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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 black lung benefit trust or private foundation)

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization
CATHOLIC CHARITIES DIOCESE OF WINONA

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
111 MARKET STREET No 2

City or town, state or country, and ZIP + 4
WINONA, MN 55987

D Employer identification number
41-0721636

E Telephone number
(507) 454-2270

G Gross receipts $ 2,173,017

F Name and address of principal officer
Robert Tereba
111 MARKET STREET No 2
WINONA, MN 55987

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) **Are all affiliates included?** ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶ 0928

I Tax-exempt status ☑ 501(c) (3) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ www ccwinona org

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1947

M State of legal domicile MN

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
The agency centralizes all charitable activities of the Roman Catholic Church for the Diocese of Winona The agency has various programs to provide various types of assistance to individuals in the Diocese

2 Check this box ▶☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	19
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	19
5	Total number of employees (Part V, line 2a)	5	41
6	Total number of volunteers (estimate if necessary)	6	2,000
7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,954,303	1,765,844
	9	Program service revenue (Part VIII, line 2g)	346,517	386,889
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	21,436	10,284
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	520	9,475
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,322,776	2,172,492
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	142,880	195,436
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,540,486	1,521,884
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶42,300		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	525,983	458,800
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	2,209,349	2,176,120
	19	Revenue less expenses Subtract line 18 from line 12	113,427	-3,628

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	1,488,038	1,518,135
	21	Total liabilities (Part X, line 26)	270,889	261,618
	22	Net assets or fund balances Subtract line 21 from line 20	1,217,149	1,256,517

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

Sign Here

****** | 2010-11-11
Signature of officer | Date

Robert Tereba Executive Director
Type or print name and title

Paid Preparer's Use Only

Preparer's signature ▶ Lynda S Rickoff | Date 2010-10-24 | Check if self-empolyed ▶ ☐ | Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4 ▶ Russell & Associates LLC
111 Riverfront Suite 401
Winona, MN 55987

EIN ▶

Phone no ▶ (507) 452-3100

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

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission

Believing in the sanctity of the human person and the dignity of human life, Catholic Charities of the Diocese of Winona works to serve all people and make conditions of our Minnesota heartland more fully human by calling people to minister to each other, by reaching out to the disabled, the marginalized, the alienated, and the stranger, and by laboring for the justice which the gospel of Christ demands

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 exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts 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 $ 652,202 including grants of $ 24,547) (Revenue $ 297,314)

Clinical Counseling and Pregnancy, Parenting and Adoption Program- The therapists in our Clinical Counseling program provide family, marriage, child and individual counseling services to deal with a variety of issues, such as relationship problems, family conflicts, depression, anxiety, grief/loss, stress, abortion aftermath and mental health issues Our therapists are committed to promoting growth and change, with respect for each individual's and family's life experiences Most insurance is accepted and a sliding fee is available for individuals and families who do not have insurance Our clinical staff provides Marriage Preparation programs across our serving area to help couples prepare for a marital relationship that will be a life-giving journey of love, hope, and faith Through our Project Rachel program, our clinical counselors provide post abortion counseling to deal with unresolved grief and loss The social workers in our Pregnancy, Parenting and Adoption program provide a 24 hour a day pregnancy information line, and travel to birthparents within 48 hours of the call to take away barriers to service Our social work staff is responsive, accessible and advocate for the best interests of the unborn Our social workers offer caring, confidential help to birthmothers, birthfathers and their families as they decide what is best for them and their baby We offer these services in the context of Catholic Social Teaching that supports the sanctity of human life from the moment of conception to the moment of natural death An adoption agency licensed by the State of Minnesota, Catholic Charities' Adoption program has been creating families for over 60 years across our serving area Catholic Charities offers a Domestic Infant Adoption program for couples who are looking to adopt an infant and with birthparents looking to place their child in an adoptive home Our social work staff assists in making a match between the birthparents and adoptive couples Our social work staff provides adoption home study services to couples who are adopting domestically Our social work staff also provides adoption home studies for International adoptions and designated adoptions Last year, the Clinical Counseling and the Pregnancy, Parenting, and Adoption programs served 2,712 persons Our Mother & Child Assistance Fund provided financial help to 78 birthmothers in need of shelter Our Clinical Counseling, Pregnancy, Parenting and Adoption Program services are available to all ages, ethnic/cultural backgrounds, faith and non-faith traditions and economic backgrounds

