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Form **990****Return of Organization Exempt From Income Tax**

OMB No 1545-0047

2009**Open to Public Inspection**Department of the Treasury
Internal Revenue Service

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.

A For the 2009 calendar year, or tax year beginning **October 1**, 2009, and ending **September 30**, 20 **10****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 **Society of St. Vincent de Paul**Doing Business As **Archdiocesan Council of Indianapolis**

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

3001 E. 30th St.

City or town, state or country, and ZIP + 4

Indianapolis, IN 46218**F** Name and address of principal officer: **Patrick N. Jerrell****5209 Greenhart Dr., Indianapolis, IN 46237****D** Employer identification number**37 1507632****E** Telephone number**(317) 924-5775****G** Gross receipts \$ **1,812,133****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 ▶ **5496****I** Tax-exempt status: ☒ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ **SVDPINDY.org****K** Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: **1946****M** State of legal domicile: **IN****Part I Summary****1** Briefly describe the organization's mission or most significant activities: **See attached****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 20****4** Number of independent voting members of the governing body (Part VI, line 1b)**4 20****5** Total number of employees (Part V, line 2a)**5 None****6** Total number of volunteers (estimate if necessary)**6 5,500****7a** Total gross unrelated business revenue from Part VIII, column (C), line 12**7a None****b** Net unrelated business taxable income from Form 990-T, line 34**7b None**

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	1,990,129	1,769,993
9	Program service revenue (Part VIII, line 2g)		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	11,302	42,140
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,001,431	1,812,133
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		
14	Benefits paid to or for members (Part IX, column (A), line 4)		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)		
16a	Professional fundraising fees (Part IX, column (A), line 11e)		
b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	1,561,195	1,745,823
18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,561,195	1,745,823
19	Revenue less expenses. Subtract line 18 from line 12	440,236	66,310
20	Total assets (Part X, line 16)	3,083,784	3,231,645
21	Total liabilities (Part X, line 26)	None	None
22	Net assets or fund balances. Subtract line 21 from line 20	3,083,784	3,231,645

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*Patrick N. Jerrell***PATRICK N. JERRELL, PRESIDENT****7/26/2011**

Date

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

GARY C. FOOTE, CPA

Date

7/26/2011Check if self-employed ☐

Preparer's identifying number (see instructions)

183-28-7201

Firm's name (or yours if self-employed), address, and ZIP + 4

EIN ▶

Phone no ▶ ()

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2009)

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Part III Statement of Program Service Accomplishments**1** Briefly describe the organization's mission:

See Part 1, Line 1

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 \$ 494,105 including grants of \$ None) (Revenue \$ None)
The Pratt Quigley Food Pantry provides free food to the needy regardless of race, religion or gender. Food stuffs are procured from Gleaners Food Bank, the USDA, private donors and bulk purchases from vendors.

Households served	23,188
Persons served	82,865
Seniors served	3,306
Number of volunteers	1,997
Number of hours	61,112

4b (Code:) (Expenses \$ 265,419 including grants of \$ None) (Revenue \$ None)

Households served	3,686
Persons served	6,202
Children served	4,590
Number of volunteers	1,459
Number of volunteer hours	31,512

4c (Code:) (Expenses \$ 659,090 including grants of \$ None) (Revenue \$ Unknown)

The forty-seven SVDP Conferences provide food, clothing, household goods and financial aid to the needy regardless of race, religion or gender.

Number of people helped	56,211
Value of goods provided	595,383
Number of people visited	41,817
Number of volunteers	1,920
Number of volunteer hours	93,172

4d Other program services. (Describe in Schedule O.)(Expenses \$ 98,416 including grants of \$ None) (Revenue \$ None)**4e** Total program service expenses **▶** 1,517,030

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 ✓	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	2 ✓	
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	✓
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	✓
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 N/A	
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	✓
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	✓
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	✓
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	✓
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	✓
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 ✓	
• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? 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	✓
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	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	✓
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	✓
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	✓
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 United States? If "Yes," complete Schedule F, Part II.	15	✓
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 United States? If "Yes," complete Schedule F, Part III	16	✓
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	✓
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	✓
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	✓
20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20	✓

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	✓
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	✓
23 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.	23	✓
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 lines 24b through 24d and complete Schedule K. If "No," go to line 25.	24a	✓
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	✓
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	✓
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	✓
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	✓
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	✓
b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV.	28b	✓
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 direct or indirect owner? If "Yes," complete Schedule L, Part IV.	28c	✓
29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M.	29	✓
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M.	30	✓
31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.	31	✓
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	✓
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	✓
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	✓
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	✓
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	✓
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	✓
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	✓

