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132001 01-23-12

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) ▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0047 Open to Public

Inspection

Form 990 (2011)

	A	or the 2	2011 calendar year, or tax year beginning JUL 1, 2011 and ending	JUN 30, 2012	
	В	Check if	C Name of organization	D Employer identific	cation number
	8	applicable	CATHOLIC SCHOOL FOUNDATION OF THE		
		Address change	DIOCESE OF SIOUX CITY		
		Name change	Doing Business As	23-7	030715
		Initial retum	Number and street (or P.O box if mail is not delivered to street address) Room/suite		
	느	Termin- ated	1821 JACKSON STREET) 255-7933
	<u> </u>	Amended retum Applica-	City or town, state or country, and ZIP + 4	G Gross receipts \$	4,699,935.
		tion pending	SIOUX CITY, IA 51105-1055	H(a) Is this a group re	
			F Name and address of principal officer.BISHOP R WALKER NICKLES SAME AS C ABOVE		Yes X No
			pt status: X 501(c)(3) 501(c) ()	H(b) Are all affiliates inc	luded? Yes No
			► N/A	H(c) Group exemption	
					State of legal domicile_IA
			Summary		
			nefly describe the organization's mission or most significant activities: SUPPORT C	ATHOLIC SCHO	OLS.
	Activities & Governance				
	irna	2 Ch	neck this box If the organization discontinued its operations or disposed of mor	e than 25% of its net as	sets.
	٥ ٧	3 Nu	imber of voting members of the governing body (Part VI, line 1a)	3	10
	<u>ග</u>	4 Nu	imber of independent voting members of the governing body (Part VI, line 1b)	4	7
-	es	5 To	tal number of individuals employed in calendar year 2011 (Part V, line 2a)	5	0
2013	<u>i</u>	6 To	tal number of volunteers (estimate if necessary)	6	0
	Act	l	tal unrelated business revenue from Part VIII, column (C), line 12	7a	0.
∞		b Ne	et unrelated business taxable income from Form 990-T, line 34	7b	0.
87				Prior Year	Current Year
出	ue		ontributions and grants (Part VIII, line 1h)	186,735.	1,713,985.
11	Revenue		ogram service revenue (Part VIII, line 2g)	391,569.	277,641.
品	æ		vestment income (Part VIII, column (A), lines 3, 4, and 7d) her revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<20,541.	
Z			tal revenue · add lines 8 through 11 (must equal Part VIII, column (A), line 12)	557,763.	1,921,674.
SCANNED FEB			ants and similar amounts paid (Part IX, column (A), lines 1-3)	228,766.	387,621.
ပ္တ		ì	enefits paid to or for members (Part IX, column (A), line 4)	0.	0.
V)	Š	1	laries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	Expenses	16a Pro	ofessional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	xpe		tal fundraising expenses (Part IX, column (D), line 25)		
	Û	17 Ot	her expenses (Part IX, column (A), lines 11a-11d, 1124e)	78,000.	92,970.
		18 To	her expenses (Part IX, column (A), lines 1 a-11q(21c24e). tal expenses. Add lines 13-17 (must equal Part IX, column (A) line 25	306,766.	480,591.
		19 Re	venue long expenses. Subtract line 19 from line 19	250,997.	1,441,083.
	Net Assets or Fund Balances		1 1	eginning of Current Year	End of Year
	Ssel Bala			22,550,550.	23,851,598.
	Jet A	,	tal liabilities (Part X, line 26)	13,267,916. 9,282,634.	13,278,852. 10,572,746.
	Do		at assets or fund balances. Subtract line 21 from line-20.1, U l Signature Block	9,202,034.	10,3/2,/40.
			s of perjury, I declare that I have examined this return, including accompanying schedules and staten	nents, and to the best of my	knowledge and helief it is
		-	ind complete Qeclayation of preparer (other than officer) is based on all information of which prepare	•	Kilowicago and bolici, it is
	,		x for Walker Nickless	x X II	クハコ
	Sigr	, ₹	Signature of officer	Date	-201
	Her	e 	BISHOP R WALKER NICKLESS, PRESIDENT		
			Type or print name and title		
			The property of the training the property of t	Date/ Check C	PTIN
	Paid -	 	ATTY BLANKENSHIP POUT BLOMEMSHY)	Self-employer	
	Prep		rm's name KING, REINSCH, PROSSER & CO. L.L.P.	/ Firm's EIN	42-0941961
	Use	Uniy Fii	rm's address 522 4TH STREET, SUITE 200	7.1	12 250 5557
	NA =	the IDC	SIOUX CITY, IA 51101	Phone no /	X Yes No
	ıvıay	me ins	discuss this return with the preparer shown above? (see instructions)		X Yes No

LHA For Paperwork Reduction Act Notice, see the separate instructions.

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		v	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Λ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	_		Х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	١.		Х
	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		х
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Α_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			Х
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		A
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		Х
_	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	 		
8		8		Х
^	Schedule D, Part III Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
9	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a		X
h	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	11b		X
С	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	11c		X
đ	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	11d	Х	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses]
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI, XII, and XIII	12a	X	ļ
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			.,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	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,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	14b		х
40	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	140		
15	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			
10	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		х
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		Х
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	Х	
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		Х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
		Form	990 (2011)

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Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
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		X
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		X
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		X
Ь	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		
	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		X
ь	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		Х
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		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	ĺ	X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	!]	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
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		Х
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		Х
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	x	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		Х
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	ĺ	Х
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	1	X
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	Х	

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Statements Regarding Other IRS Filings and Tax Compliance

* **	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	3		
	- · · · · · · · · · · · · · · · · · · ·] '		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		1	
	(gambling) winnings to prize winners?	10	<u> </u>	
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	<u>'</u>	1	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	<u> </u>	X
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	!	ĺ	
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	ļ	X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a		5a		X
b		5b		
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c_	<u> </u>	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	ا م		Х
_	any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6a	<u> </u>	1
b	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	Х	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," Indicate the number of Forms 8282 filed during the year 7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	71	<u> </u>	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		X
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		Α
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting			ĺ
9	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		ļ
	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		·
10	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities]		
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			ĺ
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			ļ
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
L	Note. See the instructions for additional information the organization must report on Schedule O.			
b				ĺ
_	organization is licensed to issue qualified health plans Enter the amount of reserves on hand 13b			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
			990 ((2011)

Form 990 (2011)

