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# ·Form **990**

# **Return of Organization Exempt From Income Tax**

OMB No 1545-0047

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

▶ Do not enter Social Security numbers on this form as it may be made public.

Inter	nal Reve	of the Treasury nue Service	▶ Information about Form 990 and its instructions is at www.irs.gov/for	m990.		Inspec	tion			
Ā	For the	e 2013 cale	ndar year, or tax year beginning April 1 , 2013, and ending	March 3	1	<b>, 20</b> 14				
В		f applicable	C Name of organization Sacred Heart Cathedral Foundation		D Employer identification number					
m		s change	Doing Business As			45-1584666				
$\exists$	Name c	-	Number and street (or P O box if mail is not delivered to street address) Room/suite	ΕT	elephon	e number				
Η		-	· ·	- 1	•	563-324-3257				
님	Initial re		422 E 10th Street  City or town, state or province, country, and ZIP or foreign postal code	-		303-324-3237				
	Termina			١٠٠		anata C	005.004			
		ed return	Davenport, IA 52803-5499		iross red		635,201			
ш	Applica	tion pending				ubordinates?				
						included? 🔲 Ye list (see instructi				
<u> </u>		mpt status	✓ 501(c)(3)			•	•			
<u>J</u>	Website			Group exer			0928			
_				2010 N	State	of legal domicile	<u>IA</u>			
۲	art i	Summ								
_	1	=	scribe the organization's mission or most significant activities: Provide for the							
Activities & Governance			nral Catholic Parish in Davenport, IA, including maintenance of primary church fac							
Ta.			Parish Center, religious education area and parking lot improvements, support Ca							
ě	2		s box $ ightharpoonup$ if the organization discontinued its operations or disposed of more	than 25	% of i	ts net assets.				
ၓ	3	Number	of voting members of the governing body (Part VI, line 1a)		3		6			
త	4	Number (	of independent voting members of the governing body (Part VI, line 1b)	[	4		6			
ţį	5	Total nun	nber of individuals employed in calendar year 2013 (Part Villine 2a)	[	5		0			
₹	6	Total nun	nber of volunteers (estimate if necessary)	[	6		8			
ě	7a	Total unr	elated business revenue from Part VIII, column (C), line 12	[	7a		0			
	Ь	Net unrel	ated business taxable income from Form 990-T, line 34	[	7b		0			
			ions and grants (Part VIII, line 1h)	ior Year		Current Y	'ear			
o.	8	Contribut	ions and grants (Part VIII, line 1h)	47	1,374		593,742			
Ž	9		service revenue (Part VIII, line 2g)		0		0			
Revenue	10	•	nt income (Part VIII, column (A), lines 3, 4, and (7d)		3,632		41,459			
Œ	11		enue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				· ·			
`	12		nue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	480	0,006		635,201			
ý	13		nd similar amounts paid (Part IX, column (A), lines 1-3)		0		0			
	14		paid to or for members (Part IX, column (A), line 4)		0		0			
G	15		other compensation, employee benefits (Part IX, column (A), lines 5-10)		0		0			
Expenses	16a	•	nal fundraising fees (Part IX, column (A), line 11e)		0		0			
þe	b		draising expenses (Part IX, column (D), line 25) ▶		寸					
Ä	17		penses (Part IX, column (A), lines 11a-11d, 11f-24e)		0					
	18		enses. Add lines 13–17 (must equal Part IX, column (A), line 25)		0					
	19	-	less expenses. Subtract line 18 from line 12	181	0.006		635,201			
_ 9		110101100		of Current		End of Y				
sets or	20	Total acc	ets (Part X, line 16)		3.381		1.358.644			
Asse	21		Illities (Part X, line 26)	036	0					
Net Ass Fund Bal	22		is or fund balances. Subtract line 21 from line 20	621			1 359 644			
_	art li		ure Block	030	8,381		1,358,644			
_			ry, I declare that I have examined this return, including accompanying schedules and statements, an				al ballat it is			
			ete Declaration of preparer (other than officer) is based on all information of which preparer has any			y knowledge an	u bellet, it is			
					سع ا	111				
Sig	70	75	Almond Adolision	Date	40					
-	-	I D.		Date						
ne	Here Rev. Richard Adam, President									
			or print name and title			OTIN				
Pa	ıid		pe preparer's name Preparer's signature Date		_	] if PTIN				
Pr	epare	er Angelia		// (   s	elf-emp	loyed P010	61083			
	se On	y Firm's n	——————————————————————————————————————	Firm's E	iN ►	26-3276	644			
		Firm's a	ddress ► 5131 Utica Ridge Rd, Ste B, Davenport, IA 52807	Phone n	0	563-359-7				
Ma	y the I	RS discus:	s this return with the preparer shown above? (see instructions)			📝 Ye	s 🗌 No			