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	0
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	N/A
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	None
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	N/A
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a	✓
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	✓
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	✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
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	✓
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	✓
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	✓
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	✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	✓
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/A
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h	N/A
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	N/A
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?	9a	N/A
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/A
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	N/A
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	N/A
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	N/A
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	N/A
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	N/A
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 line 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	
b Enter the number of voting members that are independent	1b	
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	✓
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	✓
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	✓
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	✓
6 Does the organization have members or stockholders?	6	✓
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	✓
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	✓
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a The governing body?	8a	✓
b Each committee with authority to act on behalf of the governing body?	8b	✓
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	9a	✓

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	✓
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	✓
11A Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	✓
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	
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	
13 Does the organization have a written whistleblower policy?	13	✓
14 Does the organization have a written document retention and destruction policy?	14	✓
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	N/A
b Other officers or key employees of the organization	15b	N/A
If "Yes" to line 15a or 15b, 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	✓
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	N/A

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ► Indiana
- 18 Section 6104 requires an organization to make its Forms 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.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ► Terry Piket, CFO 2001 E. 30th St., Indianapolis, IN 46218 317-924-5775

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. 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 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 the organization did not compensate any 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			
Patrick N. Jerrell, Pres.	25			✓				0	0	0
Robert Gaither, VP	15			✓				0	0	0
Terry Piket, CFO	25			✓				0	0	0
Elaine Jerrell, Secretary	2			✓				0	0	0
Pete Withey	30							0	0	0
Clarence Hirsch	30							0	0	0
Don Striegel	20							0	0	0
Betty Farrell	50							0	0	0
Jeff Blackwell	25							0	0	0
Sheila Gilbert	7							0	0	0
Joe Carey	7							0	0	0
Hector Magallon	7							0	0	0
Sister Rosaria	7							0	0	0
Joe Ransel	7							0	0	0
Brian Carey	7							0	0	0
Karl Knable	7							0	0	0
Sharon Teal	7							0	0	0

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

(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			
Carol Douglas	7							0	0	0
Jake Asher	7							0	0	0
Chuck Ernst	7							0	0	0
1b Total								0	0	0

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization ► **None**

- 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
- 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.
- 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

	Yes	No
3		✓
4		✓
5		✓

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 those in 1) who received more than \$100,000 in compensation from the organization ► **None**

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					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	1,769,993				
	g Noncash contributions included in lines 1a-1f: \$		None				
	h Total. Add lines 1a-1f		1,769,993				
Program Service Revenue			Business Code				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f							
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			42,140	42,140		
	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				
	b Less: direct expenses		b				
	c Net income or (loss) from fundraising events						
	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							
b							
c							
d All other revenue							
e Total. Add lines 11a-11d							
12 Total revenue. See instructions.			1,812,133	42,140			

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).

<i>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</i>	(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				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22				
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				
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				
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other				
12 Advertising and promotion				
13 Office expenses				
14 Information technology				
15 Royalties				
16 Occupancy				
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
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 Program services	1,556,998	1,556,998		
b Fund raising	47,929			47,929
c Management & general	140,896		140,896	
d				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	1,745,823	1,556,998	140,896	47,929
26 Joint costs. Check here <input type="checkbox"/> 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	788,153	1	935,699
	2 Savings and temporary cash investments	365,567	2	25,074
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	
	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	9,753	9	9,548
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	2,358,375		
	b Less: accumulated depreciation	726,152	10c	1,632,223
	11 Investments—publicly traded securities	336,471	11	629,101
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)	3,083,784	16	3,231,645	
Liabilities	17 Accounts payable and accrued expenses		17	
	18 Grants payable		18	
	19 Deferred revenue		19	
	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	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities. Complete Part X of Schedule D		25	
	26 Total liabilities. Add lines 17 through 25	None	26	None
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	3,034,791	27	3,188,581
	28 Temporarily restricted net assets	48,993	28	43,064
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117, check here ► <input type="checkbox"/> 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	3,083,784	33	3,231,645
34 Total liabilities and net assets/fund balances	3,083,784	34	3,231,645	

Part XI Financial Statements and Reporting

- 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? . . .
- b Were the organization's financial statements audited by an independent accountant?
- 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.
- 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 separate 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?
- 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.

	Yes	No
2a		✓
2b	✓	
2c	✓	
3a		✓
3b	N	A

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.)