DIOCESE OF SIOUX CITY

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 ĪΫ́

	Check if Schedule O contains a response to any question in this Part VI					Δ
<u>Sec</u>	tion A. Governing Body and Management			I		
		ا ا	10		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	10			
	If there are material differences in voting rights among members of the governing body, or if the governing	ŀ				
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0		7			
Ь	Enter the number of voting members included in line 1a, above, who are independent	1b	, Al.,			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	p with	any otner			Х
	officer, director, trustee, or key employee?		.	2		
3	Did the organization delegate control over management duties customarily performed by or under the	e airea	t supervision			X
	of officers, directors, or trustees, or key employees to a management company or other person?	200	51 10	3		<u>~</u>
4	Did the organization make any significant changes to its governing documents since the prior Form S		is filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's ass	sets?	•••	5		X
6	Did the organization have members or stockholders?		•	6		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	- .		Х
_	more members of the governing body?	. ما داد د ه		7a_		
ь	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	STOCKN	olders, or	76		Х
_	persons other than the governing body?	a b	· fallerman	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year.	ai Dy (N	ะาบแบพสาย	8a	Х	
	The governing body?			8b	X	
	Each committee with authority to act on behalf of the governing body?	ر اممام	-4 4b -	QĐ	-	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	iched a	at the	9		Х
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	010011	Code l	9		
<u>sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenue	e Code.)		Yes	No
٠.	Dutation and a second a second and a second			10a	163	X
	Did the organization have local chapters, branches, or affiliates?	hanton	affiliates	IVa		
D	If "Yes," did the organization have written policies and procedures governing the activities of such cland branches to ensure their operations are consistent with the organization's exempt purposes?	napter	s, animates,	10b		
		ly bofo	re filing the form?	11a		X
	 Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990. 					
	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise	to con	flicts?	12b	X	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y			12.0		
C	in Schedule O how this was done	C3, C1	.501,60	12c	х	
13	Did the organization have a written whistleblower policy?			13	X	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approve	al bv ın	dependent			·····
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		(··-			
а	The organization's CEO, Executive Director, or top management official			15a		Х
b	Other officers or key employees of the organization			15b		X
~	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 arranger	ment w	vith a			
-	taxable entity during the year?			16a		<u>X</u>
ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalua	te its p	articipation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organic					
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filled NONE					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-1	Γ (Sect	on 501(c)(3)s only) a	vallab	le	
	for public inspection Indicate how you made these available. Check all that apply.					
	Own website Another's website X Upon request					
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, co	onflict o	of interest policy, and	d finan	cial	
	statements available to the public during the tax year.					
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the organizat	ion: 🕨		
	THE ORGANIZATION - (712)255-7933					
(AAAA	1821 JACKSON STREET, SIOUX CITY, IA 51105-1055	<u>-</u>	<u> </u>			
132006	La Company of the Com			Form	990/	20111

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Form 990 (2011)

DIOCESE OF SIOUX CITY

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

Check if Schedule O contains a response to any question in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

ack this box if peither the organization nor any related organization compensated any current officer, director, or trustee

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization	nor any related	d organization compensat				npe	nsat		lirector, or trustee.	
(A)	(B)							(D)	(E)	(F)
Name and Title	Average	(do	not c	POS heck	Ition more	than	one	Reportable	Reportable	Estimated
	hours per	box	, unle	ss pe	rson	s bot or/trus	h an	compensation	compensation	amount of
	week	├	cer an	dad	recto	T	(ee)	from	from related	other
	(describe	슗						the .	organizations	compensation
	hours for	5	8			zated		organization	(W-2/1099-MISC)	from the
	related	l sta	trus		88	nber		(W-2/1099-MISC)		organization and related
	organizations in Schedule	Eg a	tona		율	St CO	١.,			organizations
	O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			o, gameanono
(1) BISHOP R WALKER NICKLESS										
PRESIDENT	1.00	X		X			<u> </u>	0.	26,004.	8,900.
(2) JAMES BRIDE										_
DIRECTOR	1.00	Х						0.	0.	0.
(3) RICK KNEIP								_	_	_
DIRECTOR	1.00	Х						0.	0.	0.
(4) GRACE IVEY					i					_
DIRECTOR	1.00	X			<u> </u>		L	0.	0.	0.
(5) MICHELLE PUETZ								_	_	
DIRECTOR	1.00	X			<u> </u>	ļ		0.	0.	0.
(6) REV MSGR R MARK DUCHAINE									25 500	0 000
SECRETARY/TREASURER	1.00	X		X	ļ			0.	25,500.	8,900.
(7) ALLEN WILLETT	1								0	
CHAIRPERSON	1.00	X						0.	0.	0.
(8) REV BRUCE LAWLER	1 00	١,,							0	^
DIRECTOR	1.00	Λ				ļ		0.	0.	0.
(9) MIKE HURLBURT	1 00	, .						0.	0.	0
DIRECTOR	1.00	X			-	 		0.	<u> </u>	0.
(10) DAN RYAN	1 00	v				ļ			00 270	11 206
DIRECTOR	1.00	Α.		_		<u> </u>	<u> </u>	0.	88,278.	11,306.
						-	_			
		-								
						<u> </u>		<u> </u>		Form 990 (2011)

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	t VII Section A. Officers, Directors, Tr	ustees, Key Er	nplo	yee	s, a	nd l	ligh	est	Compensated Employ	ees (continued)			
	(A) Name and title	(B) Average hours per week	(do xod	not c	Pos heck ss pe	C) Ition more rson		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	1	Estim amou oth	nated int of
		(describe hours for related organizations in Schedule O)	Individual frustee or director	Institutional frustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS	L	from from organi and re organiz	the zation elated
										,			
													•
1b	Sub-total Sub-total								0.	139,78		29,	106.
d	Total from continuation sheets to Part V Total (add lines 1b and 1c) Total number of individuals (including but in			linte	-d of		>		0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 • 0 •	139,78		29,	0.
	compensation from the organization			uste			-) WI			,000 of reportable		Ye	0 es No
3	Did the organization list any former officer line 1a? <i>If</i> "Yes," complete Schedule J for story any individual listed on line 1a, is the s	such individual									-	3	Х
5	and related organizations greater than \$15 Did any person listed on line 1a receive or	0,000? If "Yes, accrue comper	" co. ısatı	<i>mple</i> on f	ete S rom	Sche any	dule unr	J f	or such individual	-		4	X
Sec	rendered to the organization? If "Yes," contion B. Independent Contractors	nplete Schedul	e J f	or su	ıch	pers	on					5	X
1	Complete this table for your five highest co										ensat	tion fron	n
	the organization. Report compensation for (A) Name and business	-		ONE		VILIT	OI W		the organization's tax (B) Description of s		Со	(C) mpensa	ation
													 · · ·
		· - · -							· · · · · · · · · · · · · · · · · · ·			•	
						41							
2	Total number of independent contractors (\$100,000 of compensation from the organ		ot III	nite		tho:		ed	above, who received m	iore than		orm ga	0 (2011)
											• '	J UU	- (/