4b (Code) (Expenses $ 335,075 including grants of $) (Revenue $ 891)

Senior Services-Our Senior Services programs express that portion of our mission in which Catholic Charities is to call people to minister to each other The program that comprises our Senior Services is Common Good RSVP (Retired and Senior Volunteer Program) With the exception of the age limitation in Common Good RSVP, Senior Services are available to all regardless of race, gender, or faith tradition Common Good RSVP, operating in an 11 county area, invites adults age 55 and over to volunteer their life experiences and skills in meeting the needs of their neighbors and the community at large so that the common good is enhanced and protected Common Good RSVP volunteers provide practical help in a variety of areas including human services, education, health, and public safety Last year, over 1,500 Common Good RSVP Volunteers contributed over 160,000 hours of service

4c (Code) (Expenses $ 435,719 including grants of $ 124,491) (Revenue $ 16,050)

Refugee Resettlement Catholic Charities Refugee Resettlement Program has provided primary refugee resettlement services in Southeast Minnesota since 1975, under the direction of the United States Conference of Catholic Bishops and United States Department of State Catholic Charities Refugee Resettlement is committed to providing newcomers with services that lead to employment, self-sufficiency, and community integration The Resettlement program provides direct case management and many service provisions, including arranging stable housing, medical access, education for children and adults, and cultural/transportation/budgeting orientations, which assist families in adjusting to a new culture Individualized support and networking with appropriate services are offered in order to provide newcomers with the tools and skills needed to become vital, contributing members of our community We recruit and train volunteers to mentor and befriend newcomers as they adjust to life in the United States This past year 41 individuals volunteered to assist those who come to our community in need Generous individuals in our community, to assist refugees in starting their new lives here, donated hundreds of household items With the open hearts and helping hands of many, our program helps families regardless of race, age, gender, or faith tradition Can you imagine how difficult it is to be a parent who must uproot their family and flee their homeland because they have a well-founded fear of persecution for reasons of race, religion, nationality, political option, or membership in a particular social group? And imaginethat in hopes to protect your children, in order to give them a sense of safety and security, you are faced with the challenge of overcoming your own fears, as you try to adjust to a new culture and start your life over again Our most basic gift of freedom is the greatest aspiration for those who arrive as refugees We resettle both refugees who have U S ties (relatives or friends) who they reunify with and those who have no connections here in the United States Refugees begin their new lives with great hopes of peace replacing their lives of despair Refugee Resettlement also facilitates a Match Grant employment program that assists those who arrive with some fluency and job history in being employed between 120-180 days post arrival date In 2010, we served 9 families and 29 individuals under this program We provide training to eligible candidates regarding resume building, interviewing, financial literacy and the job search We also facilitate the State Refugee Cash Assistance Program for single adults 18 years and older through Catholic Charities Refugee Resettlement We serve approximately 25 single adults each year and oversee their interaction with employment service providers in the community We emphasize the importance of utilizing their skills and talents to contribute to their new community and we see the pride and dedication refugees hold for their new home, as they often begin to volunteer soon after arrival in order to help others in the community by using their gifts and talents In 2010, groups of refugees donated their time and efforts to various projects throughout our community, including Citizenship Day and St John's Block Party, which donates all proceeds to those less fortunate in our city They expressed their desire to return the kindness and assistance they received to others in need Currently, Catholic Charities is assisting families forced to leave their country of Iraq due to war and persecution These families have left their homes, jobs, and all their material possessions because they fear for the lives of their children One of the new challenges of these Iraqi families is that they have no other family members to help them transition into their new lives During their initial resettlement period, it is imperative that case managers connect families with various sources of support throughout our community, empowering them with knowledge and skills that will assist on the road to self-sufficiency Within the first 30 days of arrival case managers have networked with 25 care providers on behalf of refugee families Case managers do not simply refer clients but facilitate the networking care provisions In turn, our families take pride in becoming active members of our community and are able to enhance it with their talents, skills, and dedication In terms of case management workload, 100 non-U S tie refugees equate to care for 250 U S tie reunification cases Our program staff, volunteers, and community partners, which included many Catholic congregations, provide outstanding service All of our refugees live in stable, affordable housing, and have access to appropriate medical care immediately upon arrival These are two outcomes we focus great energies in achieving In 2011, we will be resettling some refugees who will arrive from Bhutan due to great oppression and hardship and in need of a new beginning Our Resettlement program was recently recognized for our great efforts in providing excellent orientations and care for new arrivals We were asked to have our newly created Orientation DVD placed on the USCCB Members Only website in order for other resettlement agencies throughout the country to witness our great effort and innovation in order to provide a culture of excellence to not only refugees, but to our community due to our networking skills The need is great and although the hours in our days are limited, we continue to utilize our skills combined with the empathy that encourages us to "Walk in each Others Shoes" in order to extend great dedication and assist daily in changing the lives of those in need for the better Immigration Legal Services-The Immigration Services Program provides affordable, authorized, competent, and culturally appropriate legal services to persons needing to clarify their legal status under existing immigration law Many of these persons work difficult and demanding jobs for various local businesses These are jobs that many native-born Americans are loath to perform Clarifying and solidifying the legal status of these immigrants will promote their well-being and security and the well-being of their families This will result in stronger families and a stronger and more stable workforce and community Immigration rules permit non-attorney legal workers to provide legal services as long as they achieve accredited representative status and work for a non-profit organization that has recognized agency status through the Board of Immigration Appeals of the United States Department of Justice In March 2010, the Board of Immigration Appeals accredited our Immigration Services Caseworker and recognized Catholic Charities to provide immigration legal services from its offices in Austin, Albert Lea, and Owatonna, Minnesota This is a very significant accomplishment that has allowed the program to serve 144 persons through the four months ended June 30, 2010