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.")	Initial Return	Initial Return	initial Return	1,990,129	1,769,993	3,460,122
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	9/30/2009	9/30/2009	9/30/2009	None	None	None
3 The value of services or facilities furnished by a governmental unit to the organization without charge	"	"	"	None	None	None
4 Total. Add lines 1 through 3				1,990,129	1,769,993	3,460,122
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)						310,000
6 Public support. Subtract line 5 from line 4.						3,770,122

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	"	"	"	1,990,129	1,769,993	3,460,122
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	"	"	"	11,302	42,140	53,442
9 Net income from unrelated business activities, whether or not the business is regularly carried on	"	"	"	None	None	None
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	"	"	"	None	None	None
11 Total support. Add lines 7 through 10						3,513,564
12 Gross receipts from related activities, etc. (see instructions)					12	None
13 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						<input checked="" type="checkbox"/>

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 from 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		<input type="checkbox"/>
b 33 1/3 % support test—2008. 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 stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>
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		<input type="checkbox"/>
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 ►		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 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 section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

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 ► <input type="checkbox"/>		
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 ► <input type="checkbox"/>		
20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ► <input type="checkbox"/>		

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

[illegible]

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

St. Vincent De Paul Archdiocesan Council of Indianapolis

Employer identification number

37 : 1507682

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 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? ☐ 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 important land area

☐ Protection of natural habitat ☐ Preservation of a certified historic structure

☐ 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	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, 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 section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIV, describe how the organization reports conservation easements in its revenue 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 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 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
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? ☐ 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					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

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

- a Board designated or quasi-endowment ▶ %
 b Permanent endowment ▶ %
 c Term endowment ▶ %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) unrelated organizations

(ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
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	221,937			221,937
b Buildings	1,651,649		404,373	1,247,276
c Leasehold improvements				
d Equipment	484,789		321,779	163,010
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				1,632,223

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		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
.....		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)

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) must equal Form 990, Part X, col. (B) line 13.) ▶		

Total. (Column (b) must 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) must equal Form 990, Part X, col. (B) line 15.)	

Total. (Column (b) must 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	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶		

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶

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 Audited Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	See Part XIV
4	Net unrealized gains (losses) on investments	4	
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 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

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	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
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	See Part XIV
3	Subtract line 2e from line 1	3	
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	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

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

1	Total expenses and losses per audited financial statements	1	
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	See Part XIV
3	Subtract line 2e from line 1	3	
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	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5	

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, line 2; 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.

Only the special works portion of the Society of St. Vincent De Paul, Archdiocesan Council of Indianapolis

has been audited. Copy of the audit report is attached.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

► Complete if the organizations 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

Society of St. Vincent De Paul Archdiocesan Council of Indianapolis

Employer identification number

37 : 1507682

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				
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?		✓
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?		✓
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		✓
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.

SVDP is on a modified cash basis of accounting and does not recognize the value of donated property, goods or services. Donated property consists of clothing, household goods and food which are distributed to the needy free of charge.

**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

Society of St. Vincent De Paul Archdiocesan Council of Indianapolis

Employer identification number

37 | 1507632

Part VI, Line 10

The Form 990 is reviewed by the Finance Committee and then submitted to the Board for final approval.

Part XI, Line 1

The modified cash basis was used to prepare the Form 990

Part XI, Line 2b

See Schedule D - Part XIV

Part VI, Section B, Lines 12a, 13 and 14

The organization does not have the written policies described in Lines 12a, 13 and 14 as of September 30, 2010 but
these policies will be adopted in the fiscal year ending September 30, 2011.