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form **990** (2013)





Part	
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission.
	To operate exclusively for religious, charitable, and educational purposes, as a nonprofit Corporation within the meaning of Section
	501(c) (3) of the Internal Revenue Code of 1986, or corresponding provisions of any subsequent federal tax law, with all of its activities
	so conducted. The operation of the Corporation shall be conducted in compliance with the objectives and philosophy of the Diocese.
2	of Davenport, Iowa, and the Code of Canon Law, and to promote the strength and growth of Sacred Heart Cathedral, Davenport, Iowa  Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 0 including grants of \$ 0) (Revenue \$ 411.916)
	A portion of funds are being held and accumulated as a quasi-endowment for the support of Catholic education, with the primary
	intent of supporting a parochial school offering classes for K- 8 and supported by Sacred Heart Cathedral parish
	······
4b	(Code: 0 including grants of 0 (Revenue 946,728)
	At this time, funds are being accumulated for future building expenditures
	······
	······································
4c	(Code:) (Expenses \$0 including grants of \$0) (Revenue \$0)
	At this time, funds are being accumulated, see 4a and 4b
	<b></b>
4d	Other program services (Describe in Schedule O.)
Tu	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 0

rarı	Checklist of nequired scriedules			
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"		Yes	No
•	complete Schedule A	1	<b>/</b>	<u> </u>
2 3	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 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	✓	1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		/
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
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		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		<b> </b> ✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	<b>√</b>	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.		*	-%
а	complete Schedule D, Part VI	11a		1
	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		<b>√</b>
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		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<b>✓</b>
	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 (ASC 740)? If "Yes," complete Schedule D, Part X	11e		<b>√</b>
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		<b>√</b>
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 and XII is optional	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		1
14 a		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 or more? If "Yes," complete Schedule F, Parts I and IV	14b		<b>√</b>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	·	1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		1
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 (see instructions)	17		1
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		1
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		1
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		

Part	Checklist of Required Schedules (continued)			
	Did the encountry was the OF CCC (		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		1
22	Did the organization report more than \$5,000 of grants or 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		1
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		1
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 25a	24a		1
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		√ √
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		1
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		<b>V</b> ✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		<b>✓</b>
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		<b>√</b>
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 b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .  A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		<b>√</b>
С	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	28b 28c		<b>∀</b>
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	<b>\</b>	<b>√</b>
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		1
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? <i>If "Yes," complete Schedule R, Part I</i>	33		<b>√</b>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		1
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a 35b		✓
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		<b>✓</b>
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,			,
38	Part VI	37		
			<u> </u>	

Part	V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			. 🗆
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4-		لـــا
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	1c		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0			
ь	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)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>√</b>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, 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)?	4-		1
b	If "Yes," enter the name of the foreign country.	4a		_
•	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts			\$ 1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>✓</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		<b>✓</b>
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			,
b	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		_
-	gifts were not tax deductible?	6b		ļ
7	Organizations that may receive deductible contributions under section 170(c).			~
а	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		✓
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b></b>
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		1
d	If "Yes," indicate the number of Forms 8282 filed during the year	76		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<b>-</b>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		1
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		<b>—</b> —
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting			
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.	٠		
а	Did the organization make any taxable distributions under section 4966?	9a	i	
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities .   Section 501(c)(12) organizations. Enter			
'' a	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.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		<u> </u>
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	125		-
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<b>✓</b>
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		
		rom	ロ ショ	(2013)