23-7030715 DIOCESE OF SIOUX CITY Page 9 Form 990 (2011) Statement of Revenue Part VIII (D) (B) (A) (C) Revenue Total revenue Related or Unrelated excluded from exempt function business tax under sections 512, revenue revenue 513, or 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 1b b Membership dues 148,532. 1c Fundraising events 71,124. 1d d Related organizations 1e e Government grants (contributions) f All other contributions, gifts, grants, and 1f 1,494,329 similar amounts not included above 1,085,251 9 Noncash contributions included in lines 1a-1f \$ 713,985 h Total. Add lines 1a-1f **Business Code** Program Service Revenue 2 a f All other program service revenue Total. Add lines 2a-2f Investment income (including dividends, interest, and 149,984. 149,984. other similar amounts) Income from investment of tax-exempt bond proceeds 4 Royalties (I) Real (II) Personal 6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (II) Other 2799966. assets other than inventory b Less cost or other basis 2672309. and sales expenses 127,657.c Gain or (loss) 127,657. 127,657. d Net gain or (loss) 8 a Gross income from fundraising events (not Other Revenue including \$ 148,532. of contributions reported on line 1c). See 36,000 Part IV, line 18 ь 105,952. b Less. direct expenses <69,952.> <69,952.Þ c Net income or (loss) from fundraising events 9 a Gross income from gaming activities See Part IV, line 19 b Less direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory **Business Code** Miscellaneous Revenue 11 a d All other revenue

> 207,689. Form **990** (2011)

921,674.

Õ.

e Total. Add lines 11a-11d

Total revenue See instructions

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)

Δ-	Check if Schedule O contains a responsion include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and	207 (21	207 621		
	organizations in the United States See Part IV, line 21	387,621.	387,621.		
2	Grants and other assistance to individuals in				
	the United States See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. 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 accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits .				
10	Payroll taxes				
11	Fees for services (non-employees):	50 000		F2 222	
а	Management .	52,380.		52,380.	
b	Legal .	6 100			
С	Accounting .	6,100.		6,100.	
d	Lobbying .				
е	Professional fundraising services See Part IV, line 17	0.7.050		07.050	
f	Investment management fees	27,950.		27,950.	
g	Other				
12	Advertising and promotion	5 646			
13	Office expenses	5,646.		5,646.	
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	50.		50.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	844.		844.	
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance				•
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а					
b					
c					
d					
е	All other expenses			72	
25	Total functional expenses. Add lines 1 through 24e	480,591.	387,621.	92,970.	0
26	Joint costs Complete this line only if the organization		ļ		
	reported in column (B) joint costs from a combined		Ì		
	educational campaign and fundraising solicitation	,			
	Check here If following SOP 98-2 (ASC 958-720)				

Form 990 (2011)

Pa	rt X	Balance Sheet			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	86,152.	1	129,309.
	2	Savings and temporary cash investments		2	26,027.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	4,793.
	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)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
		employees' beneficiary organizations (see instructions)		6	
sts	7	Notes and loans receivable, net	78,794.	7	
Assets	8	Inventories for sale or use		8	
⋖	9	Prepaid expenses and deferred charges	26,709.	9	4,445.
	l	Land, buildings, and equipment, cost or other			
		basis. Complete Part VI of Schedule D			
	ь	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	17,962,555.	11	18,219,618.
	12	Investments - other securities. See Part IV, line 11	, , , , , , , , , , , , , , , , , , , ,	12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
		Other assets. See Part IV, line 11	4,396,340.	15	5,467,406.
	15	Total assets. Add lines 1 through 15 (must equal line 34)	22,550,550.	16	23,851,598.
	16	Accounts payable and accrued expenses	27,583.	17	9,122.
	18	• •		18	
	19	Grants payable		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees,			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Ξ	22	highest compensated employees, and disqualified persons. Complete Part II			
Ë		of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
	25	parties, and other liabilities not included on lines 17-24) Complete Part X of			
		Schedule D	13,240,333.	25	13,269,730.
	26	Total liabilities. Add lines 17 through 25	13,267,916.	26	13,278,852.
	20	Organizations that follow SFAS 117, check here X and complete			
S		lines 27 through 29, and lines 33 and 34.			
ĕ	27	Unrestricted net assets	3,337,173.	27	3,431,525.
alar	28	Temporarily restricted net assets	903,776.	28	1,980,320.
ĕ	29	Permanently restricted net assets	5,041,685.	29	5,160,901.
Š		Organizations that do not follow SFAS 117, check here			
Ē		complete lines 30 through 34.			
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds		30	
SSe	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
ţ	32	Retained earnings, endowment, accumulated income, or other funds	-	32	•
N	33	Total net assets or fund balances	9,282,634.	33	10,572,746.
	34	Total liabilities and net assets/fund balances	22,550,550.	34	23,851,598.
	1.04	Total Industrial district description of districts			Form 990 (2011)

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form	990 (2011) DIOCESE OF SIOUX CITY	23-7	03071	5 P:	age 12
	t XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				X
		,			
1	Total revenue (must equal Part VIII, column (A), line 12)	1			574.
2	Total expenses (must equal Part IX, column (A), line 25)	2			591.
3	Revenue less expenses. Subtract line 2 from line 1	3			083.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			534.
5	Other changes in net assets or fund balances (explain in Schedule O)	5			971.
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	10,5	72 ,	746.
Pa	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	Ο.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?		2b	X	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audıt,		ŀ	
	review, or compilation of its financial statements and selection of an independent accountant?		20	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	d on a			
	separate basis, consolidated basis, or both:				
	X 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 Si	ngle Audıt			
	Act and OMB Circular A-133?	••	3a		X
ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

2011

Open to Public Inspection

Name of the organization

CATHOLIC SCHOOL FOUNDATION OF THE DIOCESE OF SIOUX CITY

Employer identification number 23-7030715

Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. c ___ Type III · Functionally integrated d Type III - Other a Type I **b** Type II e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? g A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, Yes the governing body of the supported organization? 11g(i) (ii) A family member of a person described in (i) above? 11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s). (iii) Type of (vi) Is the (iv) is the organization (v) Did you notify the (i) Name of supported (ii) EIN (vii) Amount of organizátion in col organization in col (i) listed in your organization in col organization (i) organized in the support (described on lines 1-9 US? governing document? (i) of your support? above or IRC section (see instructions)) Yes Yes Nο

