOR	2.00	X						0.	0.	0.
(15) GEORGE C. LANG DIRECTOR	2.00	X						0.	0.	0.
(16) MIMI DALY LARSON DIRECTOR	2.00	X						0.	0.	0.
(17) ARTHUR LEWIS, JR. DIRECTOR	2.00	X						0.	0.	0.

**CATHOLIC COMMUNITY FOUNDATION  
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**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MARJORIE MATHISON-HANCE DIRECTOR	2.00	X						0.	0.	0.
(19) THOMAS MCCARR DIRECTOR	2.00	X						0.	0.	0.
(20) LARRY MCGOUGH DIRECTOR	2.00	X						0.	0.	0.
(21) GREG MELSEN DIRECTOR	2.00	X						0.	0.	0.
(22) THOMAS MERTENS DIRECTOR	2.00	X						0.	0.	0.
(23) MARIE PILLAI DIRECTOR	2.00	X						0.	0.	0.
(24) SEAN O. REGAN DIRECTOR	2.00	X						0.	0.	0.
(25) HAROLD J. SLAWIK DIRECTOR	2.00	X						0.	0.	0.
(26) DR. MICHAEL F. SULLIVAN DIRECTOR	2.00	X						0.	0.	0.
<b>1b Sub-total</b>								0.	0.	0.
<b>c Total from continuation sheets to Part VII, Section A</b>								549,200.	0.	79,877.
<b>d Total (add lines 1b and 1c)</b>								549,200.	0.	79,877.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **3**

	Yes	No
3 Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

**Section B. Independent Contractors**

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
ARTISAN PARTNERS, 100 PINE STREET, #2950, SAN FRANCISCO, CA 94111	INVESTMENT MANAGER	241,930.
LCG ASSOCIATES, 400 GALLERIA PARKWAY, #1800, ATLANTA, GA 30339	INVESTMENT ADVISOR	136,709.
U.S. BANK INSTITUTIONAL TRUST & CUSTODY 60 LIVINGSTON AVENUE, ST. PAUL, MN 55107	CUSTODIAL FEES	109,803.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **3**

**SEE PART VII, SECTION A CONTINUATION SHEETS**

Form 990 (2016)



**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

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**Part VII** Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) JANE WYATT DIRECTOR	2.00	X						0.	0.	0.
(28) ANNE CULLEN MILLER PRESIDENT	40.00			X				225,664.	0.	54,942.
(29) RICHARD OLSON VP OF DEVELOPMENT & DONOR	40.00			X				159,527.	0.	9,154.
(30) MIKE RICCI DIRECTOR-PROFESSIONAL OUTREACH & INV	40.00			X				41,398.	0.	7,734.
(31) HELEN TWOMEY VP OF FINANCE AND ADMINIST	40.00			X				122,611.	0.	8,047.
Total to Part VII, Section A, line 1c								549,200.		79,877.

**CATHOLIC COMMUNITY FOUNDATION  
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**Part VIII Statement of Revenue**

Check if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1 a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>					
	<b>c</b> Fundraising events	<b>1c</b>					
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>					
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	28,372,666.				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		4,620,142.				
	<b>h Total.</b> Add lines 1a-1f			28,372,666.			
<b>Program Service Revenue</b>	<b>2 a</b> MANAGEMENT FEES	<b>Business Code</b>	541900	956,611.	956,611.		
	<b>b</b>						
	<b>c</b>						
	<b>d</b>						
	<b>e</b>						
	<b>f</b> All other program service revenue						
	<b>g Total.</b> Add lines 2a-2f			956,611.			
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)			1,755,695.		31,792.	1,723,903.
	<b>4</b> Income from investment of tax-exempt bond proceeds						
	<b>5</b> Royalties						
	<b>6 a</b> Gross rents	(i) Real	(ii) Personal				
	<b>b</b> Less: rental expenses						
	<b>c</b> Rental income or (loss)						
	<b>d</b> Net rental income or (loss)						
	<b>7 a</b> Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	<b>b</b> Less: cost or other basis and sales expenses						
	<b>c</b> Gain or (loss)						
	<b>d</b> Net gain or (loss)			3,041,131.			3,041,131.
	<b>8 a</b> Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from fundraising events						
	<b>9 a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>					
	<b>b</b> Less: direct expenses	<b>b</b>					
	<b>c</b> Net income or (loss) from gaming activities						
	<b>10 a</b> Gross sales of inventory, less returns and allowances	<b>a</b>					
	<b>b</b> Less: cost of goods sold	<b>b</b>					
	<b>c</b> Net income or (loss) from sales of inventory						
<b>Miscellaneous Revenue</b>			<b>Business Code</b>				
<b>11 a</b>							
<b>b</b>							
<b>c</b>							
<b>d</b> All other revenue							
<b>e Total.</b> Add lines 11a-11d							
<b>12 Total revenue.</b> See instructions.				34,126,103.	956,611.	31,792.	4,765,034.

**CATHOLIC COMMUNITY FOUNDATION  
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**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX ☐

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>				
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	13,588,217.	13,588,217.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	730,116.	133,963.	316,963.	279,190.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	470,384.	76,529.	162,592.	231,263.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	64,804.	10,472.	24,391.	29,941.
9 Other employee benefits	156,700.	24,789.	58,792.	73,119.
10 Payroll taxes	81,830.	14,142.	32,383.	35,305.
11 Fees for services (non-employees):				
a Management	50,174.		36,276.	13,898.
b Legal	37,659.		37,659.	
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	424,407.		424,407.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	53,209.	9,335.	20,345.	23,529.
12 Advertising and promotion	202,936.			202,936.
13 Office expenses	49,875.	8,786.	19,095.	21,994.
14 Information technology	84,478.	14,881.	32,343.	37,254.
15 Royalties				
16 Occupancy	73,601.	12,965.	28,179.	32,457.
17 Travel	7,029.	1,274.	2,717.	3,038.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	13,419.	2,433.	5,187.	5,799.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	15,303.	2,696.	5,858.	6,749.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DUES & MEMBERSHIPS	27,890.	5,056.	10,781.	12,053.
b MISCELLANEOUS	15,003.	2,720.	5,800.	6,483.
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	16,147,034.	13,908,258.	1,223,768.	1,015,008.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

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**Part X Balance Sheet**

Check if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
<b>Assets</b>	1 Cash - non-interest-bearing .....	608,130.	1	920,144.
	2 Savings and temporary cash investments .....	12,259,734.	2	17,856,754.
	3 Pledges and grants receivable, net .....	1,197,301.	3	1,179,987.
	4 Accounts receivable, net .....		4	
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L .....		6	
	7 Notes and loans receivable, net .....		7	
	8 Inventories for sale or use .....		8	
	9 Prepaid expenses and deferred charges .....	157,633.	9	201,148.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	59,088.		
	b Less: accumulated depreciation .....	45,832.		
	11 Investments - publicly traded securities .....	201,065,671.	11	233,161,141.
	12 Investments - other securities. See Part IV, line 11 .....	52,772,874.	12	61,420,064.
	13 Investments - program-related. See Part IV, line 11 .....		13	
	14 Intangible assets .....		14	
	15 Other assets. See Part IV, line 11 .....	4,480,494.	15	3,593,239.
16 <b>Total assets.</b> Add lines 1 through 15 (must equal line 34) .....	272,570,395.	16	318,345,733.	
<b>Liabilities</b>	17 Accounts payable and accrued expenses .....	500,872.	17	569,258.
	18 Grants payable .....	695,000.	18	615,500.
	19 Deferred revenue .....		19	
	20 Tax-exempt bond liabilities .....		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D .....	116,663,652.	21	131,225,177.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		22	
	23 Secured mortgages and notes payable to unrelated third parties .....		23	
	24 Unsecured notes and loans payable to unrelated third parties .....		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D .....	35,881,553.	25	42,460,667.
	26 <b>Total liabilities.</b> Add lines 17 through 25 .....	153,741,077.	26	174,870,602.
	<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>		
27 Unrestricted net assets .....		32,347,945.	27	38,063,282.
28 Temporarily restricted net assets .....		18,999,117.	28	24,578,692.
29 Permanently restricted net assets .....		67,482,256.	29	80,833,157.
<b>Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
30 Capital stock or trust principal, or current funds .....			30	
31 Paid-in or capital surplus, or land, building, or equipment fund .....			31	
32 Retained earnings, endowment, accumulated income, or other funds .....			32	
33 <b>Total net assets or fund balances</b> .....		118,829,318.	33	143,475,131.
34 <b>Total liabilities and net assets/fund balances</b> .....		272,570,395.	34	318,345,733.

Form 990 (2016)

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Form 990 (2016)

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**Part XI Reconciliation of Net Assets**

Check if Schedule O contains a response or note to any line in this Part XI

☒ X

1	Total revenue (must equal Part VIII, column (A), line 12)	1	34,126,103.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,147,034.
3	Revenue less expenses. Subtract line 2 from line 1	3	17,979,069.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	118,829,318.
5	Net unrealized gains (losses) on investments	5	9,828,872.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-3,162,128.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	143,475,131.

**Part XII Financial Statements and Reporting**

Check if Schedule O contains a response or note to any line in this Part XII

☐

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2a	X
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	2b	X
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	2c	X
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	

Form 990 (2016)

**SCHEDULE A**  
**(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization **CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number  
**41-1744184**

**Part I Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 ☐ A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations \_\_\_\_\_
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
<b>Total</b>						

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**Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....	8,635,893.	14,392,598.	13,882,890.	13,764,026.	28,372,666.	79,048,073.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
3 The value of services or facilities furnished by a governmental unit to the organization without charge .....						
4 <b>Total.</b> Add lines 1 through 3 .....	8,635,893.	14,392,598.	13,882,890.	13,764,026.	28,372,666.	79,048,073.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) .....						18,126,904.
6 <b>Public support.</b> Subtract line 5 from line 4.						60,921,169.

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4 .....	8,635,893.	14,392,598.	13,882,890.	13,764,026.	28,372,666.	79,048,073.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources .....	1,469,359.	1,549,843.	1,442,527.	1,541,354.	1,725,027.	7,728,110.
9 Net income from unrelated business activities, whether or not the business is regularly carried on .....	4,776.		17,389.		21,926.	44,091.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) .....						
11 <b>Total support.</b> Add lines 7 through 10 .....						86,820,274.
12 Gross receipts from related activities, etc. (see instructions) .....					12	4,192,667.
13 <b>First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f)) .....	14	70.17	%
15 Public support percentage from 2015 Schedule A, Part II, line 14 .....	15	73.78	%
16a <b>33 1/3% support test - 2016.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input checked="" type="checkbox"/>
b <b>33 1/3% support test - 2015.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
17a <b>10% -facts-and-circumstances test - 2016.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
b <b>10% -facts-and-circumstances test - 2015.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and <b>stop here.</b> Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization .....			<input type="checkbox"/>
18 <b>Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions .....			<input type="checkbox"/>

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**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 <b>Total.</b> Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 <b>Public support.</b> (Subtract line 7c from line 6.)						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 <b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ☐



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**Part IV** Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in **Part VI**, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- b **Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c **Substitutions only.** Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in **Part VI**.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI**.
- b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in **Part VI**.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in **Part VI**.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.
- b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

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**Part IV** Supporting Organizations (continued)

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
- b** A family member of a person described in (a) above?
- c** A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.

	Yes	No
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

- 1** Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.

	Yes	No
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

- 1** Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).

	Yes	No
<b>1</b>		

**Section D. All Type III Supporting Organizations**

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).
- 3** By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.

	Yes	No
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).
- a** ☐ The organization satisfied the Activities Test. Complete line 2 below.
- b** ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.
- c** ☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).

**2** Activities Test. Answer (a) and (b) below.

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.

- b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.

**3** Parent of Supported Organizations. Answer (a) and (b) below.

- a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.
- b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

	Yes	No
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

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**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI.) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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**Part V** Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions	
7	<b>Total annual distributions.</b> Add lines 1 through 6	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9	Distributable amount for 2016 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1	Distributable amount for 2016 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions		
3	Excess distributions carryover, if any, to 2016:		
a			
b			
c	From 2013		
d	From 2014		
e	From 2015		
f	<b>Total</b> of lines 3a through e		
g	Applied to underdistributions of prior years		
h	Applied to 2016 distributable amount		
i	Carryover from 2011 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4	Distributions for 2016 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2016 distributable amount		
c	Remainder. Subtract lines 4a and 4b from 4		
5	Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions		
6	Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions		
7	<b>Excess distributions carryover to 2017.</b> Add lines 3j and 4c		
8	Breakdown of line 7:		
a			
b	Excess from 2013		
c	Excess from 2014		
d	Excess from 2015		
e	Excess from 2016		

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**Part VI**

**Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.  
(See instructions.)

Supplemental information area with horizontal lines.

# Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury  
Internal Revenue Service

# Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.  
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

# 2016

Name of the organization

CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA

Employer identification number

41-1744184

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( 3 ) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

## General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

## Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ..... ▶ \$ .....