Form 9	90 (2013)	_		Page <b>6</b>
Part				
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O.			ions.
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	<u>.</u>	. ✓
Secti	ion A. Governing Body and Management		F 3/	
4.	Estable 1 Construction of the state of the s	. 130.55	Yes	No 320
1a		티 [		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.		.44	16.6
b	Enter the number of voting members included in line 1a, above, who are independent . 1b	ا ا		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with	٩	1:5%	
	any other officer, director, trustee, or key employee?	2		1
3	Did the organization delegate control over management duties customarily performed by or under the direct			<u> </u>
	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 governing documents since the prior Form 990 was filed?	4		✓
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		✓
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 appoint			١,
	one or more members of the governing body?	7a		<b>  √</b>
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		✓
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		7	
	the year by the following:	1		
а	The governing body?	8a	1	
b	Each committee with authority to act on behalf of the governing body?	8b	7	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	L	✓
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Rever	nue C	ode.)	)
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		<b>✓</b>
b		4.01		
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?  Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	10b		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	11a	✓	£ 3
12a	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a	1	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	1	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	120	<b>                                     </b>	
	describe in Schedule O how this was done	12¢	✓	
13	Did the organization have a written whistleblower policy?	13	<b>√</b>	
14	Did the organization have a written document retention and destruction policy?	14	1	
15	Did the process for determining compensation of the following persons include a review and approval by	Ti x	1123	37. 7
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		<u> </u>	136
a	The organization's CEO, Executive Director, or top management official	15a		<b>/</b>
þ	Other officers or key employees of the organization	15b		<b>✓</b>
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)  Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement		£ (%	^
IUa	with a taxable entity during the year?	16a	<u></u>	<del>  _                                    </del>
b			5 80 % C	
•	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b	K.#	111111
Secti	ion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ NA			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section	n 501(	(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply.			
	☐ Own website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of in	terest	policy	, and
	financial 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 and records	of the	•	
	organization: ► Very Rev. Richard Adam. 422 F. 10th Street, Davennort, IA 52803-5499			

1	Page	

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	ensa	ated any currer	t officer, directo	r, or trustee.
				(0	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					e than o		Reportable	Reportable	Estimated
	hours per	office	er and			or/trus		compensation	compensation from	
	week (list any hours for	익귤	٦	으	8	e F	77	from the	related organizations	other compensation
	related	l divi	2	Officer	yer	bes	Former	organization	(W-2/1099-MISC)	from the
	organizations below dotted	다 다 교	Ì	`	호	ee c	"	(W-2/1099-MISC)	1	organization and related
	line)	) tr	al +		Key employee	ğ				organizations
		Individual trustee or director	Institutional trustee		•	Highest compensated employee				_
	ļ		ď			ated			:	
44)										
(1) Lorraine Jestel, Director	.5	1								_
(2) Matt Thompson, Director	.5	<b>-</b>						.0	0	0
14) wate monipson, birector	† <del></del>	1						0	o	0
(3) Larry Klosterman, Director	.5									
		✓			<u>.                                    </u>	İ	<u>l</u>	0	0	0
(4) Andrew Trasowech, Director	0									
		✓						0	0	0
(5) Molly O'Meara Schnell, Director	.5									
		✓			_	<u> </u>		0	0	0
(6) Very Rev. Richard Adam, Director, President	8.0	.								
		<b>✓</b>		✓				0	0	0
(7) Carol Haines, Secretary & Treasurer	8.0									
(0)	<del>                                     </del>		<u> </u>	<b>✓</b>	_		<b>├</b>	0	0	0
(8) Very Rev. Joseph Nguyen, Vice President	.5			,				_		
(0)	<del>                                     </del>	<b>-</b>		<b>✓</b>	├		├	0	0	0
(9)	+	1								
(10)				$\vdash$	┝┈		<u> </u>			
<u> </u>	†	1								
(11)										
	<u> </u>			<u> </u>						
(12)	<u> </u>				ł					
(40)	<del> -</del>	-	-	-	ļ	<del> </del>	-			<del>- :</del>
(13)	+	1								
(14)	+		$\vdash$							
	†	1	1							