Part VI, Section L, Line 19

Upon request

Part III, Line 4e

Total program service expenses \$1,517,030

Newsletter/education 12,341

Council 10,666

Beggars 16,961

Total Part IX, Line 25, Column B \$1,556,998

Part III, Line 4d

Food program \$ 30,060

Outlying conference support 22,419

Twinning program 3,600

Easy Food 27,371

Disaster relief 9,000

Other 5,966

Total \$ 98,416

Schedule of Operating Units				Date=>	2/10/2010
	Name	Address	City	State	Zip Code
1	Archdiocesan Council of Indianapolis	3001 E 30th St	Indianapolis	IN	46218
2	Client Choice Food Pantry	Pratt-Quigley Food Center 3001 E 30th St	Indianapolis	IN	46218
3	Distribution Center	1201 E Maryland St	Indianapolis	IN	46202
4	Beggars for the Poor	1202 E Maryland St	Indianapolis	IN	46203
5	Christ the King SVdP Conference	5884 N Crittenden Ave	Indianapolis	IN	46220
6	Sts Peter and Paul SVdP Conference	1347 N Meridian St.	Indianapolis	IN	46202
8	Good Shephard SVdP Conference	1109 E Cameron St	Indianapolis	IN	46203
9	Church of the Holy Angels SVdP Conference	740 W 28th St	Indianapolis	IN	46208
10	Church of the Holy Cross SVdP Conference	125 N Oriental St.	Indianapolis	IN	46202
11	Holy Spirit SVdP Conference	7243 E 10th St	Indianapolis	IN	46219
12	Holy Trinity SVdP Conference	2618 W St Clair St.	Indianapolis	IN	46222
13	St Anthony SVdP Conference	337 N. Warman Ave	Indianapolis	IN	46222
14	Immaculate Heart of Mary SVdP Conference	5692 Central Ave.	Indianapolis	IN	46220
15	Nativity of Our Lord Jesus Christ SVdP Conference	7225 Southeastern Ave	Indianapolis	IN	46239
16	Our Lady of Lourdes SVdP Conference	5333 E Washington St	Indianapolis	IN	46219
17	Sacred Heart of Jesus SVdP Conference	1530 Union St	Indianapolis	IN	46225
18	St Andrew the Apostle SVdP Conference	4052 E 38th St.	Indianapolis	IN	46218
19	St Ann SVdP Conference	2862 S Holt Rd.	Indianapolis	IN	46241
20	St Barnabas SVdP Conference	8300 Rahke Rd	Indianapolis	IN	46217
21	St Bernadette SVdP Conference	4838 Fletcher Ave.	Indianapolis	IN	46203
22	St. Christopher SVdP Conference	5301 W 16th St	Indianapolis	IN	46224
23	St Gabriel the Archangel SVdP Conference	6000 W 34th St	Indianapolis	IN	46224
24	St Joan of Arc SVdP Conference	4217 Central Ave	Indianapolis	IN	46205
25	St John the Evangelist SVdP Conference	126 W Georgia St	Indianapolis	IN	46225
26	St Joseph SVdP Conference	1375 S Mickley Ave	Indianapolis	IN	46241
27	St Jude SVdP Conference	5353 McFarland Rd	Indianapolis	IN	46227
28	St Lawrence SVdP Conference	6944 E 46th St.	Lawrence	IN	46226
29	St Luke the Evangelist SVdP Conference	7575 Holiday Dr., E	Indianapolis	IN	45260
30	St Mark the Evangelist SVdP Conference	535 E Edgewood Ave	Indianapolis	IN	46227
31	St Mary SVdP Conference	317 N. New Jersey St	Indianapolis	IN	46204
32	St Matthew the Apostle SVdP Conference	4100 E. 56th St	Indianapolis	IN	46220
33	St Michael the Archangel SVdP Conference	3354 W. 30th St	Indianapolis	IN	46222
34	St Monica SVdP Conference	6131 N. Michigan Rd.	Indianapolis	IN	46228
35	St Patrick SVdP Conference	950 Prospect St.	Indianapolis	IN	46203
36	St Philip Neri SVdP Conference	550 N Rural St	Indianapolis	IN	46201
37	St. Pius X SVdP Conference	7200 Sarto Dr.	Indianapolis	IN	46240
38	St Rita SVdP Conference	1733 Dr Andrew J Brown Ave	Indianapolis	IN	46202
39	St Roch SVdP Conference	3600 S Pennsylvania Ave	Indianapolis	IN	46227
40	St Simon the Apostle SVdP Conference	8155 Oaklandon Rd	Indianapolis	IN	46236
41	Little Flower SVdP Conference	4720 E. 13th St	Indianapolis	IN	46201
42	St Thomas Aquinas SVdP Conference	4625 N Kenwood Ave	Indianapolis	IN	46208
43	Holy Name SVdP Conference	89 N 17th St	Beech Grove	IN	46107
44	St Malachy SVdP Conference	326 N Green St	Brownsburg	IN	46112
45	Our Lady of the Greenwood SVdP Conference	335 S. Meridian St	Greenwood	IN	46143
46	St Susanna SVdP Conference	1210 E Main St	Plainfield	IN	46168
47	St Agnes SVdP Conference	1008 McLary Rd.	Nashville	IN	47448

48	St Agnes Distribution Center	2901 Long Lake Rd	Nashville	IN	47448
49	St Vincent dePaul SVdP Conference	1723 "I" St	Bedford	IN	47421
50	St Vincent dePaul Thrift Store	914 17th St	Bedford	IN	47421
51	St Mary (Nativity of the Virgin Mary) SVdP Conference	212 Washington St	North Vernon	IN	47265
52	St Mary's SVdP Thrift Store	10 E O&M St	North Vernon	IN	47265
53	St Ambrose SVdP Conference	325 S Chestnut St	Seymour	IN	47274
54	St Thomas More SVdP Conference	1200 N Indiana St	Mooresville	IN	46158
55	St Francis SVdP Furniture Distribution Center	1105 N. Jackson St	Bloomington	IN	47404
56	St John the Apostle SVdP Conference	4607 W State Road 46	Bloomington	IN	47404

Part I, Line 1 and Part III, Line 1

The Society of St. Vincent DePaul, Archdiocesan Council of Indianapolis, Inc. and its operating units (SVDP) is a not-for-profit organization located in Indianapolis and other areas in southern Indiana. SVDP's mission is to provide basic services to people and families in need without discrimination. SVDP has no paid employees and its operations are supported completely by volunteers. All supporting donations come directly from individuals, businesses and public institutions.