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)**

Name of organization <b>CATHOLIC COMMUNITY FOUNDATION OF MINNESOTA</b>	Employer identification number <b>41-1744184</b>
---	---

**Part I Contributors** (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>		\$ <u>1,865,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>2</u>		\$ <u>11,157,309.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>3</u>		\$ <u>1,382,806.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>4</u>		\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<u>5</u>		\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Employer identification number

41-1744184

## Part II

[illegible]



Name of organization

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number

**41-1744184****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) ▶ \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

**SCHEDULE D**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Supplemental Financial Statements**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.  
▶ Attach to Form 990.

▶ Information about Schedule D (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization  
**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number  
**41-1744184**

**Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.** Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year .....	255	
2 Aggregate value of contributions to (during year) .....	8,907,668.	
3 Aggregate value of grants from (during year) .....	8,585,553.	
4 Aggregate value at end of year .....	30,761,408.	
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? .....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

**Part II Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of a historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements .....	2a
b Total acreage restricted by conservation easements .....	2b
c Number of conservation easements on a certified historic structure included in (a) .....	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register .....	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ .....

4 Number of states where property subject to conservation easement is located ▶ .....

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? .....

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ .....

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ .....

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? .....

☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 .....

(ii) Assets included in Form 990, Part X .....

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenue included on Form 990, Part VIII, line 1 .....

b Assets included in Form 990, Part X .....

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2016

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Schedule D (Form 990) 2016

41-1744184 Page 2

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a ☐ Public exhibition      d ☐ Loan or exchange programs
- b ☐ Scholarly research      e ☐ Other \_\_\_\_\_
- c ☐ Preservation for future generations
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☒ No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- |                                 | Amount |
|---------------------------------|--------|
| c Beginning balance             | 1c     |
| d Additions during the year     | 1d     |
| e Distributions during the year | 1e     |
| f Ending balance                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☒ Yes ☐ No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☒

**Part V Endowment Funds.** Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	78,473,647.	78,126,577.	78,990,513.	63,918,104.	55,520,112.
b Contributions	15,200,107.	6,197,655.	5,061,890.	5,789,572.	3,694,141.
c Net investment earnings, gains, and losses	10,149,215.	-2,994,392.	-2,110,892.	11,311,181.	6,856,024.
d Grants or scholarships	2,831,899.	2,856,193.	3,814,934.	2,028,344.	2,152,173.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	100,991,070.	78,473,647.	78,126,577.	78,990,513.	63,918,104.

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment 3.73 %

b Permanent endowment 73.30 %

c Temporarily restricted endowment 22.97 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |  | Yes                      | No                                  |
|--|--------------------------|-------------------------------------|
| (i) unrelated organizations  | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) related organizations   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | <input type="checkbox"/> | <input type="checkbox"/>            |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		10,200.	7,299.	2,901.
d Equipment		48,888.	38,533.	10,355.
e Other				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				13,256.

Schedule D (Form 990) 2016

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Schedule D (Form 990) 2016

41-1744184 Page 3

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	390,564.	COST
(3) Other		
(A) HEDGE FUNDS AND PRIVATE		
(B) EQUITY INVESTMENTS	49,512,245.	END-OF-YEAR MARKET VALUE
(C) REAL ESTATE INVESTMENTS	7,255,640.	END-OF-YEAR MARKET VALUE
(D) BENEFICIAL INTEREST IN		
(E) TRUST	4,261,615.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	61,420,064.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) BENEFICIARY ENDOWMENTS	35,818,861.
(3) CHARITABLE GIFT ANNUITY AND	
(4) CHARITABLE REMAINDER TRUST	
(5) OBLIGATIONS	6,641,806.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	42,460,667.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☒

Schedule D (Form 990) 2016

CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA

Schedule D (Form 990) 2016

41-1744184 Page 4

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total revenue, gains, and other support per audited financial statements	1	39,489,440.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	2a	9,828,872.
b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII.)	2d	159,850.
e Add lines 2a through 2d	2e	9,988,722.
3 Subtract line 2e from line 1	3	29,500,718.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	424,407.
b Other (Describe in Part XIII.)	4b	4,200,978.
c Add lines 4a and 4b	4c	4,625,385.
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	34,126,103.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1 Total expenses and losses per audited financial statements	1	14,843,627.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	
c Other losses	2c	
d Other (Describe in Part XIII.)	2d	
e Add lines 2a through 2d	2e	0.
3 Subtract line 2e from line 1	3	14,843,627.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	424,407.
b Other (Describe in Part XIII.)	4b	879,000.
c Add lines 4a and 4b	4c	1,303,407.
5 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	16,147,034.

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**PART IV, LINE 2B:**

THE FOUNDATION MANAGES FUNDS AS AN AGENT FOR CHARITABLE ORGANIZATIONS  
WHOSE MISSION IS TO MEET THE SPIRITUAL, EDUCATIONAL, AND SOCIAL NEEDS OF  
OUR MINNESOTA CATHOLIC COMMUNITY. AS AGENT, THE FOUNDATION MANAGES AND  
INVESTS THE FUNDS IN THE ORGANIZATION'S NAME. DISTRIBUTIONS ARE MADE IN  
ACCORDANCE WITH THE AGENCY AGREEMENTS AND DIRECTION FROM THE RESPECTIVE  
ORGANIZATIONS. EITHER PARTY MAY CANCEL AN AGENCY AGREEMENT AT ANY TIME.

**PART V, LINE 4:**

ENDOWMENT FUNDS ARE ESTABLISHED FOR THE BENEFIT OF ONE OR MORE CHARITABLE  
ORGANIZATIONS. ANY DONOR OR ORGANIZATION MAY MAKE A GIFT OF ANY SIZE TO AN  
ESTABLISHED FUND, OR A DONOR OR ORGANIZATION MAY SETUP A NEW DESIGNATED

**Part XIII** Supplemental Information (continued)

FUND WITH A MINIMUM CONTRIBUTION OF \$50,000. THE EARNINGS FROM THESE  
ENDOWMENT FUNDS ARE DISTRIBUTED TO THE BENEFICIARY ORGANIZATION(S).  
ESTABLISHMENT OF AN ENDOWMENT FUND IS A WONDERFUL WAY TO ENSURE THE  
PERPETUAL SUPPORT OF IMPORTANT CHARITABLE CAUSES.

## PART X, LINE 2:

THE FOUNDATION IS A TAX EXEMPT ORGANIZATION UNDER SECTION 501(C)(3) OF THE  
INTERNAL REVENUE CODE AND ONLY UNRELATED BUSINESS INCOME IS SUBJECT TO  
FEDERAL AND STATE INCOME TAX. THE FOUNDATION IS A NON-PRIVATE FOUNDATION  
AND CONTRIBUTIONS TO THE FOUNDATION QUALIFY AS A CHARITABLE TAX DEDUCTION  
BY THE CONTRIBUTOR.

THE FOUNDATION FOLLOWS THE ACCOUNTING STANDARDS FOR CONTINGENCIES IN  
EVALUATING UNCERTAIN TAX POSITIONS. THIS GUIDANCE PRESCRIBES RECOGNITION  
THRESHOLD PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION OF TAX  
POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT  
CERTAIN TO BE REALIZED. NO LIABILITY HAS BEEN RECOGNIZED BY THE FOUNDATION  
DUE TO THE IMPLEMENTATION OF THIS STANDARD. THE FOUNDATION'S TAX RETURNS  
ARE SUBJECT TO REVIEW AND EXAMINATION BY FEDERAL AND STATE AUTHORITIES.

## PART XI, LINE 2D - OTHER ADJUSTMENTS:

GAIN IN VALUE OF SPLIT-INTEREST AGREEMENTS 159,850.

## PART XI, LINE 4B - OTHER ADJUSTMENTS:

AMOUNTS RECEIVED FOR BENEFICIAL ENDOWMENTS 4,200,978.

## PART XII, LINE 4B - OTHER ADJUSTMENTS:

BENEFICIAL ENDOWMENTS 879,000.

**SCHEDULE F**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Statement of Activities Outside the United States**

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization  
**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number

**41-1744184**

**Part I** General Information on Activities Outside the United States. Complete if the organization answered "Yes" on

Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... ☐ Yes ☐ No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	N/A	28,052,762.
<b>3 a</b> Sub-total .....	0	0			28,052,762.
<b>b</b> Total from continuation sheets to Part I .....	0	0			0.
<b>c Totals</b> (add lines 3a and 3b) .....	0	0			28,052,762.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2016

**Part II** **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities



41-1744184

Schedule F (Form 990) 2016

**Part III** Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

[illegible]

Schedule F (Form 990) 2016

CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA

Schedule F (Form 990) 2016

41-1744184 Page 4

**Part IV** Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☒ Yes ☐ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471) ☒ Yes ☐ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621) ☒ Yes ☐ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990) ☐ Yes ☒ No

Schedule F (Form 990) 2016

CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA

Schedule F (Form 990) 2016

41-1744184 Page 5

**Part V** Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 3:

ACCRUAL METHOD

**SCHEDULE I**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.  
▶ Attach to Form 990.

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number  
**41-1744184**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No

**2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ABRIA PREGNANCY RESOURCES 2200 UNIVERSITY AVE W SUITE 160 ST. PAUL, MN 55114	41-1278207	501(C)(3)	57,566.	0. N/A		N/A	GENERAL OPERATING
ACADEMY OF HOLY ANGELS 6600 NICOLLET AVE S RICHFIELD, MN 55423	41-0696903	501(C)(3)	17,697.	0. N/A		N/A	SCHOLARSHIPS FOR AFRICAN AMERICAN STUDENTS
ACHIEVING CURES TOGETHER 7653 ANAGRAM DR EDEN PRAIRIE, MN 55344	47-5158356	501(C)(3)	6,000.	0. N/A		N/A	AS NEEDED
AIM HIGHER FOUNDATION 10350 BREN RD W MINNETONKA, MN 55343	46-3935682	501(C)(3)	119,112.	0. N/A		N/A	GENERAL OPERATIONS
ALL SAINTS SCHOOL 19795 HOLYOKE AVE LAKEVILLE, MN 55044-8816	41-0708872	501(C)(3)	5,000.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
AMICUS - VOLUNTEERS OF AMERICA 7625 METRO BLVD EDINA, MN 55439	41-1554078	501(C)(3)	17,000.	0. N/A		N/A	IN SUPPORT OF THE AMICUS PROGRAM
<b>2</b> Enter total number of section 501(c)(3) and government organizations listed in the line 1 table			315.				
<b>3</b> Enter total number of other organizations listed in the line 1 table			0.				

**LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.**

**SEE PART IV FOR COLUMN (H) DESCRIPTIONS**

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHDIOCESAN LIFE FUND 777 FOREST ST N SAINT PAUL, MN 55106	41-0693908	501(C)(3)	112,524.	0. N/A	N/A		ARCHDIOCESAN LIFE FUND
ARCHDIOCESE OF SAINT PAUL & MINNEAPOLIS - 777 FOREST ST N - SAINT PAUL, MN 55106	41-0693908	501(C)(3)	16,600.	0. N/A	N/A		GENERAL SUPPORT
ASCENSION CATHOLIC SCHOOL 1726 DUPONT AVE N MINNEAPOLIS, MN 55411	41-0705767	501(C)(3)	345,351.	0. N/A	N/A		GENERAL SUPPORT
AUGUSTANA UNIVERSITY 2001 S SUMMIT AVE STOUX FALLS, SD 57197	46-0224588	501(C)(3)	6,500.	0. N/A	N/A		AUGUSTEN FUND 2016-2017
AVE MARIA ACADEMY 7000 JEWEL LN N MAPLE GROVE, MN 55311	41-1871572	501(C)(3)	9,995.	0. N/A	N/A		THE STAINED GLASS
BANYAN COMMUNITY 2529 13TH AVE S MINNEAPOLIS, MN 55404	41-1922813	501(C)(3)	25,000.	0. N/A	N/A		SUPPORT FOR THE PHILLIPS NEIGHBORHOOD
BASILICA OF SAINT MARY 88 N 17TH ST P.O. BOX 50010 MINNEAPOLIS, MN 55405	41-0695501	501(C)(3)	25,265.	0. N/A	N/A		PARTICIPATION IN PARISH CATALYST PROGRAM
BEACON INTERFAITH HOUSING 2610 UNIVERSITY AVE W #100 SAINT PAUL, MN 55114	41-1953599	501(C)(3)	21,500.	0. N/A	N/A		66 WEST ANGEL DONATION
BENEDICTINE COLLEGE 1020 N SECOND ST ATCHISON, KS 66002	48-0777079	501(C)(3)	55,000.	0. N/A	N/A		GENERAL SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BENILDE-ST. MARGARET SCHOOL 2501 HIGHWAY 100 S ST. LOUIS PARK, MN 55416	41-1240936	501(C)(3)	164,700.	0. N/A		N/A	GENERAL SUPPORT
BETHLEHEM ACADEMY 105 - 3RD AVE SW FARIBAULT, MN 55021	41-1794765	501(C)(3)	36,505.	0. N/A		N/A	BIKE RIDE FUND
BIG BROTHERS BIG SISTERS OF THE GREATER TWIN CITIES - 2530 UNIVERSITY AVE W SUITE 410N - ST. PAUL, MN 55114	32-0017737	501(C)(3)	10,000.	0. N/A		N/A	GENERAL OPERATIONS
BLESSED TRINITY CATHOLIC SCHOOL 6730 NICOLLET AVE S RICHFIELD, MN 55423	41-1787370	501(C)(3)	33,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
CARMEL OF OUR LADY OF DIVINE PROVIDENCE - 8251 DEMONTREVILLE TRL N - LAKE ELMO, MN 55042	41-6023893	501(C)(3)	18,000.	0. N/A		N/A	GENERAL SUPPORT
CARMELITE MONASTERY 8249 DEMONTREVILLE TRL N LAKE ELMO, MN 55042	41-1615129	501(C)(3)	8,000.	0. N/A		N/A	GENERAL SUPPORT
CARMELITE MONASTERY OF THE I. H. M. - P.O. BOX 2747 - CODY, WY 82414-2747	20-1917742	501(C)(3)	6,200.	0. N/A		N/A	GENERAL SUPPORT
CATHEDRAL HERITAGE FOUNDATION 380 JACKSON ST SUITE 287 ST. PAUL, MN 55101	26-0275248	501(C)(3)	6,400.	0. N/A		N/A	GENERAL SUPPORT
CATHEDRAL OF THE IMMACULATE CONCEPTION - 125 EAGLE ST - ALBANY, NY 12202	14-1347444	501(C)(3)	10,000.	0. N/A		N/A	RENOVATION