4d Other program services (Describe in Schedule O) **See also Additional Data for Description**

(Expenses $ 446,287 including grants of $ 46,398) (Revenue $ 82,634)

4e **Total program service expenses** ▶$ 1,869,283

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)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities? *If "Yes," complete Schedule C, Part II*	4		No
5	**Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.** Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? *If "Yes," complete Schedule C, Part III*	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? *If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.*	11	Yes	
	• Did the organization report an amount for land, buildings, and equipment in Part X, line10? *If "Yes," complete Schedule D, Part VI.*			
	• 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? *If "Yes," complete Schedule D, Part VII.*			
	• 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? *If "Yes," complete Schedule D, Part VIII.*			
	• 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? *If "Yes," complete Schedule D, Part IX.*			
	• Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X.*			
	• 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? *If "Yes," complete Schedule D, Part X.*			
12	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI, XII, and XIII*	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional* — 12A: Yes [ ] No [No]			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than $10,000 from grantmaking, fundraising, business, and program service activities outside the United States? *If "Yes," complete Schedule F, Part I*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the U S ? *If "Yes," complete Schedule F, Part II*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the U S ? *If "Yes," complete Schedule F, Part III*	16		No
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? *If "Yes," complete Schedule G, Part I*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18		No
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20	Did the organization operate one or more hospitals? *If "Yes," complete Schedule H*	20		No