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

Schedule A (Form 990 or 990-EZ) 2011

132021 01-24-12 Schedule A (Form 990 or 990-EZ) 2011 DIOCESE OF SIOUX CITY

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

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

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
	Gifts, grants, contributions, and		:				
	membership fees received. (Do not						
	include any "unusual grants.")	334,863.	197,864.	264,236.	186,735.	628,734.	1612432.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge	224 252	107 064	264 226	106 725	600 704	1610400
4	Total. Add lines 1 through 3	334,863.	197,864.	264,236.	186,735.	628,734.	1612432.
5	•						
	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,						254 210
	column (f)		·····		· · · · · · · · · · · · · · · · · · ·		254,210.
	Public support. Subtract line 5 from line 4						1358222.
	ction B. Total Support	1					
	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010 186,735.	(e) 2011	(f) Total
7	Amounts from line 4	334,863.	197,864.	264,236.	180,733.	628,734.	1612432.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	165 004	126 000	124 222	125 742	140 004	602 062
	and income from similar sources	165,904.	120,999.	124,232.	125,745.	149,984.	692,862.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital					·	
	assets (Explain in Part IV.)						2305294.
	Total support. Add lines 7 through 10	L			l	12	2303234.
	Gross receipts from related activities,						
13	First five years. If the Form 990 is for		tirst, secona, tnir	a, tourth, or titth ta	ax year as a sectio	11 50 1 (0)(3)	▶□
Sad	organization, check this box and stop ction C. Computation of Publ		rcentage		······································		
	Public support percentage for 2011 (column (f))		14	58.92 %
	Public support percentage from 2010	, ,,	•	Old Till (1))		15	59.08 %
	33 1/3% support test - 2011. If the			n line 13, and line	14 is 33 1/3% or n		
102	stop here. The organization qualifies					,	► X
ŀ	33 1/3% support test - 2010. If the				l line 15 is 33 1/3%	or more, check th	
_	and stop here. The organization qual					·	▶ □
1 7a	10% -facts-and-circumstances tes				e 13, 16a, or 16b, a	and line 14 is 10%	or more,
	and if the organization meets the "fac						
	meets the "facts-and-circumstances"					-	ightharpoons
ŀ	10% -facts-and-circumstances tes					17a, and line 15 is	 10% or
•	more, and if the organization meets the						
	organization meets the "facts-and-cire						▶□
18	Private foundation. If the organization						s
_ <u></u> _						edule A (Form 990	
							-

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 or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support									
Cale	endar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(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 per-									
	formed, or facilities furnished in any activity that is related to the					ì				
	organization's tax-exempt purpose					į				
3	Gross receipts from activities that									
•	are not an unrelated trade or bus-									
	iness under section 513					1				
4	Tax revenues levied for the organ-				 					
•	ization's benefit and either paid to			1						
	or expended on its behalf									
-	The value of services or facilities				 					
5	furnished by a governmental unit to	1								
	the organization without charge				1					
_	•				 					
	Total. Add lines 1 through 5	 			+	 				
7 a	Amounts included on lines 1, 2, and									
	3 received from disqualified persons	<u> </u>		<u> </u>	 					
0	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					<u> </u>				
C	Add lines 7a and 7b	<u></u>			ļ	ļ				
	Public support (Subtract line 7c from line 6)				<u> </u>					
	tion B. Total Support				,					
Cale	ndar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total			
9	Amounts from line 6				<u> </u>					
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									
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)				 					
	First five years. If the Form 990 is for	the organization's	first second thir	d fourth or fifth to	ax vear as a section	n 501(c)(3) organiz	ration			
•-	check this box and stop here	me organization s	mai, accord, ithi	a, routar, or mar to	un year as a section	ar oo rogo, organiz	.auon,			
Sec	ction C. Computation of Publi	c Support Pe	rcentage							
	Public support percentage for 2011 (II			olumn (fl)		15				
	Public support percentage from 2010	,	•	O.G.I.III (1 <i>))</i>		16	<u>%</u> %			
										
	tion D. Computation of Inves				_	47				
	Investment income percentage for 20	·		ie 13, column (f))		17	<u>%</u>			
	Investment income percentage from 2	•	· ·	an line at a second	45	18	%			
19a	33 1/3% support tests - 2011. If the						/ is not			
	more than 33 1/3%, check this box ar	-		• •			▶ ∐			
b	b 33 1/3% support tests - 2010. 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%, che					-	▶⊨			
<u>20</u>	Private foundation. If the organization	n did not check a l	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	▶			

132023 01-24-12

CATHOLIC SCHOOL FOUNDATION OF THE

Schedule A (Form 990 or 990-EZ) 2011 DIOCESE OF SIOUX CITY	23-/030/15 Page 4
Part IV Supplemental Information. Complete this part to provide the explanations required by Part II, line and Part III, line 12. Also complete this part for any additional information (See instructions).	e 10; Part II, line 17a or 17b;
SCHEDULE A, LIST OF UNUSUAL GRANTS RECEIVED:	,
UNRESTRICTED ESTATE GIFT	
DATE: 09/13/07 AMOUNT: 15332.	
PERMANENTLY RESTRICTED ESTATE GIFT	
DATE: 02/27/09 AMOUNT: 5729.	
TEMPORARILY RESTRICTED GIFT ANNUITY	
DATE: 11/28/11 AMOUNT: 1085251.	

SCHEDULE D

Internal Revenue Service

(Form 990)

Department of the Treasury

Supplemental Financial Statements

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

CATHOLIC SCHOOL FOUNDATION OF THE

DIOCESE OF STOLL CITY

Employer identification number 23-7030715

Pa	rt I Organizations Maintaining Donor Advise		Accounts Complete of the
<u> </u>			Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
	***	(a) Bollot advised tallas	(b) I dilas 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		
	are the organization's property, subject to the organization's		Yes No
6	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conf	
- B	Impermissible private benefit?		Yes No
Pa			V, line 7.
1	Purpose(s) of conservation easements held by the organization	 -	
	Preservation of land for public use (e.g., recreation or e		• •
	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 qualit	fied 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
þ	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	
_	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the orga	anization during the tax
	year -	and an Important N	
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per		Yes No
	violations, and enforcement of the conservation easements in		
6	Staff and volunteer hours devoted to monitoring, inspecting, Amount of expenses incurred in monitoring, inspecting, and		
7 8	Does each conservation easement reported on line 2(d) above		
0	and section 170(h)(4)(B)(ii)?	ve satisfy the requirements of section 170(1)(4)	Yes No
9	In Part XIV, describe how the organization reports conservati	on accompate in its revenue and expense stat	
3	include, if applicable, the text of the footnote to the organization		
	conservation easements	tion 3 inianida statements that describes the e	riganization's accounting for
Pa	t III Organizations Maintaining Collections o	f Art. Historical Treasures, or Other	r Similar Assets.
Lauti	Complete if the organization answered "Yes" to Form	· · · · · · · · · · · · · · · · · · ·	
1a	If the organization elected, as permitted under SFAS 116 (AS		and balance sheet works of art.
	historical treasures, or other similar assets held for public ext		
	the text of the footnote to its financial statements that descri		, , , , , , , , , , , , , , , , , , , ,
b	If the organization elected, as permitted under SFAS 116 (AS		balance sheet works of art, historical
_	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:	, , , , , , , , , , , , , , , , , , , ,	and the second s
	(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 tre	asures, or other similar assets for financial dair	
_	the following amounts required to be reported under SFAS 1		•••
а	Revenues included in Form 990, Part VIII, line 1		▶ \$
	Assets included in Form 990, Part X		► \$ ► \$
~	- 1000to moreove in 1 onli ovej 1 uit /1		· •