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC BISHOP OF NORTHERN ALASKA 1312 PEGGER RD FAIRBANKS, AK 99709	92-0019215	501(C)(3)	41,075.	0. N/A	N/A		GENERAL SUPPORT
CATHOLIC CHARITIES 1200 SECOND AVE S MINNEAPOLIS, MN 55403	41-1302487	501(C)(3)	513,995.	0. N/A	N/A		DOROTHY DAY CENTER CAPITAL CAMPAIGN
CATHOLIC EXTENSION SOCIETY 150 S WACKER DR SUITE 2000 CHICAGO, IL 60606	36-6000520	501(C)(3)	96,951.	0. N/A	N/A		TRIPLE THE MATCH - GREATEST NEED
CATHOLIC RELIEF SERVICES P.O. BOX 17090 BALTIMORE, MD 21298	13-5563422	501(C)(3)	135,776.	0. N/A	N/A		WORLD HUNGER RELIEF
CATHOLIC RURAL LIFE MAIL #4080 2115 SUMMIT AVE ST. PAUL, MN 55105	42-0752630	501(C)(3)	177,295.	0. N/A	N/A		SCHOLARSHIPS, CONSULTING AND MANAGEMENT AND COORDINATION
CATHOLIC SCHOOLS CENTER OF EXCELLENCE - CSCOE - 3033 EXCELSIOR BLVD SUITE 550 - MINNEAPOLIS, MN 55416	47-3560859	501(C)(3)	15,000.	0. N/A	N/A		CORE SUPPORT
CATHOLIC SERVICES APPEAL FOUNDATION - 12805 HIGHWAY 55 SUITE 210 - PLYMOUTH, MN 55441	46-4321593	501(C)(3)	290,014.	0. N/A	N/A		GENERAL SUPPORT
CATHOLIC SERVICES APPEAL FOUNDATION - 12805 HIGHWAY 55 SUITE 210 - PLYMOUTH, MN 55441	46-4321593	501(C)(3)	19,600.	0. N/A	N/A		GENERAL SUPPORT
CATHOLIC YOUTH CAMP 2233 HAMLINE AVE SUITE B1 ROSEVILLE, MN 55113	41-6006820	501(C)(3)	17,645.	0. N/A	N/A		CORE SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF OUR LADY OF GRACE 5071 EDEN AVENUE EDINA, MN 55436	41-0705765	501(C)(3)	184,871.	0. N/A	N/A		POPE JOHN PAUL II CATHOLIC SCHOOL
CHURCH OF OUR LADY OF GRACE 5071 EDEN AVENUE EDINA, MN 55436	41-0705765	501(C)(3)	103,900.	0. N/A	N/A		GENERAL SUPPORT
CHURCH OF OUR LADY OF PEACE - EDUCATION - 5426 - 12TH AVENUE SOUTH - MINNEAPOLIS, MN 55417	41-1697034	501(C)(3)	55,900.	0. N/A	N/A		EDUCATIONAL MINISTRIES AND SERVICES
CHURCH OF SAINT AMBROSE OF WOODBURY - 4125 WOODBURY DRIVE - WOODBURY, MN 55129	41-1905541	501(C)(3)	28,000.	0. N/A	N/A		TUITION ASSISTANCE FOR STUDENTS ATTENDING ST. AMBROSE OF WOODBURY CATHOLIC SCHOOL
CHURCH OF ST. ANNE 200 HAMEL ROAD P.O. BOX 256 HAMEL, MN 55340	41-0877635	501(C)(3)	13,000.	0. N/A	N/A		MONTHLY DONATION - GENERAL FUND
CHURCH OF ST. BERNARD 1160 WOODBRIDGE STREET ST. PAUL, MN 55117	41-0757844	501(C)(3)	5,325.	0. N/A	N/A		OUTREACH TO THE KARENI COMMUNITY SUPPORTING THE GENERAL NEEDS OF ST. CECILIA, WITH PRIORITY GIVEN TO ONGOING REPAIR AND
CHURCH OF ST. CECILIA 2357 BAYLESS PLACE ST. PAUL, MN 55114	41-0829141	501(C)(3)	8,900.	0. N/A	N/A		CAPITAL IMPROVEMENTS AND/OR SUPPORT OF OTHER PARISH PROGRAMS
CHURCH OF ST. HELENA 3204 EAST 43RD STREET MINNEAPOLIS, MN 55406	42-0718330	501(C)(3)	14,900.	0. N/A	N/A		MAINTAINING, IMPROVING AND SUPPORTING THE RELIGIOUS AND EDUCATIONAL PROGRAMS AND ACTIVITIES
CHURCH OF ST. HUBERT 8201 MAIN STREET CHANEASSEN, MN 55317-9647	41-0789368	501(C)(3)	5,700.	0. N/A	N/A		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF ST. JOHN NEUMANN 4030 PILOT KNOB ROAD EAGAN, MN 55122	41-1311105	501(C)(3)	31,800.	0. N/A		N/A	GENERAL SUPPORT
CHURCH OF ST. JOHN THE BAPTIST 4625 WEST 125TH STREET SAVAGE, MN 55378	41-0791350	501(C)(3)	39,970.	0. N/A		N/A	UNRESTRICTED
CHURCH OF ST. JOHN THE BAPTIST 680 MILL STREET EXCELSIOR, MN 55331	41-0721661	501(C)(3)	26,800.	0. N/A		N/A	GENERAL USE
CHURCH OF ST. JOHN THE BAPTIST 835 - 2ND AVE. N.W. NEW BRIGHTON, MN 55112	41-0732798	501(C)(3)	14,550.	0. N/A		N/A	GENERAL SUPPORT
CHURCH OF ST. JOHN THE BAPTIST 835 - 2ND AVE. N.W. NEW BRIGHTON, MN 55112	41-0732798	501(C)(3)	16,200.	0. N/A		N/A	SUPPORTING THE PARISH OPERATING FUND
CHURCH OF ST. JOHN VIANNEY 789 - 17TH AVENUE NORTH SOUTH ST. PAUL, MN 55075	41-0706913	501(C)(3)	80,550.	0. N/A		N/A	GENERAL SUPPORT
CHURCH OF ST. JOSEPH 1154 SEMINOLE AVENUE WEST ST. PAUL, MN 55118	41-0705875	501(C)(3)	151,300.	0. N/A		N/A	STEWARDSHIP
CHURCH OF ST. JOSEPH 41 EAST 1ST STREET WACONIA, MN 55387-1597	41-0754588	501(C)(3)	55,700.	0. N/A		N/A	GENERAL CHARITABLE PURPOSES
CHURCH OF ST. JOSEPH 6 INTERLACHEN ROAD HOPKINS, MN 55343	41-0721655	501(C)(3)	6,400.	0. N/A		N/A	EDUCATIONAL PROGRAMS

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CHURCH OF ST. MARK 2001 DAYTON AVE. ST. PAUL, MN 55104	41-0694739	501(C)(3)	120,200.	0. N/A		N/A	TUITION ASSISTANCE
CHURCH OF ST. MARK 2001 DAYTON AVE. ST. PAUL, MN 55104	41-0694739	501(C)(3)	34,800.	0. N/A		N/A	GENERAL SUPPORT FOR THE BENEFIT OF THE CHURCH
CHURCH OF ST. MARY 261 EAST 8TH STREET ST. PAUL, MN 55101	41-0744076	501(C)(3)	14,000.	0. N/A		N/A	GENERAL FUND
CHURCH OF ST. MARY 165 WATERVILLE AVE N LE CENTER, MN 56057	41-0789396	501(C)(3)	5,000.	0. N/A		N/A	BUILDING FUND
CHURCH OF ST. MARY OF BIRD ISLAND 220 SOUTH 10TH STREET P.O. BOX 500 BIRD ISLAND, MN 55310	41-0773789	501(C)(3)	38,200.	0. N/A		N/A	GENERAL SUPPORT
CHURCH OF ST. MATTHEW 490 HALL AVENUE SAINT PAUL, MN 55104	41-0707559	501(C)(3)	12,600.	0. N/A		N/A	PROMOTING THE EDUCATIONAL MINISTRY OF THE PARISH AS WELL AS THE SCHOOL
CHURCH OF ST. MICHAEL 16311 DULUTH AVENUE SE PRIOR LAKE, MN 55372	41-0826790	501(C)(3)	50,000.	0. N/A		N/A	REDUCE DEBT
CHURCH OF ST. MICHAEL 611 SOUTH 3RD STREET STILLWATER, MN 55082	41-0742511	501(C)(3)	22,500.	0. N/A		N/A	GENERAL SUPPORT
CHURCH OF ST. MICHAEL C/O CHURCH OF ST. MATTHEW 490 HALL ST. PAUL, MN 55104	41-0575777	501(C)(3)	15,000.	0. N/A		N/A	CARPET OR OTHER UPDATES IN THE RECTORY

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CHURCH OF ST. MICHAEL 22120 DENMARK AVE. FARMINGTON, MN 55024	41-0777907	501(C)(3)	10,100.	0. N/A		N/A	THOSE PURPOSES DESIGNATED BY THE BOARD OF DIRECTORS OF THE PARISH
CHURCH OF ST. PATRICK 19921 NIGHTINGALE STREET NW OAK GROVE, MN 55011	41-1230136	501(C)(3)	1,042,350.	0. N/A		N/A	MONTHLY OFFERING
CHURCH OF ST. PATRICK 6820 ST. PATRICK'S LANE EDINA, MN 55439	41-0856353	501(C)(3)	5,500.	0. N/A		N/A	GENERAL SUPPORT
CHURCH OF ST. PATRICK 1095 DESOTO STREET ST. PAUL, MN 55130	41-0693967	501(C)(3)	42,000.	0. N/A		N/A	EDUCATIONAL PURPOSES AT THE PARISH
CHURCH OF ST. PATRICK 3535 - 72ND STREET EAST INVER GROVE HEIGHTS, MN 55076	41-0837975	501(C)(3)	5,700.	0. N/A		N/A	THE BUILDING OF NEW FACILITIES AND/OR ADDITIONS TO THE PHYSICAL PLANT
CHURCH OF ST. PETER P.O. BOX #50679 MENDOTA, MN 55150	41-0732219	501(C)(3)	12,200.	0. N/A		N/A	ANNUAL GIVING
CHURCH OF ST. PETER 1250 S SHORE DRIVE FOREST LAKE, MN 55025-1999	41-0799304	501(C)(3)	11,500.	0. N/A		N/A	BUILDING FOR FUTURE CAPITAL CAMPAIGN
CHURCH OF ST. PETER 2600 MARGARET STREET NORTH NORTH ST. PAUL, MN 55109	41-0830644	501(C)(3)	8,600.	0. N/A		N/A	PROVIDING TUITION ASSISTANCE TO STUDENTS ATTENDING ST. PETER SCHOOL
CHURCH OF ST. RAPHAEL 7301 BASS LAKE RD CRYSTAL, MN 55428	41-0729961	501(C)(3)	15,000.	0. N/A		N/A	GENERAL SUPPORT