**SOCIETY OF ST. VINCENT DE PAUL
ARCHDIOCESAN COUNCIL OF INDIANAPOLIS,
INC. – SPECIAL WORKS**

FINANCIAL STATEMENTS

SEPTEMBER 30, 2010 AND 2009

CPAs / ADVISORS

 **blue**

**SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF
INDIANAPOLIS, INC. – SPECIAL WORKS**

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SEPTEMBER 30, 2010 AND 2009**

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Statements of Assets, Liabilities, and Net Assets	2
Statements of Support, Revenues, and Expenses	3
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Blue & Co., LLC / 12800 N Meridian Street, Suite 400 / Carmel, IN 46032
main 317 848 8920 fax 317 573 2458 email blue@blueandco.com

REPORT OF INDEPENDENT AUDITORS

The Board of Directors
Society of St. Vincent de Paul
Archdiocesan Council of Indianapolis, Inc. – Special Works
Indianapolis, Indiana

We have audited the accompanying statements of assets, liabilities, and net assets - modified cash basis of Society of St. Vincent de Paul Archdiocesan Council of Indianapolis, Inc. – Special Works, as of September 30, 2010 and 2009, and the related statements of support, revenues, and expenses - modified cash basis for the years then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

As described in Note 2, these financial statements have been prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Society of St. Vincent de Paul Archdiocesan Council of Indianapolis, Inc. – Special Works at September 30, 2010 and 2009, and the changes in its net assets for the years then ended, on the basis of accounting described in Note 2.

Blue & Co., LLC

February 9, 2011

**SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF
INDIANAPOLIS, INC. – SPECIAL WORKS**

STATEMENTS OF ASSETS, LIABILITIES, AND NET ASSETS
(Modified Cash Basis)
SEPTEMBER 30, 2010 AND 2009

ASSETS		
	<u>2010</u>	<u>2009</u>
Cash and cash equivalents	\$ 686,818	\$ 535,555
Certificates of deposit	-0-	351,729
Investments	629,101	336,471
Gift certificate inventory	6,740	6,945
Deposits and other advances	2,808	2,808
Property and equipment, net	<u>1,425,214</u>	<u>1,462,577</u>
	<u>\$ 2,750,681</u>	<u>\$ 2,696,085</u>
 LIABILITIES AND NET ASSETS		
Net assets		
Unrestricted		
Operating	\$ 1,588,512	\$ 1,464,741
Board designated	<u>1,119,105</u>	<u>1,182,351</u>
Total unrestricted	2,707,617	2,647,092
Temporarily restricted	<u>43,064</u>	<u>48,993</u>
	<u>\$ 2,750,681</u>	<u>\$ 2,696,085</u>

See accompanying notes to financial statements.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

STATEMENT OF SUPPORT, REVENUES, AND EXPENSES (Modified Cash Basis) YEAR ENDED SEPTEMBER 30, 2010 (With Comparative Total for the Year Ended September 30, 2009)

	2010			2009
	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>	<u>Total</u>
Support and revenues				
Contributions	\$ 577,509	\$ 322,390	\$ 899,899	\$ 1,279,807
Sales of donated goods	63,266	-0-	63,266	44,166
Investment income, net	40,460	-0-	40,460	11,279
Net assets released from restrictions	328,319	(328,319)	-0-	-0-
Total support and revenues	<u>1,009,554</u>	<u>(5,929)</u>	<u>1,003,625</u>	<u>1,335,252</u>
Expenses				
Program services				
Food pantry	427,768	-0-	427,768	384,704
Distribution center	238,848	-0-	238,848	231,206
Depreciation of program assets	92,907	-0-	92,907	86,137
Other programs	110,416	-0-	110,416	92,729
Newsletter/educational	<u>12,341</u>	<u>-0-</u>	<u>12,341</u>	<u>15,240</u>
Total program services	882,280	-0-	882,280	810,016
Fundraising	47,929	-0-	47,929	59,219
Management and general	<u>18,820</u>	<u>-0-</u>	<u>18,820</u>	<u>17,170</u>
Total expenses	<u>949,029</u>	<u>-0-</u>	<u>949,029</u>	<u>886,405</u>
Change in net assets	60,525	(5,929)	54,596	448,847
Net assets, beginning of year	<u>2,647,092</u>	<u>48,993</u>	<u>2,696,085</u>	<u>2,247,238</u>
Net assets, end of year	<u>\$ 2,707,617</u>	<u>\$ 43,064</u>	<u>\$ 2,750,681</u>	<u>\$ 2,696,085</u>

See accompanying notes to financial statements.

**SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF
INDIANAPOLIS, INC. – SPECIAL WORKS**

STATEMENT OF SUPPORT, REVENUES, AND EXPENSES
(Modified Cash Basis)
YEAR ENDED SEPTEMBER 30, 2009

	<u>Unrestricted</u>	<u>Temporarily Restricted</u>	<u>Total</u>
Support and revenues			
Contributions	\$ 788,205	\$ 491,602	\$ 1,279,807
Sales of donated goods	44,166	-0-	44,166
Investment income, net	11,279	-0-	11,279
Net assets released from restrictions	584,868	(584,868)	-0-
Total support and revenues	1,428,518	(93,266)	1,335,252
Expenses			
Program services			
Food pantry	384,704	-0-	384,704
Distribution center	231,206	-0-	231,206
Depreciation of program assets	86,137	-0-	86,137
Other programs	92,729	-0-	92,729
Newsletter/educational	15,240	-0-	15,240
Total program services	810,016	-0-	810,016
Fundraising	59,219	-0-	59,219
Management and general	17,170	-0-	17,170
Total expenses	886,405	-0-	886,405
Change in net assets	542,113	(93,266)	448,847
Net assets, beginning of year	<u>2,104,979</u>	<u>142,259</u>	<u>2,247,238</u>
Net assets, end of year	<u>\$ 2,647,092</u>	<u>\$ 48,993</u>	<u>\$ 2,696,085</u>

See accompanying notes to financial statements.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

1. NATURE OF ACTIVITIES

The Society of St. Vincent de Paul Archdiocesan Council of Indianapolis, Inc. – Special Works (“SVdP”), is a not-for-profit organization located in Indianapolis, Indiana whose mission is to provide basic needs to people and families in need without discrimination. SVdP has no paid employees and its operations are supported completely by volunteers. All supporting donations come directly from individuals, private businesses, and public institutions. The distribution center provides free distribution of furniture, appliances and clothing and long term loaning of sickroom equipment. The client choice food pantry provides free food to the needy regardless of race, religion, or gender. Foodstuffs are procured from Gleaners Food Bank, the USDA, private donors and bulk purchases from vendors.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Accounting Method

SVdP prepares its financial statements on the modified cash basis of accounting. Under that basis, contributions and other revenues are recognized when received rather than when promised or earned, and expenses (including food and other items purchased for distribution) are generally recognized when paid rather than when the obligation is incurred. Fixed assets are capitalized and depreciated. The modified cash basis of accounting differs from accounting principles generally accepted in the United States of America primarily because SVdP has not recognized pledges receivable from donors, accounts payable to vendors, and their related effects on the change in net assets. In addition, SVdP does not recognize the value of donated property, goods and services.

Basis of Presentation

The financial statements presented herein include the operations of the distribution center, food pantry, E.A.S.Y. Food Program, and development and administrative departments. These activities constitute the “Special Works” division of SVdP. These financial statements do not include the “Council” division of SVdP, which acts as the central umbrella for the organization, collects dues from members, and pays for annual convention and national meeting expenses. These financial statements also do not include the balances and activities of the Society of St. Vincent de Paul Conferences which are groups throughout the geographic region that serve the needy locally.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

Net assets, support, revenues, gains and losses are classified based on the existence or absence of donor-imposed restrictions. Accordingly, the net assets of SVdP are classified and reported as follows:

Unrestricted net assets – Net assets not subject to donor-imposed restrictions. SVdP maintains two unrestricted funds as follows:

Operating - includes all programs and administrative functions of SVdP.

Board designated - includes all funds not available for general operations without the prior approval of the Board of Directors.

Temporarily restricted net assets – Net assets subject to donor-imposed restrictions relating to a stipulated purpose or a specified period of time. When a donor restriction expires, that is, when a stipulated time restriction ends or purpose restriction is accomplished, temporarily restricted net assets are reclassified to unrestricted net assets and reported in the Statement of Support, Revenues, and Expenses as net assets released from restrictions.

Cash Equivalents

SVdP considers all highly liquid investments purchased with original maturities of three months or less to be cash equivalents, but excludes cash equivalents held by fund managers and included in investments. Cash equivalents are carried at cost, which approximates market value, and consist of bank money market accounts.