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

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 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*	23		No
24a	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 questions 24b–24d and complete Schedule K. If "No," go to line 25*	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
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*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? *If "Yes," complete Schedule L, Part III*	27		No
28	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)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	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*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1*	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35		No
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	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*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096, *Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable*	1a	14			
b	Enter the number of Forms W-2G included in line 1a *Enter -0-* if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes	
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	2a	41			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note:** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			2b	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year covered by this return?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*			3b		
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)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c		
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?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	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?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		No
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h		No
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8		
9	**Sponsoring organizations maintaining donor advised funds.**					
a	Did the organization make any taxable distributions under section 4966?			9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body . .	**1a** 19			
b	Enter the number of voting members that are independent . .	**1b** 19			
2	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?		**2**		No
3	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?		**3**		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		**4**		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?		**5**		No
6	Does the organization have members or stockholders?		**6**		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		**7a**	Yes	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		**7b**		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?		**8a**	Yes	
b	Each committee with authority to act on behalf of the governing body?		**8b**	Yes	
9	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		**9**		No

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

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	**10a**		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	**10b**		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	**11**	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? *If "No," go to line 13*	**12a**	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	**12b**	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	**12c**	Yes	
13	Does the organization have a written whistleblower policy?	**13**	Yes	
14	Does the organization have a written document retention and destruction policy?	**14**	Yes	
15	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?			
a	The organization's CEO, Executive Director, or top management official	**15a**	Yes	
b	Other officers or key employees of the organization	**15b**	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	**16a**		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	**16b**		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ▶ MN

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you make these available Check all that apply

☐ Own website ☑ Another's website ☑ Upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶

The Organization
111 Market Street Ste 2
Winona, MN 55987
(507) 454-2270

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

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 Use Schedule J-2 if additional space is needed

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's **current** key employees 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, or 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 the organization did not compensate any current or former officer, director, trustee or key employee

(A) Name and Title	(B) Average hours per week	(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			
See add'l data										

1b Total . . . . ▶	47,158	83,057	20,936

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 in reportable compensation from the organization ▶0

		Yes	No
3 Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
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*	**4**		No
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

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

(A) Name and business address	**(B)** Description of services	**(C)** Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 in compensation from the organization ▶0

Part VIII Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . 1a	52,756				
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations . . . 1d					
	e	Government grants (contributions) 1e	853,283				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	859,805				
	g	Noncash contributions included in lines 1a-1f $ 53,082					
	h	**Total.** Add lines 1a-1f		1,765,844			
Program Service Revenue			Business Code				
	2a	couseling fees	624,100	209,211	209,211		
	b	Adoption fees	624,110	88,102	88,102		
	c	court appointed servic	624,100	74,238	74,238		
	d	Miscellanous	624,100	7,898	7,898		
	e	parish & community soc	624,200	7,440	7,440		
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f		386,889			
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		10,284			10,284
	4	Income from investment of tax-exempt bond proceeds . .					
	5	Royalties					
			(i) Real / (ii) Personal				
	6a	Gross Rents					
	b	Less rental expenses					
	c	Rental income or (loss)					
	d	Net rental income or (loss)					
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory					
	b	Less cost or other basis and sales expenses					
	c	Gain or (loss)					
	d	Net gain or (loss)					
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . . . a	0				
	b	Less direct expenses . . . b	525				
	c	Net income or (loss) from fundraising events . .		-525			-525
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . .					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . .					
		Miscellaneous Revenue	Business Code				
	11a	Bad debts recovered	624,100	10,000	10,000		
	b						
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d		10,000			
	12	**Total revenue.** See Instructions . . .		2,172,492	396,889	0	9,759

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) but are not required to complete columns (B), (C), and (D).

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	**(A)** Total expenses	**(B)** Program service expenses	**(C)** Management and general expenses	**(D)** Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	15,150	15,150		
2	Grants and other assistance to individuals in the U S See Part IV, line 22	180,286	180,286		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	149,359	57,122	84,741	7,496
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	1,072,588	977,270	92,332	2,986
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	53,326	47,661	5,396	269
9	Other employee benefits	148,233	132,484	15,000	749
10	Payroll taxes	98,378	84,679	12,920	779
11	Fees for services (non-employees)				
a	Management				
b	Legal	564		564	
c	Accounting	16,260		16,260	
d	Lobbying				
e	Professional fundraising *See Part IV, line 17* . .				
f	Investment management fees				
g	Other	17,351	15,092	2,099	160
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties . .				
16	Occupancy	77,810	71,731	5,760	319
17	Travel	107,628	105,163	2,272	193
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	21,863	19,406	2,228	229
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	25,168	14,298	10,248	622
23	Insurance				
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	telephone	49,830	47,372	2,328	130
b	Miscellanous	46,996	45,697	1,231	68
c	printing & publications	33,647	16,382	1,482	15,783
d	Postage	22,628	9,521	1,879	11,228
e	supplies	19,388	15,547	3,333	508
f	All other expenses	19,667	14,422	4,464	781
25	**Total functional expenses.** Add lines 1 through 24f	2,176,120	1,869,283	264,537	42,300
26	**Joint costs.** Check here ▶ ☐ if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X **Balance Sheet**