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CHURCH OF ST. RICHARD 7540 PENN AVENUE SOUTH RICHFIELD, MN 55423	41-0732239	501(C)(3)	17,000.	0. N/A	N/A	CHARITABLE, RELIGIOUS AND EDUCATIONAL PURPOSES	
CHURCH OF ST. ROSE OF LIMA 2048 HAMLIN AVE N ROSEVILLE, MN 55113	41-0790158	501(C)(3)	28,200.	0. N/A	N/A	ANY PURPOSE	
CHURCH OF ST. STEPHEN 2211 CLINTON AVENUE S MINNEAPOLIS, MN 55404	41-0705833	501(C)(3)	14,241.	0. N/A	N/A	EDUCATION FUND	
CHURCH OF ST. STEPHEN 2211 CLINTON AVENUE S MINNEAPOLIS, MN 55404	41-0705833	501(C)(3)	8,800.	0. N/A	N/A	THE GENERAL SUPPORT OF ST. STEPHEN'S CATHOLIC CHURCH	
CHURCH OF ST. THERESE 18323 MINNETONKA BLVD. DEEPHAVEN, MN 55391-3294	41-0790147	501(C)(3)	6,200.	0. N/A	N/A	THE RELIGIOUS AND GENERAL EDUCATION PROGRAMS OF THE SCHOOL	
CHURCH OF ST. THOMAS MORE 1079 SUMMIT AVENUE ST. PAUL, MN 55105	41-0694738	501(C)(3)	27,900.	0. N/A	N/A	ENV. #1204	
CHURCH OF ST. TIMOTHY 707 - 89TH AVENUE NE BLAINE, MN 55434-2399	41-0764081	501(C)(3)	12,500.	0. N/A	N/A	GENERAL SUPPORT OF THE CHURCH OF ST. TIMOTHY	
CHURCH OF ST. VINCENT DE PAUL 9100 - 93RD AVENUE NORTH BROOKLYN PARK, MN 55445	41-0849303	501(C)(3)	15,000.	0. N/A	N/A	CAPITAL CAMPAIGN	
CHURCH OF ST. WENCESLAUS 215 MAIN STREET EAST NEW PRAGUE, MN 56071	41-0695519	501(C)(3)	41,700.	0. N/A	N/A	GENERAL OPERATING NEEDS OF ST. WENCESLAUS CAMPUS	

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF THE ANNUNCIATION 509 WEST 54TH STREET MINNEAPOLIS, MN 55419	41-0721671	501(C)(3)	71,100.	0. N/A	N/A		FURTHERANCE OF CHARITABLE PURPOSES
CHURCH OF THE ASSUMPTION 51 - 7TH STREET WEST ST. PAUL, MN 55102	41-0694736	501(C)(3)	69,600.	0. N/A	N/A		ANNUAL FUND
CHURCH OF THE ASSUMPTION 305 EAST 77TH STREET RICHFIELD, MN 55423	41-0734772	501(C)(3)	5,400.	0. N/A	N/A		GENERAL SUPPORT
CHURCH OF THE HOLY CROSS 1621 UNIVERSITY AVE. NE MINNEAPOLIS, MN 55413	41-0695502	501(C)(3)	7,060.	0. N/A	N/A		GENERAL OPERATING
CHURCH OF THE HOLY NAME 3637 11TH AVE S MINNEAPOLIS, MN 55407	41-0831056	501(C)(3)	10,000.	0. N/A	N/A		THE SPIRITUAL AND TEMPORAL GOOD OF THE CHURCH
CHURCH OF THE HOLY NAME OF JESUS 155 COUNTY ROAD 24 WAYZATA, MN 55391	41-0845399	501(C)(3)	23,000.	0. N/A	N/A		GENERAL SUPPORT
CHURCH OF THE HOLY NAME OF JESUS 155 COUNTY ROAD 24 WAYZATA, MN 55391	41-0845399	501(C)(3)	40,000.	0. N/A	N/A		FINANCIAL SUPPORT FOR THE POOR
CHURCH OF THE HOLY SPIRIT 512 SOUTH ALBERT STREET ST. PAUL, MN 55105	41-0705768	501(C)(3)	27,800.	0. N/A	N/A		THE FINANCIAL NEEDS OF THE PARISH AND/OR SCHOOL
CHURCH OF THE HOLY TRINITY 749 6TH AVENUE SOUTH SOUTH ST. PAUL, MN 55075	41-0734737	501(C)(3)	16,500.	0. N/A	N/A		MOST PRESSING OPERATING NEEDS

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CHURCH OF THE IMMACULATE CONCEPTION - 116 ALABAMA STREET SE P.O. BOX 169 - LONSDALE, MN 55046	41-0718325	501(C)(3)	5,900.	0. N/A		N/A	ON-GOING GENERAL OPERATING NEEDS OF THE PARISH
CHURCH OF THE IMMACULATE HEART OF MARY - 13505 EXCELSIOR BLVD - MINNETONKA, MN 55345	41-0718324	501(C)(3)	6,600.	0. N/A		N/A	DONATION
CHURCH OF THE IMMACULATE HEART OF MARY - 13505 EXCELSIOR BLVD - MINNETONKA, MN 55345	41-0718324	501(C)(3)	10,000.	0. N/A		N/A	SCHOLARSHIP FUNDS FOR IHM CHURCH STUDENTS
CHURCH OF THE NATIVITY OF MARY 9900 LYNDALE AVE S BLOOMINGTON, MN 55420	41-0735359	501(C)(3)	19,300.	0. N/A		N/A	THE PROGRAMS AND NEEDS OF THE SCHOOL
CHURCH OF THE PRESENTATION/BLESSED VIRGIN MAR - 1725 KENNARD STREET - MAPLEWOOD, MN 55109	41-0789390	501(C)(3)	17,400.	0. N/A		N/A	THE GENERAL OPERATING NEEDS OF THE PARISH
CLERICS OF ST. VIATOR 1212 EAST EUCLID STREET ARLINGTON HEIGHTS, IL 60004	36-2240488	501(C)(3)	7,500.	0. N/A		N/A	SUPPORT FOR THE MINISTRY IN BELIZE.
COLLEGE OF SAINT BENEDICT 37 SOUTH COLLEGE AVENUE ST. JOSEPH, MN 56374-2099	41-0969244	501(C)(3)	27,500.	0. N/A		N/A	ANNUAL FUND
COLORADO STATE UNIVERSITY FOUNDATION - 410 UNIVERSITY SERVICES CENTER - FORT COLLINS, CO 80523	23-7098397	501(C)(3)	116,573.	0. N/A		N/A	PHILIP CONNOLLY ENDOWMENT SCHOLARSHIP FUND
COMMON HOPE 1400 ENERGY PARK DRIVE SUITE 23 SAINT PAUL, MN 55108	41-1560297	501(C)(3)	42,065.	0. N/A		N/A	GENERAL SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMONBOND COMMUNITIES 1080 MONTREAL AVENUE SAINT PAUL, MN 55116	41-1260469	501(C)(3)	28,500.	0. N/A	N/A		GENERAL SUPPORT
COMMUNITY OF CHRIST THE REDEEMER 110 CRUSADER AVENUE WEST WEST ST. PAUL, MN 55118	41-1511840	501(C)(3)	70,000.	0. N/A	N/A		GENERAL FUND - TITHE
COMMUNITY OF SAINTS REGIONAL CATHOLIC SCHOOL - 335 HURLEY AVENUE EAST - WEST ST. PAUL, MN 55118	45-4804818	501(C)(3)	63,700.	0. N/A	N/A		TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
CONCORDIA ACADEMY 2400 NORTH DALE STREET ROSEVILLE, MN 55113	41-0845401	501(C)(3)	5,475.	0. N/A	N/A		2016 - 2017 TUITION ASSISTANCE
COOPERATIVE FOR ASSISTANCE AND RELIEF EVERYWHERE (CARE) - GIFT CENTER P.O. BOX 1871 - MERRIFIELD, VA 22116-9753	13-1685039	501(C)(3)	5,200.	0. N/A	N/A		GENERAL NEEDS
COURAGE CENTER MINNESOTA 3915 GOLDEN VALLEY ROAD GOLDEN VALLEY, MN 55422	41-1952989	501(C)(3)	6,013.	0. N/A	N/A		GENERAL
COVENANT HOUSE 461 EIGHTH AVENUE NEW YORK, NY 10001	13-2725416	501(C)(3)	42,906.	0. N/A	N/A		GENERAL NEEDS
CRADLE OF HOPE 1970 OAKCREST AVE. SUITE #300 ROSEVILLE, MN 55113	23-7349015	501(C)(3)	24,736.	0. N/A	N/A		GENERAL FUND
CRETIN-DERRHAM HALL HIGH SCHOOL 550 ALBERT STREET SOUTH ST. PAUL, MN 55116	41-1570394	501(C)(3)	161,725.	0. N/A	N/A		TUITION AID

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CRETIN-DERHAM HALL HIGH SCHOOL 550 ALBERT STREET SOUTH ST. PAUL, MN 55116	41-1570394	501(C)(3)	56,700.	0.	N/A	N/A	PAYMENTS OF SALARIES OF INSTRUCTORS OF CRETIN HIGH SCHOOL AND OPERATING EXPENSES OF THE HIGH
CRISTO REY JESUIT HIGH SCHOOL 2924 4TH AVENUE S MINNEAPOLIS, MN 55408	20-4548714	501(C)(3)	200,700.	0.	N/A	N/A	FUNDING FOR STUDENTS
CROHN'S & COLLITIS FOUNDATION-MINNESOTA - 2277 HIGHWAY 36 W, SUITE 170 - ROSEVILLE, MN 55113-3850	13-6193105	501(C)(3)	25,450.	0.	N/A	N/A	GENERAL OPERATING
CROSS CATHOLIC OUTREACH 2700 N. MILITARY TRAIL, SUITE 240 P.O. BOX 273908 - BOCA RATON, FL 33427-390	65-1156061	501(C)(3)	8,700.	0.	N/A	N/A	GENERAL SUPPORT
CURE ALZHEIMER'S FUND 34 WASHINGTON STREET SUITE 200 WELLESLEY, MA 02481	52-2396428	501(C)(3)	5,000.	0.	N/A	N/A	FUND RESEARCH FOR CURING ALZHEIMER'S DISEASE
DAKOTA WOODLANDS 3430 WESCOTT WOODLANDS EAGAN, MN 55123	41-1424653	501(C)(3)	11,265.	0.	N/A	N/A	CORE SUPPORT
DELASALLE HIGH SCHOOL ONE DELASALLE DRIVE MINNEAPOLIS, MN 55401	41-0705834	501(C)(3)	27,425.	0.	N/A	N/A	2016 - 2017 TUITION ASSISTANCE
DIOCESE OF DES MOINES 601 GRAND AVENUE DES MOINES, IA 50309	42-0680255	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
DIOCESE OF DULUTH, MN 2830 EAST 4TH STREET DULUTH, MN 55812	41-1941181	501(C)(3)	20,205.	0.	N/A	N/A	SUPPORTING THE FORMATION AND EDUCATION OF SEMINARIANS

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DIVINE MERCY CATHOLIC CHURCH 139 MERCY DR. FARIBAULT, MN 55021-6029	81-0572840	501(C)(3)	25,000.	0. N/A		N/A	EASTER OFFERING
DIVINE MERCY CATHOLIC SCHOOL OF FARIBAULT - 15 SW 3RD AVENUE - FARIBAULT, MN 55021	41-0954118	501(C)(3)	38,360.	0. N/A		N/A	TUITION ASSISTANCE
DUNWOODY COLLEGE OF TECHNOLOGY 818 DUNWOODY BLVD MINNEAPOLIS, MN 55403	41-0693856	501(C)(3)	8,000.	0. N/A		N/A	GENERAL SUPPORT
EPIPHANY SCHOOL 11001 HANSON BLVD. COON RAPIDS, MN 55433	41-0880245	501(C)(3)	9,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
FAMILY FEST MINISTRIES 140 WEST 98TH STREET SUITE 206 BLOOMINGTON, MN 55420	41-1985709	501(C)(3)	25,000.	0. N/A		N/A	AS NEEDED
FAMILY PROMISE IN ANOKA COUNTY 14515 NORTHERN BLVD. NW RAMSEY, MN 55303	27-1151848	501(C)(3)	6,500.	0. N/A		N/A	LIFESKILLS PROGRAM AND EXPENSE
FEED MY STARVING CHILDREN 401 93RD AVENUE NW COON RAPIDS, MN 55433	41-1601449	501(C)(3)	5,400.	0. N/A		N/A	CURRENT NEEDS
FOCUS-FELLOWSHIP OF CATHOLIC UNIV. STUDENTS - P.O. BOX 18710 - GOLDEN, CO 80402	84-1522811	501(C)(3)	31,923.	0. N/A		N/A	UNRESTRICTED
FOLDS OF HONOR FOUNDATION 5800 N PATRIOT DRIVE OWASSO, OK 74055	75-3240683	501(C)(3)	13,750.	0. N/A		N/A	GENERAL OPERATING