Certificates of Deposit

SVdP held certificates of deposit at September 30, 2009 with interest rates ranging from 1.40% to 3.90% and maturity dates between October 2009 and May 2010. Interest is recognized when received.

Investments

SVdP records its investments at fair market value. Changes in unrealized appreciation or depreciation of investments are reflected in the Statement of Support, Revenues, and Expenses in the period in which such changes occur.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

Gift Certificate Inventory

Gift certificate inventory is stated at cost determined on the specific identification method.

Property and Equipment

SVdP capitalizes all significant purchases of property and equipment at cost. The value of donated property is not recognized in the financial statements. Costs of ordinary maintenance and repairs are expensed as incurred. Depreciation is computed on the straight-line method over the estimated useful lives of the assets, which range from 3 to 30 years.

Support and Revenue Recognition

Contributions are recognized as support in the period the cash is received. Support that is restricted by the donor is reported as an increase in temporarily restricted net assets. Support that is not restricted by the donor is reported as an increase in unrestricted net assets.

Contributions that must be used to acquire property and equipment are reported as temporarily restricted support. Absent donor stipulations regarding how long those assets must be maintained, SVdP reports expirations of donor restrictions as the acquired assets are purchased. SVdP reclassifies temporarily restricted net assets to unrestricted net assets at that time.

Income Tax Status

SVdP is exempt from federal and state income taxes under Section 501(c)(3) of the U.S. Internal Revenue Code and related state laws and is not considered to be a private foundation. Prior to October 1, 2008, SVdP was not required to file Form 990.

Estimates

The preparation of financial statements in conformity with the modified cash basis requires management to make estimates and assumptions that affect the reported amount of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amount of support, revenues and expenses during the reporting period. Actual results could differ from these estimates.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

Subsequent Events

SVdP evaluates events occurring subsequent to the date of the financial statements in determining the accounting for and disclosure of transactions and events that affect the financial statements. Subsequent events have been evaluated through February 9, 2011, which is the date the financial statements were available to be issued.

3. INVESTMENTS

The Fair Value Measurements and Disclosures Topic of the Financial Accounting Standards Board Accounting Standards Codification provides a comprehensive framework for measuring fair value and expands required disclosures concerning fair value measurements. Specifically, the standard sets forth a definition of fair value and establishes a hierarchy prioritizing the inputs to valuation techniques, giving the highest priority to quoted prices in active markets for identical assets and liabilities and the lowest priority to unobservable value inputs.

The standard defines levels within the hierarchy of inputs as follows:

- Level 1 – Unadjusted quoted prices for identical assets and liabilities in active markets.
- Level 2 – Quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets (other than those included in Level 1) which are observable for the asset or liability, either directly or indirectly.
- Level 3 – Valuations derived from valuation techniques in which one or more significant inputs or significant value drivers are unobservable.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

All of SVdP's investments at September 30, 2010 and 2009 are considered to be Level 1 investments within the fair value hierarchy.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

Investments consist of the following at September 30:

	<u>2010</u>	<u>2009</u>
Common and preferred stocks	\$ -0-	\$ 137,012
Equity mutual and exchange traded funds	312,353	163,156
Corporate bonds	-0-	20,335
Government securities	-0-	9,674
Money market mutual fund	316,748	6,294
Total investments	<u>\$ 629,101</u>	<u>\$ 336,471</u>

The following summarizes the return on investments and cash, cash equivalents, and certificates of deposit during the years ended September 30:

	<u>2010</u>	<u>2009</u>
Interest and dividend income	\$ 17,464	\$ 16,217
Realized and unrealized gains, net	24,583	50
Investment management fees	(1,587)	(4,988)
Investment income, net	<u>\$ 40,460</u>	<u>\$ 11,279</u>

4. PROPERTY AND EQUIPMENT

Property and equipment consist of the following at September 30:

	<u>2010</u>	<u>2009</u>
Land	\$ 221,937	\$ 221,937
Buildings and improvements	1,466,827	1,424,456
Autos and trucks	213,864	210,864
Furniture, equipment, and software	248,738	238,562
	2,151,366	2,095,819
Accumulated depreciation	(726,152)	(633,242)
Property and equipment, net	<u>\$ 1,425,214</u>	<u>\$ 1,462,577</u>

Depreciation expense for the years ended September 30, 2010 and 2009 amounted to \$92,907 and \$86,137, respectively.