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 132051 01-23-12

Schedule D (Form 990) 2011

he	edule D (Form 990) 2011	DIOCESE OF SIOU	JX C	:ITY	23-7	030715	Page 2
a	rt III Organizations I	Maintaining Collections	of Art	t, Historical Treasures, or	Other Similar Ass	sets (continu	ied)
3	Using the organization's ac	equisition, accession, and other r	ecords	s, check any of the following that ar	re a significant use of i	ts collection it	ems
	(check all that apply):						
а	Public exhibition		d	Loan or exchange programs	3		
b	Scholarly research		е	Other			
С	Preservation for futur	re generations					
1	Provide a description of the	e organization's collections and ϵ	xplaın	how they further the organization's	s exempt purpose in P	art XIV.	
5	During the year, did the org	janization solicit or receive donat	ions of	f art, historical treasures, or other s	sımılar assets		
	to be sold to raise funds rai	ther than to be maintained as pa	rt of the	e organization's collection?		Yes	No

	to be s	old to raise funds rather than to be maintained as part of the organization's collection?		Yes	No_
Pa		Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Foreported an amount on Form 990, Part X, line 21.	orm 990, F	Part IV, line 9, or	
1a	ls the c	organization an agent, trustee, custodian or other intermediary for contributions or other assets not in	cluded		
	on Forr	n 990, Part X?		Yes	No
b	If "Yes,	explain the arrangement in Part XIV and complete the following table:			
				Amoun	t
С	Beginn	ing balance	1c	·	
d	Additio	ns during the year	1d		
е	Distribu	utions during the year	1e		
f	Ending	balance	1f		
2a	Did the	organization include an amount on Form 990, Part X, line 21?		Yes	☐ No
_	If "Van	a value the arrangement in Bort VIV			

		(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	1,568,192.	1,382,920.	1,258,289.	1,502,431.	1.44 M 1222 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1
b	Contributions	115,949.	230.	0.	0.	
С	Net investment earnings, gains, and losses	<2,181.>	242,152.	124,631.	<218,142.	×
d	Grants or scholarships					
е	Other expenditures for facilities	20 455	57 110		35 000	
	and programs	29,455.	57,110.		26,000.	
f	Administrative expenses					······
g	End of year balance	1,652,505.	1,568,192.	1,382,920.	1,258,289.	

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

а	Board designated or quasi-er	ndowment 🕨	•	00
b	Permanent endowment ▶	96.00	%	
	Temporarily restricted endow	ment 🕨	4.00	%
	The percentages in lines 2a	2h and 2c sho	ould equal 10	0%

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)		X
3a(ii)		Х
3ь		

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				==
c Leasehold improvements				
d Equipment				
e Other				
otal. Add lines 1a through 1e. (Column (d) mu	st equal Form 990. Part X. colur	mn (B), line 10(c).)	•	

Schedule D (Form 990) 2011

Part VII Investments - Other Securities. Se	e Form 990, Part X, III	ne 12		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuat t or end-of-year mark	
(1) Financial derivatives				
(2) Closely-held equity interests			····	
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F) (G)				
(H)				
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12) ▶				
Part VIII Investments - Program Related. S	ee Form 990, Part X, I	ine 13.		· · · · · · · · · · · · · · · · · · ·
(a) Description of investment type	(b) Book value		(c) Method of valuat t or end-of-year mark	
(1)				 .
(2)				
(3)				
(5)				
(6)	 			
(9)	-			
(10)				
Total (Col (b) must equal Form 990, Part X, col (B) line 13)				
Part IX Other Assets. See Form 990, Part X, line	15.			
	Description			(b) Book value
(1) CSV OF LIFE INSURANCE				73,684.
(2) CHARITABLE GIFT ANNUITIES				1,109,999.
(3) INTEREST RECEIVABLE				53,950.
(4) INTEREST IN NET ASSETS OF	THE DIOCES	SE OF SIOUX C	ITY (CC)	4,229,773.
(5)				
(6)		····		
(7)				
(8)				
(9)				
(10) Total. (Column (b) must equal Form 990, Part X, col (B) line	- 15)			5,467,406.
Part X Other Liabilities. See Form 990, Part X,				<u> </u>
1. (a) Description of liability		(b) Book value		
(1) Federal income taxes				
(2) FUNDS HELD FOR OTHERS		13,269,730.		
(3)				
(4)				
(5)				
(6)	-	-		
(7)				
(8)				
(9)				
(10)				
(11) Tetal (Column (b) must equal Form 990, Part Y, col (B) line	25)	13,269,730		
Total. (Column (b) must equal Form 990, Part X, col (B) line FIN 48 (ASC 740) Footnote in Part XIV, provide the text of the footnote to 2. FIN 48 (ASC 740)	o the organization's financial	statements that reports the organiz	ation's liability for uncertain	tax positions under
Z. FIN 48 (ASC 740) 132053 01-23-12			Sche	dule D (Form 990) 2011

2011.05040 CATHOLIC SCHOOL FOUNDATION 2182___1

132054 01-23-12

SCHEDULE G

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ. ➤ See separate instructions.

Open To Public Inspection

Name of the organization

CATHOLIC SCHOOL FOUNDATION OF THE

Employer identification number

DIOCESE OF SIOUX CITY 23-7030715

Part I Fundraising Activities required to complete this par	 Complete if the organization answers t. 	ered "`	es" to	o Form 990, Part IV,	line 17. Form 990-EZ	filers are not
 Indicate whether the organization rais Mail solicitations Internet and email solicitations Phone solicitations In-person solicitations Did the organization have a written of key employees listed in Form 990, P If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) purs	tion of tion of fundra (includerofess	non-g gover alsing ding o ional f	overnment grants rnment grants events fficers, directors, true fundraising services?	stees or Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundi have c or con contrib	aiser ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
			•			
			_			
			-			
otal_			>		1 th 10 0000000 th	
List all states in which the organizatio or licensing.	n is registered or licensed to solicit o	contrib	utions	or has been notified	it is exempt from re	gistration

Schedule G (Form 990 or 990-EZ) 2011

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

Schedule G (Form 990 or 990-EZ) 2011 DIOCESE OF SIOUX CITY

Part II Fundraising Events Complete (1)