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FOOD FOR THE POOR, INC. FOUNDATIONS DEPARTMENT 6401 LYONS R COCONUT CREEK, FL 33073	59-2174510	501(C)(3)	9,765.	0.	N/A	N/A	CONTRIBUTION
FRANCISCAN BROTHERS OF PEACE QUEEN OF PEACE PRIARY 1289 LAFOND A ST. PAUL, MN 55104	41-1577838	501(C)(3)	10,200.	0.	N/A	N/A	FEED AND CLOTHE THE POOR
FRANCISCAN RETREATS 16385 ST. FRANCIS LANE PRIOR LAKE, MN 55372	41-0907232	501(C)(3)	11,200.	0.	N/A	N/A	OPERATIONS OF RETREATS AND RETREAT HOUSES
FRASSATI CATHOLIC ACADEMY 4690 BALD EAGLE AVE WHITE BEAR LAKE, MN 55110-3441	46-3494121	501(C)(3)	7,500.	0.	N/A	N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
FRATERNUS INC. PO BOX 2703 HUNTERSVILLE, NC 28070	26-0873205	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
FRIENDS OF ASCENSION CATHOLIC SCHOOL - 1723 BRYANT AVENUE NORTH - MINNEAPOLIS, MN 55411	27-1530388	501(C)(3)	250,500.	0.	N/A	N/A	GENERAL SUPPORT
FRIENDS OF EAST AFRICA FOUNDATION C/O UNIVERSITY OF ST. THOMAS 2115 SUMMIT AVENUE, MAIL# 5004 - SAINT PAUL, MN	46-1673385	501(C)(3)	17,000.	0.	N/A	N/A	EAST AFRICAN STUDENTS PROJECT
FRIENDS OF THE FOLDS OF HONOR FOUNDATION - 24 FIRTH ROAD - INVERNESS, IL 60067	45-5382465	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL OPERATING
FRIENDS OF THE HENNEPIN COUNTY LIBRARY - 300 NICOLET MALL - MINNEAPOLIS, MN 55401	36-3579536	501(C)(3)	9,240.	0.	N/A	N/A	HOSMER LIBRARY CAPITAL IMPROVEMENTS/TECHNOLOGY

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FRIENDS OF THE ORPHANS-NPH USA 134 NORTH LA SALLE STREET SUITE 500 CHICAGO, IL 60602	65-1229309	501(C)(3)	52,060.	0. N/A			GENERAL OPERATING
FRIENDS OF THE ST. MICHAEL-ALBERTVILLE-HANOVER LIBRARY - 11800 TOWN CENTER DRIVE NE - ST. MICHAEL, MN 55376	41-2018284	501(C)(3)	5,000.	0. N/A			ST. MICHAEL LIBRARY CAPITAL IMPROVEMENTS/TECHNOLOGY
GEORGETOWN UNIVERSITY 37TH AND O STREETS NW WASHINGTON, DC 20057	53-0196603	501(C)(3)	150,000.	0. N/A			CONVENE US ACADEMIC CENTERS ON CATHOLIC SOCIAL THOUGHT
GILLETTE CHILDREN'S HOSPITAL FOUNDATION - 200 UNIVERSITY AVE E - SAINT PAUL, MN 55101	41-1200302	501(C)(3)	5,000.	0. N/A			GENERAL OPERATING NEEDS
GLENMARY HOME MISSIONERS PO BOX 465618 CINCINNATI, OH 45246-5618	31-0537070	501(C)(3)	38,075.	0. N/A			GENERAL SUPPORT
GLENMARY SISTERS PO BOX 22264 OWENSBORO, KY 42304-2264	61-1203300	501(C)(3)	38,075.	0. N/A			GENERAL SUPPORT
GOODWILL-EASTER SEALS MINNESOTA NW 5798 P.O. BOX 1450 MINNEAPOLIS, MN 55485	41-0706171	501(C)(3)	50,000.	0. N/A			GENERAL OPERATIONS
GREATER MINNEAPOLIS CRISIS NURSERY 4544 4TH AVENUE SOUTH MINNEAPOLIS, MN 55419	41-1379021	501(C)(3)	5,000.	0. N/A			ANNUAL FUND
GUARDIAN ANGELS SCHOOL 217 WEST 2ND STREET CHASKA, MN 55318	41-0785167	501(C)(3)	31,000.	0. N/A			MARKETING & BRAND SPECIALIST

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GUEST HOUSE, MI 1601 JOSLYN ROAD LAKE ORION, MI 48360	38-1557146	501(C)(3)	8,745.	0. N/A		N/A	GENERAL DONATION
GUTHRIE THEATER FOUNDATION 818 SOUTH 2ND STREET MINNEAPOLIS, MN 55415	41-0854160	501(C)(3)	17,900.	0. N/A		N/A	GENERAL SUPPORT
HAVEN HOUSING (ASCENSION PLACE / ST. ANNE'S PLACE) - 1803 BRYANT AVENUE NORTH - MINNEAPOLIS, MN 55411	41-1396238	501(C)(3)	9,500.	0. N/A		N/A	GENERAL DONATION
HEALTHCARE FOUNDATION 1690 UNIVERSITY AVENUE WEST SUITE 2 ST. PAUL, MN 55104	41-1602044	501(C)(3)	6,500.	0. N/A		N/A	GENERAL SUPPORT
HILL MURRAY SCHOOL 2625 LARPEUR AVENUE EAST MAPLEWOOD, MN 55109	41-0829754	501(C)(3)	82,690.	0. N/A		N/A	TUITION ASSISTANCE
HILL MUSEUM & MANUSCRIPT LIBRARY BUSH CENTER P.O. BOX 7300 COLLEGEVILLE, MN 56321	41-0693973	501(C)(3)	18,450.	0. N/A		N/A	GENERAL SUPPORT
HMONG AMERICAN NATIONAL CATHOLIC ASSOCIATION - CATHEDRAL OF ST. PAUL - ST. VINCENT DE PAUL CAMPUS 239 SELBY AVE. - ST. PAUL, MN	41-1631015	501(C)(3)	5,000.	0. N/A		N/A	2017 CONVENTION
HOFSTRA UNIVERSITY 101 HOFSTRA UNIVERSITY 102 HOFSTRA HEMPSTEAD, NY 11549	11-1630906	501(C)(3)	15,000.	0. N/A		N/A	COMMISSION FOR A STUDY OF DIACONATE OF WOMEN
HOLY FAMILY ACADEMY 5925 W. LAKE STREET ST. LOUIS PARK, MN 55416	41-0804986	501(C)(3)	10,200.	0. N/A		N/A	GENERAL SUPPORT

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HOLY FAMILY CATHOLIC HIGH SCHOOL 8101 KOCHIA LANE VICTORIA, MN 55386	41-1848970	501(C)(3)	5,000.	0. N/A	N/A		TUITION ASSISTANCE
HOLY FAMILY SURGERY CENTER FOUNDATION - C/O MR. KEVIN ELLIOTT 569 BROOKWOOD VILLAGE, SUITE 901 - BIRMINGHAM, AL 35209	47-4546833	501(C)(3)	21,000.	0. N/A	N/A		GENERAL FUND
HOPE ACADEMY INC. 2300 CHICAGO AVENUE SOUTH MINNEAPOLIS, MN 55404	41-1962874	501(C)(3)	175,000.	0. N/A	N/A		GENERAL OPERATIONS
HOPE FOR UGANDA - SACRED HEART SEMINARY - PO BOX 1863 - MINNETONKA, MN 55345	41-1732849	501(C)(3)	22,592.	0. N/A	N/A		GENERAL DONATION
IMMACULATE CONCEPTION SCHOOL 4030 JACKSON ST NE COLUMBIA HEIGHTS, MN 55421	41-0703859	501(C)(3)	15,675.	0. N/A	N/A		TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
IMMACULATE HEART CHURCH P.O. BOX 155 CROSSLAKE, MN 56442	41-0905312	501(C)(3)	7,800.	0. N/A	N/A		GENERAL SUPPORT
JEREMIAH PROGRAM 615 FIRST AVENUE NORTHEAST SUITE #2 MINNEAPOLIS, MN 55413	41-1801834	501(C)(3)	35,550.	0. N/A	N/A		UNRESTRICTED
JESUIT RETREAT HOUSE - DEMONTREVILLE - 8243 N. DEMONTREVILLE TRAIL - LAKE ELMO, MN 55042	41-0705789	501(C)(3)	8,050.	0. N/A	N/A		GENERAL OPERATING
LAUNCH INTERNATIONAL P.O. BOX 406 MAX MEADOWS, VA 24360	46-5336835	501(C)(3)	5,000.	0. N/A	N/A		AFRICAN MISSION WORK

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LEGACY CHRISTIAN ACADEMY 3037 BUNKER LAKE BLVD. NW ANDOVER, MN 55304	41-1868252	501(C)(3)	6,000.	0. N/A	N/A		SCHOOL
LITTLE SISTERS OF THE POOR 330 SOUTH EXCHANGE ST. ST. PAUL, MN 55102	41-0764112	501(C)(3)	34,283.	0. N/A	N/A		GENERAL
LORAS COLLEGE DEVELOPMENT OFFICE 1450 ALTA VISTA DUBUQUE, IA 52001	42-0680412	501(C)(3)	15,000.	0. N/A	N/A		SUPPORT FOR STUDENT FINANCIAL AID
LUMEN CHRISTI CATHOLIC COMMUNITY 2055 BOHLAND AVENUE ST. PAUL, MN 55116	04-3802322	501(C)(3)	20,150.	0. N/A	N/A		ANNUAL GIVING FOR LCCC
LUMINARIAS INC. P.O. BOX 40434 SAINT PAUL, MN 55105-0403	47-1046165	501(C)(3)	300,000.	0. N/A	N/A		LAND PURCHASE/CONSTRUCTION
LUPUS RESEARCH INSTITUTE 330 SEVENTH AVENUE, SUITE 1701 NEW YORK, NY 10001	06-1565950	501(C)(3)	100,000.	0. N/A	N/A		GENERAL SUPPORT
MACPHAIL CENTER FOR MUSIC 501 SOUTH SECOND STREET MINNEAPOLIS, MN 55401	41-1729340	501(C)(3)	29,500.	0. N/A	N/A		MUSIC EDUCATION
MARIAN HIGH SCHOOL 7225 LAHSER ROAD BLOOMFIELD, MI 48301	38-1650600	501(C)(3)	5,000.	0. N/A	N/A		GENERAL OPERATIONS
MARQUETTE UNIVERSITY - ADVANCEMENT 1250 W. WISCONSIN AVENUE PO BOX 188 MILWAUKEE, WI 53201	39-0806251	501(C)(3)	20,000.	0. N/A	N/A		DONATION

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MARSHALL SCHOOL 1215 RICE LAKE ROAD DULUTH, MN 55811	41-0765672	501(C)(3)	10,500.	0. N/A	N/A		ANNUAL FUND
MARY, QUEEN OF PEACE SCHOOL 21201 CHURCH AVENUE ROGERS, MN 55374	41-0737230	501(C)(3)	15,000.	0. N/A	N/A		PART TIME STAFF
MARYKNOLL FATHERS AND BROTHERS P.O. BOX 302 MARYKNOLL, NY 10545	13-1740144	501(C)(3)	40,175.	0. N/A	N/A		MISSION WORK
MARYKNOLL SISTERS PO BOX 317 MARYKNOLL, NY 10545-0311	13-1740257	501(C)(3)	41,175.	0. N/A	N/A		GENERAL SUPPORT
MATERNITY OF MARY/ST. ANDREW SCHOOL - 592 ARLINGTON AVENUE WEST - ST. PAUL, MN 55117	41-1654467	501(C)(3)	10,500.	0. N/A	N/A		TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
MAYO CLINIC FOUNDATION DEPARTMENT OF DEVELOPMENT 200 FIRST STREET SW - ROCHESTER, MN 55905	41-6011702	501(C)(3)	14,500.	0. N/A	N/A		RESEARCH IN MILITARY MEDICINE
MICHIGAN STATE UNIVERSITY MIDWEST REGION 535 CHESTNUT ROAD EAST LANSING, MI 48824	38-6005984	501(C)(3)	5,000.	0. N/A	N/A		ELI BROAD COLLEGE OF BUSINESS
MICROGRANTS 1035 EAST FRANKLIN AVE MINNEAPOLIS, MN 55404	20-4092394	501(C)(3)	5,000.	0. N/A	N/A		GENERAL OPERATIONS
MINNESOTA ADULT & TEEN CHALLENGE, INC. - 1619 PORTLAND AVENUE SOUTH - MINNEAPOLIS, MN 55404	41-1517351	501(C)(3)	23,000.	0. N/A	N/A		GENERAL OPERATIONS

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MINNESOTA CENTER FOR BOOK ARTS 1011 WASHINGTON AVE S, FIRST FLOOR MINNEAPOLIS, MN 55415	41-1455905	501(C)(3)	7,000.	0. N/A		N/A	GENERAL SUPPORT
MINNESOTA LANDSCAPE ARBORETUM DEVELOPMENT OFFICE 3675 ARBORETUM DR CHASKA, MN 55318	23-7081057	501(C)(3)	28,000.	0. N/A		N/A	CAPITAL FUND AND ANNUAL FUND
MINNESOTA MUSEUM OF AMERICAN ART 141 E. 4TH STREET SUITE 101 SAINT PAUL, MN 55101	41-0726138	501(C)(3)	15,500.	0. N/A		N/A	ANNUAL GIFT
MISSIONARIES OF AFRICA 1622 - 21ST STREET NW WASHINGTON, DC 20009	53-0219725	501(C)(3)	12,116.	0. N/A		N/A	GENERAL SUPPORT
MISSIONARY SISTERS OF ST. PETER CLAVER - 265 CENTURY AVENUE - WOODBURY, MN 55125-1199	41-0718378	501(C)(3)	5,500.	0. N/A		N/A	CURRENT NEEDS
MOST HOLY REDEEMER SCHOOL 205 VINE AVENUE WEST MONTGOMERY, MN 56069	41-0747173	501(C)(3)	13,000.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
MURRAY INSTITUTE UNIVERSITY OF ST. THOMAS MOH 217, 1000 LASALLE AVE. - MINNEAPOLIS, MN 55403	41-0693970	501(C)(3)	280,940.	0. N/A		N/A	SCHOLARSHIPS FOR CATHOLIC SCHOOL TEACHERS
NATIONAL ASSOCIATION OF CHILDREN OF ALCOHOLIC - 10920 CONNECTICUT AVE SUITE 100 - KENSINGTON, MD 20895	94-2865311	501(C)(3)	12,500.	0. N/A		N/A	GENERAL SUPPORT
NATIONAL RETIREMENT FUND FOR RELIGIOUS - 3211 - 4TH STREET NE - WASHINGTON, DC 20017	53-0196617	501(C)(3)	19,000.	0. N/A		N/A	GENERAL SUPPORT