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			249,186	1	199,147
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			383,128	3	305,445
	4	Accounts receivable, net			108,273	4	168,676
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			24,146	9	30,937
	10a	Land, buildings, and equipment cost or other basis *Complete Part VI of Schedule D*	10a	521,097			
	b	Less accumulated depreciation	10b	161,491	372,682	10c	359,606
	11	Investments—publicly traded securities			16,703	11	71,063
	12	Investments—other securities See Part IV, line 11			332,570	12	381,911
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			1,350	15	1,350
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			1,488,038	16	1,518,135
Liabilities	17	Accounts payable and accrued expenses			176,459	17	151,081
	18	Grants payable				18	
	19	Deferred revenue			5,230	19	8,997
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability *Complete Part IV of Schedule D*				21	
	22	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	10,040
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			89,200	25	91,500
	26	**Total liabilities.** Add lines 17 through 25			270,889	26	261,618
Net Assets or Fund Balances		**Organizations that follow SFAS 117, check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			715,989	27	874,751
	28	Temporarily restricted net assets			499,660	28	380,266
	29	Permanently restricted net assets			1,500	29	1,500
		Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34.					
	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	Total net assets or fund balances			1,217,149	33	1,256,517
	34	Total liabilities and net assets/fund balances			1,488,038	34	1,518,135

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ 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? . .	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separated basis			
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		No
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		

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SCHEDULE A (Form 990 or 990EZ)

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.** ▶ **See separate instructions.**

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CATHOLIC CHARITIES DIOCESE OF WINONA

Employer identification number
41-0721636

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 11, check only one box)

1 ☐ A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

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 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)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☑ 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 that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☑ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Other

e ☑ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?	**11g(i)**		No
(ii) a family member of a person described in (i) above?	**11g(ii)**		No
(iii) a 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		No

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section (see instructions))	**(iv)** Is the organization in col (i) listed in your governing document? Yes	No	**(v)** Did you notify the organization in col (i) of your support? Yes	No	**(vi)** Is the organization in col (i) organized in the U S ? Yes	No	**(vii)** Amount of support?
dIOCESE WINONA	410694754	1		No		No	Yes		0
Total									0

Part II **Support Schedule for Organizations Described in IRC 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
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 **Total.** Add lines 1 through 3						
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)						
6 **Public Support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 **Total support** (Add lines 7 through 10)						

12 Gross receipts from related activities, etc (See instructions) | 12 |

13 **First Five Years** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f)) | 14 |

15 Public Support Percentage for 2008 Schedule A, Part II, line 14 | 15 |

16a **33 1/3% support test—2009.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

b **33 1/3% support test—2008.** If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶☐

17a **10%-facts-and-circumstances test—2009.** 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 **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2008.** 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 **stop here.** Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization ▶☐

18 **Private Foundation** If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions ▶☐

Part III Support Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 **Total.** 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 **Public Support** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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 IV)						
13 **Total support** (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 501(c)(3) organization, check this box and **stop here** ☐

Section C. Computation of Public Support Percentage

15 Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2009** (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from **2008** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2009.** 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—2008.** 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 ☐

Part IV **Supplemental Information.** Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Additional Data

Software ID:
Software Version:
EIN: 41-0721636
Name: CATHOLIC CHARITIES DIOCESE OF WINONA