	(A) Name and title	(B) Average		ot ch		Ition more	than o		( <b>D)</b> Reportable	<b>(E)</b> Reportable	,	Fs	(F) tımate	d
	Name and the	hours per week (list any hours for related organizations below dotted line)					Highest compensated employee		compensation from the organization (W-2/1099-MISC)	compensation related organization (W-2/1099-Mi	from	com fr org and	nount of other pensation the anization in calculation in calculati	of tion e on ed
(15)														
(16)														
(17)													-	
(18)														
(19)														
(20)														
(21)														
(22)												<u> </u>		
(23)														-
(24)														
(25)												-		
С	Sub-total .  Total from continuation sheets to Part Total (add lines 1b and 1c)			•			•	<b>&gt; &gt; &gt;</b>	0		0			(
2	Total (add lines 1b and 1c)	not limited						e) w	ho received m	ore than \$10		O of		(
3	Did the organization list any former of employee on line 1a? If "Yes," complete \$1.00.	ficer, direc						emp	oloyee, or high	est compen	sated	d	Yes	s No ✓
4	For any individual listed on line 1a, is the organization and related organizations individual											e 🗀	Mada	1
5	Did any person listed on line 1a receive of for services rendered to the organization?									ation or indi	vidua 		-	
Section	n B. Independent Contractors												<u> </u>	
1	Complete this table for your five highest compensation from the organization Repyear.													tax
	(A) Name and business add	ress							(B) Description of s	ervices		(C Comper		
NA														
2	Total number of independent contractor	rs (includir	na bu	t no	ot I	ımıt	ed to	th	ose listed abo	ove) who				

Pair	VIII	Statement of Reve	enue					_
,		Check if Schedule O	contains a r	esponse or note t	o any line in this	Part VIII	<u> </u>	<u> </u>
		Check if Schedule O			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns	3 <u>  1</u>	a 0	1			
iz in	b	Membership dues .	1	b 0				
s, G	С	Fundraising events	1	c 0				
ar i	d	Related organizations	i <u>1</u>	d 0				
ii iš	e	Government grants (con		e 0				
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gi						
혈粪		and similar amounts not inc		f 593,742	]			
d tr	g	Noncash contributions include						
	h	Total. Add lines 1a-1	<u>f</u>		593,742			
Program Service Revenue				Business Code				
, ver	2a	NA						
æ	b							
ξ	C					· · · · · · · · · · · · · · · · · · ·		
Sei	d							
ä	е							
ē	f	All other program sen			0	0	0	
	g	Total. Add lines 2a-2		<u> </u>	0		ľ	Т
	3	Investment income		_				
	١,	and other similar amo			13,692	13,692	0	İ
	4	Income from investment			0	0	0	
	5	Royalties	(i) Peal	(ii) Personal	0	0	0	ļ <u>0</u>
	6-		(i) Near		-			
	6a	Gross rents		0 0	4			
	b	Less: rental expenses Rental income or (loss)		0 0	•			
	l d	Net rental income or (loss)	1 \	0 0	<del> </del>			
	7a	Gross amount from sales of	(i) Securities	(ii) Other	0	0	0	C
	/ a	assets other than inventory	168,4		-			
	ь	Less: cost or other basis	100,4	43 0				
		and sales expenses	140,6	76				
	c	Gain or (loss)	27,7		1 ;			
	d	Net gain or (loss) .		<b>.</b> ▶	27,767	27,767		
	_	rect gam or (1000)			21,707	21,101	0	
enue	8a	Gross income from fu	indraising					
		events (not including \$						
Be		of contributions reporte						
ē		See Part IV, line 18 .		a 0				
Other Rev	b	Less. direct expenses	3	b 0	]			
		Net income or (loss) fi			ol		0	
	9a	Gross income from ga						
		See Part IV, line 19 .		a 0				
	b	Less: direct expenses		b 0				
	С	Net income or (loss) fi			0	0	0	<u> </u>
	10a	Gross sales of in						
		returns and allowance			]			
	b	Less. cost of goods s					·····	
	<u>c</u> _	Net income or (loss) fi			0	. 0	0	0
	<u> </u>	Miscellaneous R		Business Code	<del> </del>			
	11a	NA		-				
	b			)				ļ
	С	All all and an arrangement		-	ļ			
	d	All other revenue .			0	0	0	0
	12	Total revenue See in			0			
	12	Total revenue. See in	ISTRUCTIONS.	<u> P</u>	635,201	41,459	0	0