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIVITY OF MARY SCHOOL 9901 E. BLOOMINGTON FRWY. BLOOMINGTON, MN 55420	41-0735359	501(C)(3)	8,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
NATIVITY OF OUR LORD CATHOLIC CHURCH - 1900 WELLESLEY AVE - ST. PAUL, MN 55105	41-0693956	501(C)(3)	34,100.	0. N/A		N/A	ONGOING SUPPORT
NET MINISTRIES 110 CRUSADER AVENUE WEST WEST ST. PAUL, MN 55118	41-1637054	501(C)(3)	195,050.	0. N/A		N/A	GENERAL SUPPORT
NET MINISTRIES 110 CRUSADER AVENUE WEST WEST ST. PAUL, MN 55118	41-1637054	501(C)(3)	6,000.	0. N/A		N/A	PROVIDING SUPPORT FOR THE CORPORATION'S GENERAL OPERATION PURPOSES
NORTH PLATTE CATHOLIC SCHOOLS 500 SOUTH SILBER AVENUE NORTH PLATTE, NE 69101	47-0488300	501(C)(3)	76,150.	0. N/A		N/A	GENERAL SUPPORT
NORTHEAST MINNEAPOLIS ARTS ASSOCIATION - 2205 CALIFORNIA ST. NE SUITE 118 - MINNEAPOLIS, MN 55418	41-1890854	501(C)(3)	10,000.	0. N/A		N/A	GENERAL SUPPORT
NORTHEASTERN MINNESOTANS FOR WILDERNESS - PO BOX 625 - ELY, MN 55731	01-0743018	501(C)(3)	6,250.	0. N/A		N/A	CAPITAL CAMPAIGN
NOTRE DAME ACADEMY 13505 EXCELSIOR BLVD MINNETONKA, MN 55345	46-1333219	501(C)(3)	10,000.	0. N/A		N/A	DONATION
OPPORTUNITY FOR ALL KIDS FOUNDATION (OAK) - 525 PARK STREET SUITE 210 - SAINT PAUL, MN 55103	47-5201351	501(C)(3)	5,000.	0. N/A		N/A	AS NEEDED

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OPPORTUNITY INTERNATIONAL 550 WEST VAN BUREN #200 CHICAGO, IL 60607	54-0907624	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL FUND
OUR LADY OF PEACE HOME 2076 ST. ANTHONY AVENUE ST. PAUL, MN 55104	41-1306947	501(C)(3)	17,607.	0.	N/A	N/A	37TH ANNUAL FUNDRAISER
OUR LADY OF THE LAKE SCHOOL 2411 COMMERCE BLVD. MOUND, MN 55364	41-0718339	501(C)(3)	10,000.	0.	N/A	N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
PACER CENTER 8161 NORMANDELE BLVD BLOOMINGTON, MN 55437	41-1306304	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL OPERATIONS
PAGE EDUCATION FOUNDATION 901 N 3RD STREET, SUITE 355 MINNEAPOLIS, MN 55401	36-3605013	501(C)(3)	100,000.	0.	N/A	N/A	GENERAL SUPPORT
PARISH OF SAINTS JOACHIM AND ANNE 2700 17TH AVE EAST SHAKOPEE, MN 55379	41-0747179	501(C)(3)	15,400.	0.	N/A	N/A	THE GENERAL NEEDS OF THE PARISH OF SAINTS JOACHIM AND ANNE
PAX CHRISTI CATHOLIC COMMUNITY 12100 PIONEER TRAIL EDEN PRAIRIE, MN 55347	41-1223312	501(C)(3)	27,000.	0.	N/A	N/A	ENDOWMENT FUND 51507A
POPE LEO XIII INSTITUTE 8112 WEST BLUEMOUND ROAD, SUITE 103 MILWAUKEE, WI 53213	45-5349929	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
PREGNANCY RESOURCE CENTER OF CAMBRIDGE - 140 BUCHANAN STREET NO SUITE 138 - CAMBRIDGE, MN 55008	41-1757917	501(C)(3)	11,000.	0.	N/A	N/A	GENERAL

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PRESENTATION OF THE BLESSED VIRGIN MARY SCHOOL - 1695 KENNARD ST. - MAPLEWOOD, MN 55109	41-0789390	501(C)(3)	15,540.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
PRO ECCLESIA SANCTA C/O CHURCH OF ST. MARK 2001 DAYTON SAINT PAUL, MN 55104	30-0371107	501(C)(3)	10,000.	0. N/A		N/A	TO CONTINUE YOUR BEAUTIFUL MISSION!
PROLIFE ACROSS AMERICA P.O. BOX 18669 MINNEAPOLIS, MN 55418	41-1654040	501(C)(3)	7,100.	0. N/A		N/A	GENERAL NEEDS
PROVIDENCE ACADEMY 15100 SCHMIDT LAKE ROAD PLYMOUTH, MN 55446	41-1883866	501(C)(3)	20,070.	0. N/A		N/A	ANNUAL FUND
PROVINCE OF OUR LADY OF CONSOLATION - DEVELOPMENT OFFICE 103 ST. FRANCIS BLVD. - MOUNT ST. FRANCIS, IN 47146	35-6019627	501(C)(3)	12,000.	0. N/A		N/A	NEEDS FOR MISSION OF BROTHER TONY DROLL
REDEEMER LUTHERAN SCHOOL 115 WEST WAYZATA BLVD. WAYZATA, MN 55391	41-0874244	501(C)(3)	5,000.	0. N/A		N/A	UNRESTRICTED; IN LOVING MEMORY OF IRENE CLAUDIA KROLL.
REISER RELIEF INC. P.O. BOX 48096 COON RAPIDS, MN 55448	87-0778133	501(C)(3)	6,765.	0. N/A		N/A	KTWT DONATION
RELEVANT RADIO, WI P.O. BOX 10707 GREEN BAY, WI 54307-0707	39-2003057	501(C)(3)	29,250.	0. N/A		N/A	CHRIST BRINGS HOPE BENEFIT
RISEN CHRIST CATHOLIC SCHOOL 1120 EAST 37TH STREET MINNEAPOLIS, MN 55407	41-1748146	501(C)(3)	114,450.	0. N/A		N/A	TUITION ASSISTANCE

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SACRED HEART HAITI MISSION FOUNDATION - 3304 LAKE STREET NW - ROCHESTER, MN 55901	41-2014439	501(C)(3)	18,700.	0. N/A		N/A	GENERAL SUPPORT
SACRED HEART SCHOOL 200 - THIRD STREET NW EAST GRAND FORKS, MN 56721	41-0773774	501(C)(3)	20,000.	0. N/A		N/A	TUITION ASSISTANCE AND OTHER NEEDS
SACRED HEART SCHOOL 4050 HUBBARD AVE N ROBBINSDALE, MN 55422	41-0834785	501(C)(3)	7,000.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
SAINT AGNES SCHOOL 530 LAFOND AVENUE ST. PAUL, MN 55103	41-0694737	501(C)(3)	73,955.	0. N/A		N/A	GENERAL SUPPORT
SAINT JOHN PAUL II CATHOLIC PREP SCHOOL - 1630 NE 4TH STREET - MINNEAPOLIS, MN 55413	41-0953697	501(C)(3)	60,400.	0. N/A		N/A	TUITION ASSISTANCE
SAINT JOHN SCHOOL OF LITTLE CANADA 2621 MCMEYER ROAD LITTLE CANADA, MN 55117	41-0781158	501(C)(3)	9,100.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
SAINT JOHN VIANNEY SEMINARY 2115 SUMMIT AVENUE, MAIL #5024 ST. PAUL, MN 55105	41-0943747	501(C)(3)	416,410.	0. N/A		N/A	GENERAL DONATION
SAINT PAUL SEMINARY SCHOOL OF DIVINITY - RECTOR'S OFFICE 2260 SUMMIT AVE - ST. PAUL, MN 55105	41-0693969	501(C)(3)	266,508.	0. N/A		N/A	DONATION GIVEN AFTER ATTENDING THE RECTOR'S DINNER
SAINT PAUL SEMINARY SCHOOL OF DIVINITY - RECTOR'S OFFICE 2260 SUMMIT AVE - ST. PAUL, MN 55105	41-0693969	501(C)(3)	36,900.	0. N/A		N/A	FOR THE EDUCATION OF YOUNG MEN STUDYING FOR THE PRIESTHOOD FROM THE ARCHDIOCESE OF SAINT PAUL

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SAINT PAUL'S OUTREACH 5814 BLACKSHIRE PATH INVER GROVE HEIGHTS, MN 55076	41-1621192	501(C)(3)	67,700.	0. N/A			GENERAL SUPPORT
SALESIAN MISSIONS 2 LEFEVRE LANE P.O. BOX 30 NEW ROCHELLE, NY 10802	80-0522035	501(C)(3)	12,116.	0. N/A			GENERAL SUPPORT
SALVATION ARMY NORTHERN DIVISION 2445 PRIOR AVENUE ROSEVILLE, MN 55113	41-0598597	501(C)(3)	16,341.	0. N/A			GENERAL SUPPORT
SCHOOL SISTERS OF NOTRE DAME 170 GOOD COUNSEL DRIVE MANKATO, MN 56001	41-0693976	501(C)(3)	52,736.	0. N/A			GENERAL OPERATING NEEDS
SCIENCE MUSEUM OF MINNESOTA 120 WEST KELLOGG BOULEVARD ST. PAUL, MN 55102-1208	41-0706172	501(C)(3)	8,000.	0. N/A			CAPITAL CAMPAIGN
SECOND HARVEST HEARTLAND 1140 GERVAIS AVE ST. PAUL, MN 55109	23-7417654	501(C)(3)	16,366.	0. N/A			THE FURTHERANCE OF YOUR CHARITABLE PURPOSE
SECULAR INSTITUTE OF SCHOENSTATT SISTERS OF M - W284 N404 CHERRY LANE - WAUKESHA, WI 53188	39-6068703	501(C)(3)	9,900.	0. N/A			FURTHERANCE OF ITS CHARITABLE PURPOSES
SERVANTS OF THE LORD AND THE VIRGIN OF MATAR - PROVINCIAL HOUSE IMMACULATE CONCEPTION 28 15TH STREET SE - WASHINGTON, DC 20003	52-2151379	501(C)(3)	15,000.	0. N/A			GENERAL SUPPORT
SHAKOPEE AREA CATHOLIC SCHOOL 2700 - 17TH AVE. E. SHAKOPEE, MN 55379	41-0961357	501(C)(3)	36,500.	0. N/A			VARIOUS, SEE GRANT LETTER

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Part II	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	SHARING AND CARING HANDS 525 NORTH 7TH STREET MINNEAPOLIS, MN 55405	36-3412619	501(C)(3)	36,696.	0. N/A		N/A	IN FURTHERANCE OF CHARITABLE PURPOSES
	SHRINE OF OUR LADY OF GUADALUPE 5250 JUSTIN ROAD LA CROSSE, WI 54601	39-1982320	501(C)(3)	9,000.	0. N/A		N/A	AS NEEDED
	SISTERS OF ST. JOSEPH OF CARONDELET MINISTRIES - 1884 RANDOLPH AVENUE - ST. PAUL, MN 55105	41-1765361	501(C)(3)	34,850.	0. N/A		N/A	GENERAL SUPPORT
	SISTERS OF THE GOOD SHEPHERD 5362 NOLAN PARKWAY OAK PARK HEIGHTS, MN 55082	43-1867473	501(C)(3)	6,500.	0. N/A		N/A	VIETNAMESE CHILDREN'S FUND
	SOARING EAGLE P.O. DRAWER 879 BILLINGS, MT 59103-0879	84-1409114	501(C)(3)	38,075.	0. N/A		N/A	GENERAL SUPPORT
	ST. ALPHONSUS SCHOOL 7031 HALIFAX AVENUE NORTH BROOKLYN CENTER, MN 55429	41-0846441	501(C)(3)	16,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
	ST. ANNE'S SCHOOL 511 4TH STREET NO. LE SUEUR, MN 56058	41-0724077	501(C)(3)	16,320.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
	ST. BARTHOLOMEW CATHOLIC FAITH COMMUNITY - 630 WAYZATA BOULEVARD EAST - WAYZATA, MN 55391	41-0711478	501(C)(3)	16,500.	0. N/A		N/A	ANNUAL GIVING
	ST. CATHERINE UNIVERSITY OFFICE OF DEVELOPMENT, MAIL #F-12 2004 RANDOLPH AVENUE - ST. PAUL, MN 55105	41-0695509	501(C)(3)	107,900.	0. N/A		N/A	MARY ELLEN PRIEBE CONZENIUS SCHOLARSHIP FUND