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses $ 446,287 including grants of $ 46,398) (Revenue $ 82,634)

Court Appointed Services -As the name implies, our Court Appointed Services are those services that we provide as directed by a local District Court Our Court Appointed Services are available to all regardless of race, age, gender, or faith tradition Our Guardian/Conservator Program provides valuable assistance to persons who cannot make decisions that are necessary to protect themselves and/or their finances Our Child Custody Evaluation Program makes recommendations to the courts regarding how children will spend their time in the homes of both parents in contested custody cases We are appointed as Guardian and Conservators (legal decision makers) of vulnerable persons who have been determined by the court as being incapable or incompetent to manage their personal and/or financial affairs and, therefore, are in need of assistance The people served are disabled because they are frail elderly, seriously and persistently mentally ill, developmentally disabled, and/or suffer from brain damage Many are drug and alcohol dependent Catholic Charities only addresses the scope of work entrusted to us by the District Court, but generally speaking our goal and purpose is to address and improve a wide range of life situations that must be upgraded to enhance the wellbeing of our clients The range of these situations includes health, housing, finances, clothing, socialization, nutrition and spirituality Last year our Guardian/Conservator Program provided over 3,925 hours of service on behalf of 79 clients Our Child Custody Evaluation Program serves a unique niche of children in our local communities These are the children who, unfortunately, find that important decisions regarding them are made in District Court in matters regarding custody and parenting time following their parents' breakup of the parental household Given the adversarial and sometimes heated nature of court proceedings, the District Court recognizes that these children need an objective, neutral, informed and effective champion of their best interests These children need a good way to grow up with both parents whom they love, even if the parents live in two different homes Children involved in court custody matters find such champions in the social workers of Catholic Charities who work in the Child Custody Evaluation Program Our social worker, possessing a solid background in child development and family dynamics, assesses the family and the present and future needs of the child Strengths and areas of needed growth are identified and evaluated in forming recommendations to the District Court regarding courses of action that are in the child's best interest Our service helps children and parents chart positive courses that reduce conflict, maintain child/parent loyalties, and address the emotional needs of the various parties, speeding permanency for the children Last year we served 89 persons through our Child Custody Evaluation Program MediAppS (Medication Application Service)-The Medication Application Service (MediAppS) uses computer technology, the Internet, and old-fashioned face-to-face casework to help low-income people lacking prescription drug insurance secure the free medications made available by the pharmaceutical companies It also helps people successfully file applications for government programs that provide health insurance, including prescriptions, for low-income persons (Many people are unaware that they qualify for these programs) Finally, MediAppS also helps, on a temporary basis, uninsured persons purchase medications or medical devices Last year, the MediAppS program secured 568 prescriptions valued at $202,763 for 71 people In addition, the program also provided immediate emergency assistance for medications/medical devices to 82 individuals at a cost of $26,881 Parish and Community Social Action -The Parish and Community Social Action program provides consulting, training and assistance to individuals, parishes, schools and other organizations throughout the diocese as they work to live out the social mission of the Church It strives to see that Catholic Charities and parishes work collaboratively to respond to human needs Program staff leads, convenes, facilitates, and trains parishioners so that they may carry out their baptismal call to respond to the needs of the poor and vulnerable The program works with parishes, groups, and other church institutions to address social issues, especially those of particular concern within the diocese It does this by - providing information, training, and resources - promoting reflection on social issues in light of Scriptures and Catholic Social Teaching- helping to integrate Catholic Social Teaching into other diocesan programs and ministries The program also coordinates the Catholic Campaign for Human Development and Catholic Relief Services efforts in the diocese It also helps coordinate diocesan responses to natural disasters at the local, national, and international levels