2	3-	7	0	3	0	7	1	5	Page 2
-									

P	arť		•		•	
	_	of fundraising event contributions and gr	(a) Event #1	(b) Event #2	(c) Other events	1
	}		BISHOPS	(b) Event #2	NONE	(d) Total events
			DINNER		MONE	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue			(Orom type)	(
Revenue	1	Gross receipts .	184,532.			184,532.
_			140 533			140 522
	2	Less: Charitable contributions	148,532.		 	148,532.
	3	Gross income (line 1 minus line 2)	36,000.		-	36,000.
	4	Cash prizes				
	5	Noncash prizes				
ses	3	NOTICASTI PITZES				
çber	6	Rent/facility costs				
π E	ŀ					
Direct Expenses	7	Food and beverages				
	_					
	8	Entertainment	105,952.			105,952.
	9 10	Other direct expenses Direct expense summary Add lines 4 through				(105,952,
	11	Net income summary Combine line 3, column				<69,952.
Pa	irt i		answered "Yes" to Form	990, Part IV, line 19, or	reported more than	100/0020
سنسند		\$15,000 on Form 990-EZ, line 6a.			·	
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			(a) Billyo	bingo/progressive bingo	(c) Other gaining	col. (a) through col. (c))
Rev						
	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Ä	Ĭ	Noncash phizes				
Direct	4	Rent/facility costs				
Ω						
	5_	Other direct expenses				
			Yes %	Yes %	Yes %	•
	6	Volunteer labor	No No	No No	No No	
	7	Direct expense summary. Add lines 2 through	5 in column (d)			
	'	birect expense summary. Add lines 2 through	i s iii columii (a)		•	
	8_	Net gaming income summary. Combine line 1	, column d, and line 7		<u> </u>	
		ter the state(s) in which the organization opera				
		the organization licensed to operate gaming ac				Yes No
D) П -	No," explain		· · · · · · · · · ·	<u></u> .	
10a		ere any of the organization's gaming licenses re	evoked, suspended or te	rminated during the tax	year [?]	Yes No
		Yes," explain	•		·	
1320	B2 01	1-23-12			Schedule G (Fo	rm 990 or 990-EZ) 2011

CATHOLIC SCHOOL FOUNDATION OF THE Schedule G (Form 990 or 990-EZ) 2011 DIOCESE OF SIOUX CITY 23-7030715 11 Does the organization operate garning activities with nonmembers? 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? 13 Indicate the percentage of gaming activity operated in: 13a a The organization's facility 13b **b** An outside facility 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records: Address -Yes No. 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? b If "Yes," enter the amount of gaming revenue received by the organization ▶\$ _____ and the amount of gaming revenue retained by the third party > \$ c If "Yes," enter name and address of the third party: Name ▶ Address -16 Gaming manager information: Name ▶ Gaming manager compensation ► \$ Description of services provided Independent contractor ___ Employee Director/officer 17 Mandatory distributions: a is the organization required under state law to make charitable distributions from the gaming proceeds to Yes No retain the state gaming license? b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (III) and (v), and Part III, Part IV lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions). Schedule G (Form 990 or 990-EZ) 2011

Employer identification number Š 23-7030715 Open to Public ASSISTANCE TO DIOCESAN **JMB No 1545-0047** ASSISTANCE TO DIOCESAN Inspection (h) Purpose of grant or assistance ROVIDE FINANCIAL PROVIDE FINANCIAL PROVIDE FINANCIAL ROVIDE FINANCIAL PROVIDE FINANCIAL ROVIDE FINANCIAL X Yes Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any SCHOOL. SCHOOL. SCHOOL. SCHOOL SCHOOL SCHOOL recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed ame and address of organization (b) EIN (c) IRC section or government (d) Amount of cash grant assistance or government (h) EIN (d) EI 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22. Governments, and Individuals in the United States Grants and Other Assistance to Organizations, ٥. Ö ö Ö 。 ٠. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. ► Attach to Form 990. 21,960. 31,734 14,102 9 278 28,780 47,181 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table $_{
m THE}$ SCHOOL FOUNDATION OF (3) 501 (C) Enter total number of other organizations listed in the line 1 table DIOCESE OF SIOUX CITY 42-0761065 42-0680477 42-0757414 41-0812927 42-0680476 27-0057741 General Information on Grants and Assistance criteria used to award the grants or assistance? 1 (a) Name and address of organization CATHOLIC BISHOP GARRIGAN CATHOLIC SCHOOLS SACRED HEART CATHOLIC SCHOOL ST. EDMOND CATHOLIC SCHOOLS ST. JOHN THE BAPTIST SCHOOL 304 S SUMMIT P.O. BOX 258 KUEMPER CATHOLIC SCHOOLS BANCROFT, IA 50517-0258 DANBURY CATHOLIC SCHOOL FORT DODGE, IA 50501 Name of the organization DANBURY, IA 51019 CARROLL, IA 51401 1111 MARSHALL ST ALGONA, IA 50511 BOONE, IA 50036 1224 N MCCOY ST Department of the Treasury Internal Revenue Service 116 S EAST ST 501 N 22ND ST 602 PEACH ST SCHEDULE (Form 990) Part 8

Schedule I (Form 990) (2011)

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

Page 1

CATHOLIC SCHOOL FOUNDATION OF THE DIOCESE OF SIOUX CITY

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and	her Assistance to Go	vernments and Organ	nizations in the Ur	nited States (Sche	Organizations in the United States (Schedule I (Form 990), Part II.)	t II.)	•
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SPALDING CATHOLIC SCHOOLS P.O. BOX 168 GRANVILLE, IA 51022-0168	42-0866655	501 (C) (3)	20,123.	0		1	PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
ST. MARY GRADE SCHOOL 303 3RD AVE N HUMBOLDT, IA 50548	42-0680236	501 (C) (3)	11,349.	.0			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
GEHLEN CATHOLIC SCHOOLS 709 PLYMOUTH ST NE LEMARS, IA 51031	42-0733467	501 (C) (3)	18,879.	0			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
POCAHONTAS CATHOLIC SCHOOLS 305 SW 3RD POCAHONTAS, IA 50574	42-0933282	501 (C) (3)	14,209.	0.			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
ST. CATHERINE - ST. MARY SCHOOLS 321 FULTON ST REMSEN, IA 51050	s 42-0698236	501 (C) (3)	23,701.	0			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
ST. PATRICK SCHOOL 1020 4TH AVE SHELDON, IA 51201	42-0716354	501 (C) (3)	12,305.	0.			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
BISHOP HEELAN CATHOLIC SCHOOLS 1018 GRANDVIEW BLVD SIOUX CITY, IA 51105	42-0698209	501 (C) (3)	70,961.	0.			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
SACRED HEART CATHOLIC SCHOOL 1111 4TH AVE W P.O. BOX 817 SPENCER, IA 51301-0817	42-0716354	501 (C) (3)	16,308.	0.			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.
ST. MARY'S HIGH/ELEMENTARY SCHOOL 304 SENECA ST STORM LAKE, IA 50588	OL 42-0681063	501 (C) (3)	16,119.	0.			PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL,

Schedule I (Form 990)

CATHOLIC SCHOOL FOUNDATION OF THE DIOCESE OF SIOUX CITY

		•				_			
23-7030715 Page 1	٠	(h) Purpose of grant or assistance	PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.	PROVIDE FINANCIAL ASSISTANCE TO DIOCESAN SCHOOL.					
	t II.)	(g) Description of non-cash assistance							
	edule I (Form 990), Par	(f) Method of valuation (book, FMV, appraisal, other)							
DIOCESE OF SIOUX CITY	nited States (Sch	(e) Amount of non-cash assistance	.0	• 0					
	Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule (Form 990), Part II.)	(d) Amount of cash grant	14,493.	16,139.					
		(c) IRC section if applicable	501 (C) (3)	501 (C) (3)					•
		(b) EIN	42-0680465	42-0725197					
Schedule I (Form 990) DIOCESE O	Part II Continuation of Grants and Other	(a) Name and address of organization or government	ST. ROSE CATHOLIC SCHOOL 1012 2ND AVE S DENISON, IA 51442	EMMETSBURG CATHOLIC SCHOOL 1903 SOUTH BROADWAY STREET EMMETSBURG, IA 50536			,		