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ST. CHARLES BORROMEO SCHOOL 2727 STINSON BLVD NE ST. ANTHONY, MN 55418	41-0706912	501(C)(3)	6,000.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. CHRISTOPHER INN-GRAYMOOR PO BOX 150 GARRISON, NY 10524	13-3668321	501(C)(3)	11,000.	0. N/A		N/A	GENERAL SUPPORT
ST. CROIX CATHOLIC SCHOOL 621 THIRD STREET SOUTH STILLWATER, MN 55082	41-1731931	501(C)(3)	15,425.	0. N/A		N/A	GENERAL NEEDS
ST. CROIX CATHOLIC SCHOOL 621 THIRD STREET SOUTH STILLWATER, MN 55082	41-1731931	501(C)(3)	38,300.	0. N/A		N/A	SUPPORT OF THE FINANCIAL NEEDS OF ST. CROIX CATHOLIC SCHOOL
ST. DOMINIC SCHOOL 216 NORTH SPRING STREET NORTHELD, MN 55057	41-0711501	501(C)(3)	11,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. EDWARD'S CATHOLIC CHURCH P.O. BOX 38 LONGVILLE, MN 56655	41-1314934	501(C)(3)	10,000.	0. N/A		N/A	GENERAL FUND, UCA FUND, SEMINARY SUPPORT
ST. ELIZABETH ANN SETON SCHOOL 600 TYLER STREET HASTINGS, MN 55033	41-1587210	501(C)(3)	9,000.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. GABRIEL THE ARCHANGEL CATHOLIC CHURCH - 6 INTERLACHEN ROAD - HOPKINS, MN 55343	41-0729969	501(C)(3)	11,500.	0. N/A		N/A	GENERAL SUPPORT
ST. GABRIEL THE ARCHANGEL CATHOLIC CHURCH - 6 INTERLACHEN ROAD - HOPKINS, MN 55343	41-0729969	501(C)(3)	25,300.	0. N/A		N/A	GENERAL SUPPORT

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ST. HELENA SCHOOL 3200 E. 44TH STREET MINNEAPOLIS, MN 55406	42-0718330	501(C)(3)	21,700.	0. N/A			TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. JEROME SCHOOL 384 ROSELAWN AVENUE EAST MAPLEWOOD, MN 55117	41-0773779	501(C)(3)	14,500.	0. N/A			TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. JOHN THE BAPTIST SCHOOL 111 MAIN STREET WEST VERMILION, MN 55085	41-0826791	501(C)(3)	9,500.	0. N/A			TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. JOHN THE BAPTIST SCHOOL 215 BROADWAY STREET NORTH JORDAN, MN 55352	41-0713019	501(C)(3)	9,000.	0. N/A			TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. JOHN THE EVANGELIST CHURCH 4230 ST. JOHNS AVENUE DULUTH, MN 55803	41-0854765	501(C)(3)	10,900.	0. N/A			SUPPORT TUITION ASSISTANCE FOR THE CATHOLIC SCHOOL ASSOCIATED WITH THE
ST. JOHN'S UNIVERSITY 37 SOUTH COLLEGE AVENUE 216 MAIN BU ST. JOSEPH, MN 56374	45-3656162	501(C)(3)	152,500.	0. N/A			MCCARTHY CENTER - DC PROGRAM SCHOLARSHIPS
ST. JOSEPH CATHOLIC SCHOOL 315 SW 21ST STREET P.O. BOX 110 GRAND RAPIDS, MN 55744	41-0729968	501(C)(3)	7,700.	0. N/A			TUITION ASSISTANCE AND GENERAL SUPPORT
ST. JUDE OF THE LAKE SCHOOL 600 MAHTOMEDI AVE MAHTOMEDI, MN 55115-1641	41-0764101	501(C)(3)	12,750.	0. N/A			ALUMNI FUND
ST. LABRE INDIAN SCHOOL 1000 TONGUE RIVER ROAD ASHLAND, MT 59004	81-0244542	501(C)(3)	40,805.	0. N/A			GENERAL SUPPORT

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ST. LAWRENCE-NEWMAN UNIVERSITY PARISH - C/O MS. ROCHELLE SHIRK 1203 - 5TH STREET S.E. - MINNEAPOLIS, MN 55414	41-0702598	501(C)(3)	7,300.	0. N/A		N/A	CHRISTIAN STUDIES COURSE AT UNIVERSITY OF MN
ST. MARK SCHOOL 912 COEUR D'ALENE AVENUE VENICE, CA 90291	95-1782336	501(C)(3)	5,000.	0. N/A		N/A	EDUCATION OF CHILDREN AT ST. MARK SCHOOL
ST. MARY'S HEALTH CLINICS/CARONDELET LIFECARE MINISTRIES - 1884 RANDOLPH AVENUE - ST. PAUL, MN 55105	41-1760632	501(C)(3)	19,850.	0. N/A		N/A	GENERAL SUPPORT
ST. MATTHEW - EDUCATION 490 HALL AVENUE SAINT PAUL, MN 55104	41-0707559	501(C)(3)	83,800.	0. N/A		N/A	TO BE USED FOR THE PRIMARY SCHOOL PROGRAMS
ST. MAXIMILIAN KOLBE CATHOLIC SCHOOL - 235 SOUTH 2ND STREET P.O. BOX 470 - DELANO, MN 55328	41-0726145	501(C)(3)	10,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. MICHAEL'S FOUNDATION 900 ILLINOIS AVE STEVENS POINT, WI 54481	39-1657410	501(C)(3)	6,475.	0. N/A		N/A	GENERAL SUPPORT
ST. OLAF CATHOLIC CHURCH 215 SOUTH 8TH STREET MINNEAPOLIS, MN 55402	41-0754589	501(C)(3)	14,223.	0. N/A		N/A	AS NEEDED FOR MINISTRY
ST. OLAF CATHOLIC CHURCH 215 SOUTH 8TH STREET MINNEAPOLIS, MN 55402	41-0754589	501(C)(3)	37,700.	0. N/A		N/A	GENERAL SUPPORT
ST. PASCAL BAYLON SCHOOL 1757 CONWAY STREET ST. PAUL, MN 55106	41-0704479	501(C)(3)	32,000.	0. N/A		N/A	WEB-BASED CONTENT MANAGEMENT SYSTEM

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ST. PAUL CHAMBER ORCHESTRA SOCIETY 408 ST. PETER STREET SUITE #300 ST. PAUL, MN 55102	41-0829498	501(C)(3)	17,000.	0. N/A	N/A		CAPITAL CAMPAIGN
ST. PAUL'S MONASTERY SISTERS OF ST. BENEDICT 2675 BENET ST. PAUL, MN 55109	41-0724050	501(C)(3)	5,000.	0. N/A	N/A		CHILD CARE CENTER AND HOME/SHELTER FOR WOMEN
ST. PETER CLAVER'S SCHOOL 1060 WEST CENTRAL AVENUE ST. PAUL, MN 55104	41-0824943	501(C)(3)	126,080.	0. N/A	N/A		CHROMEBOOKS AND CLASSROOM PROJECTORS
ST. PETER SCHOOL 2620 MARGARET ST N NORTH ST. PAUL, MN 55109	41-0830644	501(C)(3)	11,875.	0. N/A	N/A		TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. RAPHAEL SCHOOL 160 ST. JOSEPH STREET SANTA BARBARA, CA 93111	95-2263332	501(C)(3)	13,500.	0. N/A	N/A		ANNUAL FUND TO SUPPORT SCHOOL PROGRAMS
ST. STEPHEN SCHOOL 506 JACKSON STREET ANOKA, MN 55303	41-0713861	501(C)(3)	9,500.	0. N/A	N/A		TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. THERESE FOUNDATION 1660 SO. HWY, 100, SUITE #103 ST. LOUIS PARK, MN 55416	41-1704381	501(C)(3)	8,100.	0. N/A	N/A		PROGRAMS, SERVICES AND GENERAL NEEDS OF THE FACILITIES SUPPORTED BY ST. THERESE FOUNDATION
ST. THOMAS ACADEMY 949 MENDOTA HEIGHTS ROAD MENDOTA HEIGHTS, MN 55120	41-6045110	501(C)(3)	40,101.	0. N/A	N/A		MEMORIAL FOR FATHER JOHN PILACZYNSKI
ST. THOMAS AQUINAS SCHOOL 810 - 5TH STREET INTERNATIONAL FALLS, MN 56649	41-0799786	501(C)(3)	49,500.	0. N/A	N/A		TUITION ASSISTANCE

Schedule I (Form 990)

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

41-1744184 Page 1

Schedule I (Form 990)

**Part II** Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. TIMOTHY GRADE SCHOOL 241 STAR STREET E BOX 281 MAPLE LAKE, MN 55358-0281	41-0727399	501(C)(3)	13,500.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
ST. WENCESLAUS SCHOOL 227 EAST MAIN STREET NEW PRAGUE, MN 56071	41-0695519	501(C)(3)	8,000.	0. N/A		N/A	TUITION ASSISTANCE 2017-2018 SCHOOL YEAR
SUMMIT ACADEMY OIC 935 OLSON MEMORIAL HIGHWAY MINNEAPOLIS, MN 55405	41-0908458	501(C)(3)	5,000.	0. N/A		N/A	GENERAL SUPPORT
THE ARTS PARTNERSHIP ORDWAY CENTER 345 WASHINGTON STREET SAINT PAUL, MN 55102	26-2507419	501(C)(3)	21,583.	0. N/A		N/A	ARTS PARTNERSHIP GIFT FOR ORDWAY CONCERT HALL
THE BASILICA LANDMARK THE BASILICA OF SAINT MARY P.O. BOX MINNEAPOLIS, MN 55405	41-1754864	501(C)(3)	180,000.	0. N/A		N/A	GENERAL OPERATIONS
THE FAMILY PLACE 244 10TH STREET EAST ST. PAUL, MN 55101	41-2003333	501(C)(3)	9,000.	0. N/A		N/A	THE GOING HOME LIFE SKILLS PROGRAM
THE INSTITUTE FOR PRIESTLY FORMATION - 2500 CALIFORNIA PLAZA - OMAHA, NE 68178	52-1907182	501(C)(3)	13,000.	0. N/A		N/A	GENERAL PURPOSE
THE LABOURE SOCIETY 1365 CORPORATE CENTER CURVE SUITE EAGAN, MN 55121	41-2001751	501(C)(3)	51,250.	0. N/A		N/A	GENERAL SUPPORT
THE LOPPET FOUNDATION 1301 THEODORE WIRTH PARKWAY MINNEAPOLIS, MN 55422	41-1753882	501(C)(3)	10,000.	0. N/A		N/A	THE TRAILHEAD CAPITAL CAMPAIGN

Schedule I (Form 990)

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

41-1744184 Page 1

Schedule I (Form 990)

**Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE METRO CISM TEAM 7809 SOUTHTOWN CENTER, #174 BLOOMINGTON, MN 55431	41-1812571	501(C)(3)	6,475.	0. N/A		N/A	GENERAL SUPPORT
THE NATURE CONSERVANCY 1101 WEST RIVER PARKWAY SUITE #200 MINNEAPOLIS, MN 55415	53-0242652	501(C)(3)	6,500.	0. N/A		N/A	ANNUAL GIFT
THE PHILOMENA HOUSE P.O. BOX 130141 ROSEVILLE, MN 55113	27-4642602	501(C)(3)	8,000.	0. N/A		N/A	YOUR GREATEST NEEDS
THERESA LIVING CENTER 917 EAST JESSAMINE AVE ST. PAUL, MN 55106	36-3534647	501(C)(3)	14,325.	0. N/A		N/A	CORE SUPPORT
TLC OPTIONS FOR WOMEN 2600 EAGAN WOODS DRIVE, SUITE 110 EAGAN, MN 55121	23-7401466	501(C)(3)	16,600.	0. N/A		N/A	GENERAL FUND SUPPORT
TOTINO-GRACE HIGH SCHOOL 1350 GARDENA AVENUE NE FRIDLEY, MN 55432	41-0649228	501(C)(3)	10,900.	0. N/A		N/A	GENERAL
TREEHOUSE 5666 LINCOLN DRIVE SUITE 201 EDINA, MN 55436	36-3287099	501(C)(3)	7,500.	0. N/A		N/A	GENERAL OPERATING PURPOSES.
TWIN CITIES RETROUVAILLE 2909 40TH AVE SOUTH MINNEAPOLIS, MN 55406	41-1694715	501(C)(3)	13,626.	0. N/A		N/A	RETROUVAILLE PROGRAM
UNION GOSPEL MISSION 77 NINTH STREET EAST ST. PAUL, MN 55101	41-0705847	501(C)(3)	6,948.	0. N/A		N/A	GENERAL SUPPORT

Schedule I (Form 990)

**CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

41-1744184 Page 1

Schedule I (Form 990) OF MINNESOTA  
Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER TWIN CITIES 404 SOUTH EIGHTH STREET MINNEAPOLIS, MN 55404	41-1973442	501(C)(3)	5,850.	0. N/A	N/A		GENERAL
UNIVERSITY OF MINNESOTA FOUNDATION MCNAMARA ALUMNI CENTER 200 OAK STREET SE SUITE 500 - MINNEAPOLIS, MN 55455	41-6042488	501(C)(3)	42,325.	0. N/A	N/A		DONATION
UNIVERSITY OF NOTRE DAME SUPPORTING ND DEVELOPMENT 1100 GRAC NOTRE DAME, IN 46556	35-0868188	501(C)(3)	290,300.	0. N/A	N/A		EDUCATION
URBAN VENTURES 2924 FOURTH AVE SO MINNEAPOLIS, MN 55408-2410	36-3558710	501(C)(3)	50,700.	0. N/A	N/A		GENERAL DONATION
VETERANS ON THE LAKE RESORT 161 FERNBERG ROAD ELY, MN 55731	41-1439548	501(C)(3)	5,000.	0. N/A	N/A		GENERAL PURPOSE
VISITATION SCHOOL 2455 VISITATION DRIVE MENDOTA HEIGHTS, MN 55120	41-0693957	501(C)(3)	55,218.	0. N/A	N/A		GENERAL SUPPORT
VOCALLESSENCE 1900 NICOLLET AVENUE MINNEAPOLIS, MN 55403	41-1363849	501(C)(3)	9,000.	0. N/A	N/A		EDUCATION
WAKOTA LIFE CARE CENTER 1140 SOUTH ROBERT WEST ST. PAUL, MN 55118	41-1279340	501(C)(3)	79,100.	0. N/A	N/A		GENERAL SUPPORT
WESTMINSTER COUNSELING CENTER 1200 MARQUETTE AVENUE SOUTH MINNEAPOLIS, MN 55403	41-1723572	501(C)(3)	5,850.	0. N/A	N/A		CORE SUPPORT

Schedule I (Form 990)

Schedule I (Form 990)

41-1744184

Continuation of Form 990	Part II	Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)
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[illegible]

Schedule I (Form 990)

## Schedule I (Form 990) (2016)

**Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

[illegible]

**Part IV**  
**Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

## PART I, LINE 2:

WHEN GRANTS ARE PROVIDED FOR A SPECIFIC PURPOSE, AN OUTCOME REPORT IS SENT TO EACH GRANTEE, REQUESTING THAT THE GRANTEE COMMUNICATE HOW THE GRANT WAS USED. HOWEVER, IF THE GRANT IS UNRESTRICTED OR FOR GENERAL USE, AN OUTCOME REPORT IS NOT REQUESTED FROM THE GRANTEE.

## PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: CHURCH OF ST. CECILIA

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORTING THE GENERAL NEEDS OF ST.



**Part IV** Supplemental Information

CECILIA, WITH PRIORITY GIVEN TO ONGOING REPAIR AND MAINTENANCE

NAME OF ORGANIZATION OR GOVERNMENT: CHURCH OF ST. HUBERT

(H) PURPOSE OF GRANT OR ASSISTANCE: MAINTAINING, IMPROVING AND  
SUPPORTING THE RELIGIOUS AND EDUCATIONAL PROGRAMS AND ACTIVITIES OF THE  
PARISH

NAME OF ORGANIZATION OR GOVERNMENT: CRETIN-DERHAM HALL HIGH SCHOOL

(H) PURPOSE OF GRANT OR ASSISTANCE: PAYMENTS OF SALARIES OF INSTRUCTORS  
OF CRETIN HIGH SCHOOL AND OPERATING EXPENSES OF THE HIGH SCHOOL

NAME OF ORGANIZATION OR GOVERNMENT:

SAINT PAUL SEMINARY SCHOOL OF DIVINITY

(H) PURPOSE OF GRANT OR ASSISTANCE: FOR THE EDUCATION OF YOUNG MEN  
STUDYING FOR THE PRIESTHOOD FROM THE ARCHDIOCESE OF SAINT PAUL AND  
MINNEAPOLIS

NAME OF ORGANIZATION OR GOVERNMENT: ST. JOHN THE EVANGELIST CHURCH

(H) PURPOSE OF GRANT OR ASSISTANCE: SUPPORT TUITION ASSISTANCE FOR THE  
CATHOLIC SCHOOL ASSOCIATED WITH THE CHURCH

NAME OF ORGANIZATION OR GOVERNMENT: ST. THERESE FOUNDATION

(H) PURPOSE OF GRANT OR ASSISTANCE: PROGRAMS, SERVICES AND GENERAL NEEDS  
OF THE FACILITIES SUPPORTED BY ST. THERESE FOUNDATION INC.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest  
Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

▶ **Information about Schedule J (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

OMB No. 1545-0047

**2016**

**Open to Public  
Inspection**

Name of the organization **CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number  
**41-1744184**

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input type="checkbox"/> Housing allowance or residence for personal use    |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence    |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees      |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as, maid, chauffeur, chef) |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

**2** Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

**3** Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee          | <input type="checkbox"/> Written employment contract                                |
| <input type="checkbox"/> Independent compensation consultant        | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan? **4b**
- c** Participate in, or receive payment from, an equity-based compensation arrangement? **4c**
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? **5a**
- b** Any related organization? **5b**
- If "Yes" on line 5a or 5b, describe in Part III.

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? **6a**
- b** Any related organization? **6b**
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

**8** Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2016

**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

Particulars	Amount
Director of Personnel, Massachusetts	

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

[illegible]

CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA

Schedule J (Form 990) 2016

41-1744184 Page 3

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Supplemental information area with multiple horizontal lines for text entry.

**SCHEDULE M**  
**(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2016**

Open To Public  
Inspection

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

Name of the organization **CATHOLIC COMMUNITY FOUNDATION OF MINNESOTA** Employer identification number **41-1744184**

**Part I** **Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	119	4,512,142.	STOCK MARKET QUOTES
10 Securities - Closely held stock	X	1	108,000.	APPRAISED VALUE
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ( )				
26 Other ▶ ( )				
27 Other ▶ ( )				
28 Other ▶ ( )				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** **5**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2016)

CATHOLIC COMMUNITY FOUNDATION

Schedule M (Form 990) (2016) OF MINNESOTA

41-1744184

Page 2

**Part II**

**Supplemental Information.** Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

THE FOUNDATION REPORTS THE NUMBER OF CONTRIBUTORS ON PART 1, COLUMN B.

**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](http://www.irs.gov/form990).

OMB No. 1545-0047

**2016**

Open to Public  
Inspection

Name of the organization

CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA

Employer identification number  
41-1744184

FORM 990, PART VI, SECTION A, LINE 1:

THE EXECUTIVE COMMITTEE INCLUDES THE VICE CHAIRPERSON OF THE BOARD OF  
DIRECTORS AND ONE OR MORE OTHER DIRECTORS WITH VOTING RIGHTS APPOINTED BY  
THE BOARD OF DIRECTORS. EXCEPT AS OTHERWISE LIMITED BY THE BOARD OF  
DIRECTORS FROM TIME TO TIME, THE EXECUTIVE COMMITTEE SHALL HAVE ALL THE  
POWERS AND AUTHORITY OF THE BOARD OF DIRECTORS OF THIS FOUNDATION DURING  
THE INTERVALS BETWEEN MEETINGS OF THE BOARD OF DIRECTORS, SUBJECT ALWAYS TO  
THE DIRECTION AND CONTROL OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 WAS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM AND REVIEWED BY  
STAFF AND THE FINANCE COMMITTEE. AFTER REVIEW, THE FINANCE COMMITTEE  
RECOMMENDED THE FORM 990 FOR APPROVAL TO THE FULL BOARD OF DIRECTORS. THE  
BOARD OF DIRECTORS APPROVED THE FORM 990 PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH INDIVIDUAL COVERED BY THE ORGANIZATION'S CONFLICT OF INTEREST POLICY  
IS REQUIRED TO COMPLETE AN ANNUAL DISCLOSURE FORM IDENTIFYING  
RELATIONSHIPS, POSITIONS OR CIRCUMSTANCES THEY ARE INVOLVED IN THAT MIGHT  
GIVE RISE TO A CONFLICT OF INTEREST. THE POLICY IS REVIEWED BY THE BOARD OF  
DIRECTORS ONCE EVERY THREE YEARS OR MORE FREQUENTLY IF NEEDED. ANY CHANGES  
IN THE POLICY WILL BE COMMUNICATED IMMEDIATELY TO ALL RESPONSIBLE PEOPLE.

IF AN INDIVIDUAL HAS A POTENTIAL CONFLICT, THE RELATIONSHIP AND MATERIAL  
FACTS ARE DISCLOSED TO THE BOARD OR COMMITTEE FOR DETERMINATION. CONFLICTED  
INDIVIDUALS MAY NOT PARTICIPATE IN ANY DISCUSSION OR VOTE ON THE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization **CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTA**

Employer identification number  
**41-1744184**

TRANSACTION AND ARE NOT COUNTED FOR DETERMINING THE PRESENCE OF A QUORUM.  
ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE NOTED IN THE MEETING  
MINUTES.

COVERED INDIVIDUALS THAT ARE NOT MEMBERS OF THE BOARD OF DIRECTORS OR A  
COMMITTEE THEREOF WHO HAVE A POTENTIAL CONFLICT OF INTEREST WITH RESPECT TO  
A CONTRACT OR TRANSACTION ARE REQUIRED TO DISCLOSE THE CONFLICT TO THE  
BOARD CHAIR OR THE CHAIR'S DESIGNEE WHO WILL DETERMINE IF A CONFLICT  
EXISTS. THE CONFLICTED INDIVIDUAL IS REQUIRED TO REFRAIN FROM ANY ACTION  
THAT MAY AFFECT THE ORGANIZATION'S PARTICIPATION IN THE CONTRACT OR  
TRANSACTION.

FORM 990, PART VI, SECTION B, LINE 15A:

FOR THE PRESIDENT OF THE ORGANIZATION, THE EXECUTIVE COMMITTEE DETERMINES  
COMPENSATION UTILIZING COMPARABILITY DATA. THIS PROCESS IS UNDERTAKEN  
ANNUALLY. THIS PROCESS WAS LAST UNDERTAKEN DURING FISCAL YEAR 2017 FOR THE  
CURRENT PRESIDENT, ANNE CULLEN MILLER.

FOR OTHER OFFICERS, THE PRESIDENT OF CATHOLIC COMMUNITY FOUNDATION REVIEWS  
COMPARABILITY DATA WHEN DETERMINING COMPENSATION LEVELS. THE PRESIDENT THEN  
REPORTS THE RESULTS OF THIS PROCESS TO THE BOARD OF DIRECTORS. ALL OF THE  
SALARY AND BENEFIT LEVELS ARE APPROVED WITHIN THE BUDGETARY PROCESS WITH  
THE BUDGET BEING APPROVED BY THE BOARD OF DIRECTORS. THIS PROCESS WAS LAST  
UNDERTAKEN DURING FISCAL YEAR 2017 FOR ALL STAFF AS A PART OF THE BUDGETARY  
PROCESS.

FORM 990, PART VI, SECTION C, LINE 19:

THE FOUNDATION'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE



Name of the organization CATHOLIC COMMUNITY FOUNDATION  
OF MINNESOTAEmployer identification number  
41-1744184

AVAILABLE UPON REQUEST. THE FINANCIAL STATEMENTS ARE AVAILABLE ON THE  
FOUNDATION'S WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

GAIN IN VALUE OF SPLIT-INTEREST AGREEMENTS 159,850.

EXCESS CONTRIBUTIONS OVER GRANTS, BENEFICIAL ENDOWMENTS

HELD FOR OTHERS -3,321,978.

TOTAL TO FORM 990, PART XI, LINE 9 -3,162,128.



**Identification of Related Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related

## Part III

[illegible]

Part IV	Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

[illegible]

**Part V** Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

**Note:** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

**1** During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
<b>a</b> Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to related organization(s)		X
<b>c</b> Gift, grant, or capital contribution from related organization(s)		X
<b>d</b> Loans or loan guarantees to or for related organization(s)		X
<b>e</b> Loans or loan guarantees by related organization(s)		X
<b>f</b> Dividends from related organization(s)		X
<b>g</b> Sale of assets to related organization(s)		X
<b>h</b> Purchase of assets from related organization(s)		X
<b>i</b> Exchange of assets with related organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s)		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)		X
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)		X
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
<b>o</b> Sharing of paid employees with related organization(s)		X
<b>p</b> Reimbursement paid to related organization(s) for expenses		X
<b>q</b> Reimbursement paid by related organization(s) for expenses		X
<b>r</b> Other transfer of cash or property to related organization(s)		X
<b>s</b> Other transfer of cash or property from related organization(s)		X

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			

**Part VI** **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

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**Part VII** Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

**PART IV, IDENTIFICATION OF RELATED ORGANIZATIONS TAXABLE AS CORP OR TRUST:**

NAME OF RELATED ORGANIZATION:

CHARITABLE REMAINDER TRUSTS (20)

DIRECT CONTROLLING ENTITY: CATHOLIC COMMUNITY FOUNDATION OF MINNESOTA