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(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			
Most Reverend John Quinn President	70	X		X				0	0	0
Annmarie DeMarais past Chair	70	X		X				0	0	0
Pete connor Chair	70	X		X				0	0	0
Christopher Walchuk vice chair	70	X		X				0	0	0
Cynthia Meling director	70	X						0	0	0
Rose Schwalbach director	70	X						0	0	0
Francois Nguyen director	70	X						0	0	0
Roshelle Plutowski director	70	X						0	0	0
Paul Brosnahan treasurer	70	X		X				0	0	0
Raymond Feller director	70	X						0	0	0
Robert Sonnek Jr director	70	X						0	0	0
Rhonda Kelly director	70	X						0	0	0
Reverend Kevin Connolly director	70	X						0	0	0
Tami Seykora-Blum director	70	X						0	0	0
Sheri Hird director	70	X						0	0	0
Valerie Kvale director	70	X						0	0	0
Laura Lopez director	70	X						0	0	0
Reverend James Steffes Vice President	70	X		X				0	0	0
Aaron Skogen director	70	X						0	0	0
Robert Tereba Exec Director/Secretary	40 00			X				0	83,057	11,597
Mary Liebsch Controller	40 00			X				47,158	0	9,339

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
couseling fees	624,100	209,211	209,211		
Adoption fees	624,110	88,102	88,102		
court appointed servic	624,100	74,238	74,238		
Miscellanous	624,100	7,898	7,898		
parish & community soc	624,200	7,440	7,440		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
telephone	49,830	47,372	2,328	130
Mıscellanous	46,996	45,697	1,231	68
prıntıng & publıcatıons	33,647	16,382	1,482	15,783
Postage	22,628	9,521	1,879	11,228
supplıes	19,388	15,547	3,333	508

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CATHOLIC CHARITIES DIOCESE OF WINONA

Employer identification number
41-0721636

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

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? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or pleasure)
- ☐ Preservation of an historically importantly land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a–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 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	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable 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 and enforcing conservation easements during the year ▶ ______

7 Amount of expenses incurred in monitoring, inspecting, 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 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, 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" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ______

b Assets included in Form 990, Part X ▶ $ ______

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

3 Using the organization's 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 XIV

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" to 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 XIV and complete the following table

			Amount
c	Beginning balance	1c	1,048,169
d	Additions during the year	1d	1,419,878
e	Distributions during the year	1e	1,442,621
f	Ending balance	1f	1,025,426

2a Did the organization include an amount on Form 990, Part X, line 21? ☐ Yes ☑ No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	276,958	276,958			
b	Contributions					
c	Investment earnings or losses					
d	Grants or scholarships					
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	276,958	276,958			

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ▶ 99 000 % %

b Permanent endowment ▶ 1 000 % %

c Term endowment ▶ %

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	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIV the intended uses of the organization's endowment funds

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		52,950		52,950
b Buildings		311,993	36,441	275,552
c Leasehold improvements		9,909	8,016	1,893
d Equipment		146,245	117,034	29,211
e Other				
Total. Add lines 1a-1e *(Column (d) should equal Form 990, Part X, column (B), line 10(c).)* ▶				359,606

Part VII Investments—Other Securities. 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
Financial derivatives		
Closely-held equity interests		
Other CUIT Balanced Fund	381,911	F
Total. *(Column (b) should equal Form 990, Part X, col (B) line 12)* ▶	381,911	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) should equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. *(Column (b) should equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 (a) Description of Liability	(b) Amount
Federal Income Taxes	
aDVANCE FROM usccb	7,700
aSSETS HELD FOR cc fOUNDATION	83,800
Total. *(Column (b) should equal Form 990, Part X, col (B) line 25)* ▶	91,500

2. Fin 48 Footnote In Part XIV, 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

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	2,172,492
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	2,176,120
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-3,628
4	Net unrealized gains (losses) on investments	4	42,996
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	42,996
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	39,368

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	2,215,488
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	42,996		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d			
e	Add lines **2a** through **2d**			2e	42,996
3	Subtract line **2e** from line **1**			3	2,172,492
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			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total Revenue Add lines **3** and **4c.** (This should equal Form 990, Part I, line 12)			5	2,172,492

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	2,176,120
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 XIV)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	2,176,120
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			
b	Other (Describe in Part XIV)	4b			
c	Add lines **4a** and **4b**			4c	0
5	Total expenses Add lines **3** and **4c.** (This should equal Form 990, Part I, line 18)			5	2,176,120