Schedule I (Form 990)

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Page 2

23-7030715

Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed DIOCESE OF SIOUX CITY Schedule I (Form 990) (2011)

Part #

(f) Description of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) THE BUDGET INCLUDES Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. GRANT AWARDS ARE ALLOCATED AMONG THE PARTICIPATING DIOCESAN SCHOOLS BASED SCHEDULE I, PART I, LINE 2: THE CATHOLIC SCHOOL FOUNDATION ESTABLISHES AN BUDGET VARIANCES ARE MONITORED ON A MONTHLY REIMBURSEMENT CLAIMS ARE AUDITED BY THE SUBSTANTIALLY ALL OF THE THE EDUCATION AND STEWARDSHIP DEPARTMENTS AND REVIEWED BY THE FINANCE GRANTS ARE REIMBURSEMENT GRANTS AND SCHOOLS ARE REQUIRED TO SUBMIT THE FINANCE OFFICE AND BIANNUALLY BY THE GOVERNING BOARD. (d) Amount of non-cash assistance ANNUAL BUDGET THAT IS APPROVED BY THE GOVERNING BOARD. (c) Amount of cash grant ON ENROLLMENT OR APPROVED WRITTEN PROPOSALS. (b) Number of recipients OF EXPENSES INCURRED. GRANTS TO DIOCESAN SCHOOLS. (a) Type of grant or assistance DOCUMENTATION BASIS BY

Schedule I (Form 990) 2011

SCHEDULE M (Form 990)

Noncash Contributions

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

CATHOLIC SCHOOL FOUNDATION OF THE DIOCESE OF SIOUX CITY

Employer identification number 23-7030715

Pa	rt I Types of Property				·			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1q	(d) Method of d noncash contrib	etermır	-	ts
1	Art · Works of art							
2	Art · Historical treasures	<u> </u>						
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	X	1	1,085,251.	FAIR VALUE	(AP	PRA	ISA
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 organi	zation during	g the tax year for c	ontributions				
	for which the organization completed Form 82	83, Part IV, I	Donee Acknowlede	gement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property rep	ported in Part I, lines 1-28 th	at it must hold for			
	at least three years from the date of the initial	contribution	, and which is not	required to be used for exen	npt purposes for			
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any non-standard contrib	utions?	31	X	
32a	Does the organization hire or use third parties							
	contributions?				•	32a		X
ь	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) f	or a type of prope	rty for which column (a) is ch	ecked,			
	desemble to Dark II					1 1		ĺ

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Schedule M (Form 990) (2011)

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

SCHEDULE O

Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

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

OMB No 1545-0047 Open to Public Inspection

Name of the organization

CATHOLIC SCHOOL FOUNDATION OF THE DIOCESE OF SIOUX CITY

Employer identification number 23-7030715

FORM 990, PART VI, SECTION B, LINE 11: FORM 990 IS REVIEWED BY THE DIRECTOR OF FINANCE AND THE DIRECTOR OF ADMINISTRATION AND FISCAL AFFAIRS. FORM 990, PART VI, SECTION B, LINE 12C: POTENTIAL CONFLICTS OF INTEREST ARE BROUGHT TO THE BOARD ON A TIMELY BASIS. FORM 990, PART VI, SECTION C, LINE 19: THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. FORM 990, PART VII, LINE 1A, (B) AVERAGE HOURS PER WEEK FOR RELATED ORGANIZATIONS THE DIOCESE OF SIOUX CITY IS A RELATED ORGANIZATION AND THE FOLLOWING DIRECTORS ARE EMPLOYEES OF THE DIOCESE AND WORK ON AVERAGE 40 HOURS PER WEEK: BISHOP R. WALKER NICKLESS MRGR. R. MARK DUCHAINE, VICAR GENERAL SUPERINTENDENT OF THE SCHOOLS OF THE DIOCESE OF SIOUX CITY DAN RYAN, FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS: NET UNREALIZED LOSSES ON INVESTMENTS: -261,241. 110,270. CHANGE IN INTEREST IN NET ASSETS OF DIOCESE OF SIOUX CITY -150,971.TOTAL TO FORM 990, PART XI, LINE 5 FORM 990, PART XII, LINE 2C: THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

Schedule O (Form 990 or 990-EZ) (2011)

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

Schedule O (Form 990 or 9	90-EZ) (2011)			Page 2
Name of the organization	CATHOLIC SCHO	OL FOUNDATION	OF THE	Employer identification number
, tarrio or the organization	DIOCESE OF SI	OUX CITY		Employer identification number 23-7030715
	_			
	_			
				
				
				
		······································	= 311	
			<u> </u>	
				
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(g) Section 512(b)(13) controlled entity? Schedule R (Form 990) 2011 Š Employer identification number 23-7030715 2011 Open to Public OMB No 1545-0047 Inspection Direct controlling Yes entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Direct controlling entity End-of-year assets status (if section <u>e</u> Public charity 501(c)(3)) ► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. Total income Exempt Code Related Organizations and Unrelated Partnerships Ð section ▶ See separate instructions. Identification of Disregarded Entities (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.) Legal domicile (state or Legal domicile (state or foreign country) foreign country) THE THE DIOCESE OF SIOUX CITY IS INCLUDED IN THE GROUP CATHOLIC SCHOOL FOUNDATION OF EXEMPTION NUMBER 0928 Primary activity Primary activity For Paperwork Reduction Act Notice, see the Instructions for Form 990. DIOCESE OF SIOUX CITY - 42-0680296 Name, address, and EIN Name, address, and EIN of related organization of disregarded entity DIOCESE OF SIOUX CITY SIOUX CITY, IA 51105 1821 JACKSON STREET Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE R (Form 990) Part II Part:

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CATHOLIC SCHOOL FOUNDATION OF THE

Schedule R (Form 990) 2011 DIOCESE OF SIOUX CITY

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.) Part III

Page 2

23-7030715

Percentage ownership General or Percentage managing ownership Schedule R (Form 990) 2011 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.) Yes No 6 Share of end-of-year assets Code V-UBI amount in box no 20 of Schedule K-1 (Form 1065) p Share of total Income ε ate allocations? Disproportion-Yes No Ξ Type of entity (C corp, S corp, or trust) Share of end-of-year assets 6 Direct controlling entity Share of total income € Predominant income (related, unrelated, excluded from tax under sections 512-514) Legal domicile (state or foreign country) <u>e</u> Primary activity Direct controlling entity ፱ (c)
Legal
domicile
(state or
foreign Primary activity Name, address, and EIN of related organization Name, address, and EIN of related organization <u>a</u> a 132162 01-23-12 Part IV