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

5. NET ASSETS

Board Designated Net Assets

The Board of Directors has designated unrestricted net assets for the following purposes at September 30:

	<u>2010</u>	<u>2009</u>
Future programs	\$ 900,000	\$ 945,000
Current cash flow	14,112	15,922
Truck replacement	21,850	21,850
Appliances	50,000	50,000
Bedding	1,500	1,500
Capital improvements - Food pantry	131,643	148,079
	<u>\$ 1,119,105</u>	<u>\$ 1,182,351</u>

Temporarily Restricted Net Assets

Temporarily restricted net assets include the following at September 30:

	<u>2010</u>	<u>2009</u>
Food purchases	\$ 1,303	\$ 26,609
Food pantry improvements	10,449	7,747
Distribution center roof repairs	20,000	-0-
Twinning program	8,955	12,280
Security and technology improvements	2,357	2,357
	<u>\$ 43,064</u>	<u>\$ 48,993</u>

SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS, INC. – SPECIAL WORKS

NOTES TO FINANCIAL STATEMENTS SEPTEMBER 30, 2010 AND 2009

Net Assets Released From Restrictions

Net assets were released from donor-imposed restrictions during the years ended September 30, 2010 and 2009 as follows:

	<u>2010</u>	<u>2009</u>
Food program	\$ 155,115	\$ 283,696
Food purchases	117,306	48,391
Food pantry improvements	52,298	175,225
Distribution center improvements	-0-	48,321
Twinning program	3,600	11,200
Security and technology improvements	-0-	18,035
	<u>\$ 328,319</u>	<u>\$ 584,868</u>

6. RISKS AND UNCERTAINTIES

SVdP's investments (Note 3) are exposed to various risks such as interest rate, market and credit. Due to the level of risk associated with these securities and the level of uncertainty related to changes in the value, it is at least reasonably possible that changes in the various risk factors will occur in the near term that could materially affect the amounts reported in the accompanying financial statements.

7. CONCENTRATIONS

SVdP maintains its cash, cash equivalents, and certificates of deposit in financial institution deposit accounts which at times may exceed federally insured limits. SVdP has not experienced any losses in such accounts and believes it is not exposed to any significant credit risk on cash, cash equivalents, and certificates of deposit.

All of SVdP's investments are managed and held by one investment management firm. One money market mutual fund represents 50%, and two exchange traded equity funds represent 29%, of total investments at September 30, 2010. No individual funds accounted for more than 10% of investments at September 30, 2009.

One donor accounted for 10% and 16% of total contributions for the years ended September 30, 2010 and 2009, respectively.

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).
- Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.**

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofits.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization	Employer identification number
	Society of St. Vincent dePaul, Archdiocesan Council of Indianapolis, Inc.	37-1507632
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	3001 E. 30th St.	
File by the due date for filing your return. See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Indianapolis IN 46218	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Terry R. Picket, Chief Financial Officer

Telephone No. ► 317-924-5775 FAX No. ► 317-924-5781

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) 5496. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☒ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until May 15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
- ☐ calendar year 20 or
- ☒ tax year beginning October 1, 20 09, and ending September 30, 20 10.

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☐ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).	
Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization
	Employer identification number
	Number, street, and room or suite no. If a P.O. box, see instructions.
City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐ ☐

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☐ Telephone No. ☐ FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) ☐. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until , 20 .
- For calendar year , or other tax year beginning , 20 , and ending , 20 .
- If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- State in detail why you need the extension

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature Title Council President Date 1/12/11

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension, complete only Part I** and check this box ☐
- If you are filing for an **Additional (Not Automatic) 3-Month Extension, complete only Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	

Enter the Return code for the return that this application is for (file a separate application for each return) ☐

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

• The books are in the care of ►

Telephone No. ► FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until _____, 20____, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☐ calendar year 20____ or
► ☐ tax year beginning _____, 20____, and ending _____, 20____.

2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

• If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.

• If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing your return. See instructions.	Name of exempt organization	Employer identification number
	Society of St. Vincent dePaul, Archdiocesan Council of Indianapolis, Inc.	37-1507632
	Number, street, and room or suite no. If a P.O. box, see instructions.	
	3001 E. 30th St.	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Indianapolis, IN 46218	

Enter the Return code for the return that this application is for (file a separate application for each return)

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Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	03	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of **Terry R. Picket, Chief Financial Officer**
Telephone No. **317-524-5775** FAX No. **317-924-5781**
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) **5496**. If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☒ and attach a list with the names and EINs of all members the extension is for.

- I request an additional 3-month extension of time until **August 15,** 20 **11**.
- For calendar year _____, or other tax year beginning **October 1,** 20 **09**, and ending **September 30,** 20 **10**.
- If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- State in detail why you need the extension **This is only the second year this organization has been required to file a Form 990. The organization has fifty five operating units and we need additional time to gather the necessary information from the operating units in order to file a complete and accurate return.**

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.	8c	\$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature *Patrick M. Jones* Title *Council President* Date *5/2/11*