Part XIV Supplemental Information

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
Part IV, Line 1b		Catholic Charities is court appointed to take charge of a client's assets Inventory is taken of all assets and reported to the court New checking accounts are created in the client's name and credit and debit cards are cancelled Income is deposited in the client's account and funds are disbursed from the account to pay client bills and provide the client with spending money The new accounts can only be used for transactions by authorized Catholic Charities staff Clients may not commit to large expenses without prior permission and may not sign contracts that obligate them to payments Catholic Charities invests monies when appropriate to maximize the return of interest for the client With court approval, we sell client property and assets Catholic Charities files an annual accounting of all assets, income and expenses for each client The court reviews and approves the annual report Other activities provided to the clients by the Conservatorship program staff are apply for medical assistance, help with shopping, maintain real estate and vehicles, coordinate with the Volunteer Income Tax Assistance program volunteers to prepare client tax returns, and establish irrevocable burial trusts

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," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CATHOLIC CHARITIES DIOCESE OF WINONA

Employer identification number
41-0721636

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 Governments and Organizations in the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than $5,000. Check this box if no one recipient received more than $5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . ▶ ☐

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC Code 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 Francis of Assisi1114 Third St SE Rochester, MN 55904	410694749	501(C)(3)	7,050				Provide emergency financial assistance to those in need
Sts Peter & Paul Parish105 North 5th st mankato, MN 56001	410705857	501(C)(3)	5,600				Provide emergency financial assistance to those in need

2 Enter total number of section 501(c)(3) and government organizations . . . . ▶ 2

3 Enter total number of other organizations . . . . ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	**(b)** Number of recipients	**(c)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
The refugee resettlement program provides direct assistance to newly arrived refugees, typically including rent, utilities, food, transportation, job training, and household supplies	151	124,491			
The parish and community social action program provided tuition assistance for individuals to attend trainings sponsored by the Institute of Lay Ministry of the Diocese of Winona	16	1,635			
The clinical counseling, pregnancy, parenting, and adoption program provides direct assistance to expecting mothers and young families, typically including rent, utilities or education assistance	84	24,547			
The medication application service (mediapps) program provides direct assistance to uninsured persons by purchasing for them medications or medical supplies and devices	81	29,613			

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Criteria for grant assistance are determined at the program level After eligibility verification, a disbursement request is completed The program director signs the disbursement request, which is routed to the accounts payable department for payment Documentation for each check disbursement is maintained in the accounting department and retained per agency policy

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization	Employer identification number
CATHOLIC CHARITIES DIOCESE OF WINONA	41-0721636

Part I Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
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	6	53,082	Fair market value
10 Securities—Closely held stock				
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 |

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

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
CATHOLIC CHARITIES DIOCESE OF WINONA

Employer identification number
41-0721636

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 7a		The Bishop for the Diocese of Winona can appoint all Board members
Form 990, Part VI, Section B, line 11		The Board of Directors reviewed and approved the Form 990 at its November Board meeting prior to its filing
Form 990, Part VI, Section B, line 12c		Annually Board members sign a conflict of interst disclosure Board members abstain from voting on any issues to which they have a conflict and this is documented in the minutes
Form 990, Part VI, Section B, line 15		The Board of Directors evaluate performance and set the compensation for the CEO
Form 990, Part VI, Section C, line 19		Governing documents, conflict of interest policy, and audited financial statements are available upon request at our business office during normal business hours
Form 990 Part XI Line 2C	Audit committee	The audit committee makes the recomendation to the board of directors for selection of the auditors The audit committee annually meets with the auditor This process has not changed from the prior year
Form 990 Part VII	Compensation from Related Organizations	We were unable to obtain compensation information for Most Reverend John Quinn, Very Reverend James Steffes, Deacon Christopher Walchuk, and Reverend Kevin Connolly from the Diocese of Winona, a related Organization The individuals have declined permission to have this information included in our Form 990