CATHOLIC SCHOOL FOUNDATION OF THE DIOCESE OF SIOUX CITY

Schedule R (Form 990) 2011

Part V Transactions With Related Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	4				Yes	ž
i Donnis (ile tax year, dio tile organization engage ili any of tile following transactions with one of independent of the independent in the property of the		siated Organizations listed		ţ		×
				2 ;		; >
b Gift, grant, or capital contribution to related organization(s)			•	٥		۷
c Gift, grant, or capital contribution from related organization(s)				10	X	
d Loans or loan guarantees to or for related organization(s)				19		×
e Loans or loan guarantees by related organization(s)		•		1e		×
f Sale of assets to related organization(s)				=		×
q Purchase of assets from related organization(s)				10		×
				÷		×
				;=		×
j Lease of facilities, equipment, or other assets from related organization(s)				;=		×
k Performance of services or membership or fundraising solicitations for related organization(s)	ınızatıon(s)			¥		×
1 Performance of services or membership or fundraising solicitations by related organization(s)	ınızatıon(s)			F	×	
m Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	(s)uoi			13	×	L
n Sharing of paid employees with related organization(s)				1n	×	
 Reimbursement paid to related organization(s) for expenses 				19		×
p Reimbursement paid by related organization(s) for expenses				10		×
				•••••		
 q Other transfer of cash or property to related organization(s) 				19		×
r Other transfer of cash or property from related organization(s)				-		×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.	who must complete t	his line, including covered	relationships and transaction thresholds.			
(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved			
(1)						
144						
(3)						
(4)						
(5)				i		
(9)						
132163 01-23-12	39		Schedul	Schedule R (Form 990) 2011	(066 t	2011

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23-7030715

CATHOLIC SCHOOL FOUNDATION OF THE

DIOCESE OF SIOUX CITY Schedule R (Form 990) 2011 Part Vf Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

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

9 0		ı	1	1	1	1	1	I
(h)								}
(k) ercent wners								
5 E 5 5								
(j) General or managing partner? Yes No								
25.								
/-UBI								
Ode V. unt in cchedu								
of S								
(h) spropor- bonate ocations?					_			
Disp Post								
_								
(g) Share of end-of-year assets		1						
(g) Share of ind-of-yes assets						1		
9 00								
						<u></u>		
1 5 6								
(f) Share of total income								
S t i								
								<u>-</u> -
(d) (e) Predominant income partners sec (related, unrelated, excluded from tax under section 512-514) Yes No							 	
part 50 (-			
come ted, tax 2-514								
nt inc nrela from n 513								
(d) minan ed, un ided fi				ĺ				
redo (relat exclu							:	
(c) Legal domicile (state or foreign country)								
(c) agal domic ate or fore country)								
egal tate								
(s)								
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(b) Primary activity								
(b)								
пт								
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g pu								
SS, 8								
(a) Name, address, and EIN of entity	$ \ \ \ $							
] e, a								
Nan								
	$ \ \ \ $							
	$ \ \ \ $							

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Schedule R (Form 990) 2011

CATHOLIC SCHOOL FOUNDATION OF THE 23-7030715 Page 5 DIOCESE OF SIOUX CITY Schedule R (Form 990) 2011 Part VII Supplemental Information Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Form **8868**

(Rev. January 2012)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

OMB No. 1545-1709

If you a	are filing for an Automatic 3-Month Extension, comple	ete only Pa	art I and check this box)	► <u>[X]</u>
• If you a	are filing for an Additional (Not Automatic) 3-Month Ex	ctension,	complete only Part II (on page 2 of	this form)	•	
Do not c	omplete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	orm 8868.	
Electroni	ic filing (e-file) You can electronically file Form 8868 if	you need	a 3-month automatic extension of tir	ne to file (6 months for a corp	poration
required t	to file Form 990·T), or an additional (not automatic) 3-mo	onth exten	sion of time. You can electronically f	ile Form 8	868 to request an	extension
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers	Associated With C	ertaın
Personal	Benefit Contracts, which must be sent to the IRS in page	oer format	(see instructions). For more details of	on the ele	ctronic filing of this	form,
visit www	.irs gov/efile and click on e-file for Chanties & Nonprofits	s				
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corpora	ation required to file Form 990-T and requesting an auto	matic 6-mo	onth extension - check this box and	complete		
Part I only	,				•	• <u> </u>
	corporations (including 1120-C filers), partnerships, RENome tax returns	IICs, and t	rusts must use Form 7004 to reques	at an exter	nsion of time	
Type or	Name of exempt organization or other filer, see instru	ictions		Employe	r identification num	nber (EIN) or
print	CATHOLIC SCHOOL FOUNDATION	OF T	HE			
	DIOCESE OF SIOUX CITY			X	23-70307	15
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s 1821 JACKSON STREET	ee instruc	tions.	Social se	ecurity number (SS	N)
return See instructions	City, town or post office, state, and ZIP code. For a for SIOUX CITY, IA 51105-1055	oreign add	lress, see instructions.			
	5100x C111, 1x 51105-1055					
Enter the	Return code for the return that this application is for (file	n a conara	te application for each return)			0 1
Litter the	Tretum code for the return that this application is for the	e a separa	te application for each return,		•	المرام
Applicati	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A			08
Form 990		01	Form 4720			09
Form 990		04	Form 5227			10
	T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	T (trust other than above)	06	Form 8870			12
	THE ORGANIZATION	NC				
• The bo	oks are in the care of > 1821 JACKSON St	TREET	- SIOUX CITY, IA	51105	-1055	
Teleph	one No. ► (712)255-7933		FAX No. ►			
	rganization does not have an office or place of business	s in the Ur	nited States, check this box		<u> </u>	· 🗀
 If this is 	s for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) I	f this is fo	r the whole group,	check this
box ▶	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all memb	ers the extension i	s for.
1 I red	quest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	untıl		
	FEBRUARY 15, 2013 , to file the exemp	t organiza	tion return for the organization name	ed above.	The extension	
ıs fo	or the organization's return for:					
▶Ĺ	calendar year or					
►L	X tax year beginning JUL 1, 2011	, an	d ending <u>JUN 30, 2012</u>		_ ·	
2 If th	e tax year entered in line 1 is for less than 12 months, c	heck reas	on· Initial return I	Fınal retur	'n	
	Change in accounting period					
3a If th	is application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
	refundable credits See instructions.			За	\$	0.
	is application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and			
	mated tax payments made Include any prior year overp	-		Зь	\$	0.
	ance due. Subtract line 3b from line 3a. Include your pa					
	ising EFTPS (Electronic Federal Tax Payment System)			3с	\$	0.
	f you are going to make an electronic fund withdrawal v			rm 8879-	EO for payment ins	tructions.
	or Privacy Act and Paperwork Reduction Act Notice,				Form 8868 (F	