Part IX Statement of Functional Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	MI other organization	ns must complete co	olumn (A).					
Check if Schedule O contains a response or note to any line in this Part IX										
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses					
1	Grants and other assistance to governments and			*: . *; *	« ;) .					
	organizations in the United States. See Part IV, line 21	o	0		la i					
2	Grants and other assistance to individuals in the United States. See Part IV, line 22	0	0	,	A .					
3	Grants and other assistance to governments,			***	A					
-	organizations, and individuals outside the United States See Part IV, lines 15 and 16	0	0		* .					
4	Benefits paid to or for members	0	0		* · 4 · 4 · 4 · 4 · · · ·					
5	Compensation of current officers, directors, trustees, and key employees	0	0							
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0						
7	Other salaries and wages	0		0						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)									
9	Other employee benefits	0	0	0						
10	Payroll taxes	0	0		,					
11	Fees for services (non-employees):	0								
а	Management	o	0	٥						
b	Legal	0	0							
С	Accounting	0	0	0	(					
d	Lobbying	0	0	0	(					
е	Professional fundraising services. See Part IV, line 17	0	/ * * * *	∳° ×° ; *	(					
f	Investment management fees	0	0	0						
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	o	0	0						
12	Advertising and promotion	0	0	0	(					
13	Office expenses	0	0	0	0					
14	Information technology	0	0	0						
15	Royalties	0	0	0						
16	Occupancy	0	0	0						
17	Travel	0								
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	. 0	0	C					
19	Conferences, conventions, and meetings .	0	0	0						
20	Interest	0	0	0	(					
21	Payments to affiliates	0		0						
22	Depreciation, depletion, and amortization .	0	0	<del> </del>						
23	Insurance	0	. 0	0						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If	, (i)			` <u>.</u>					
	line 24e amount exceeds 10% of line 25, column	* * * .	* * *		, to					
	(A) amount, list line 24e expenses on Schedule O.)	, , ,	* * * *	* * * \$ \$ 1, *m ( 149)	*					
a										
b										
C										
d	All other expenses									
е 25	All other expenses  Total functional expenses. Add lines 1 through 24e	0	0							
26	Joint costs. Complete this line only if the	0	0	0						
20	organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here Infollowing SOP 98-2 (ASC 958-720)									

Net Assets or Fund Balances

27

28

29

31

32

33

34

Form 990 (2013) Page 11 Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) (A) Beginning of year End of year Cash—non-interest-bearing . . . . . . . 1 1 0 0 2 Savings and temporary cash investments . . . . 0 2 4.380 Pledges and grants receivable, net . . . . . . . . . . . . 3 3 ol 0 Accounts receivable, net . . 4 4 ol n 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees 0 5 0 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L. . . . . . 6 0 0 Notes and loans receivable, net 7 ol 0 8 Inventories for sale or use . 8 0 0 Prepaid expenses and deferred charges . . 9 9 0 0 Land, buildings, and equipment: cost or 10a other basis. Complete Part VI of Schedule D 10a 0 10c Less: accumulated depreciation . . . . 10b 0 Investments - publicly traded securities . . . . . 11 638,381 11 1,354,264 12 Investments—other securities. See Part IV, line 11 . ol 12 0 13 Investments - program-related. See Part IV, line 11 0 13 0 14 14 ol 0 15 Other assets See Part IV, line 11 . . . . . . . . . . . 0 15 0 16 Total assets. Add lines 1 through 15 (must equal line 34). 16 638,381 1,358,644 17 Accounts payable and accrued expenses 17 0 0 Grants payable . . . . . . . . . . . . . . . 18 ol 18 0 19 19 0 0 20 Tax-exempt bond liabilities . . 0 20 0 21 Escrow or custodial account liability. Complete Part IV of Schedule D. 21 ol 0 Loans and other payables to current and former officers, directors, 22 Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . . . 22 ol 0 23 0 23 Secured mortgages and notes payable to unrelated third parties 0 0 24 24 Unsecured notes and loans payable to unrelated third parties . . . 0 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 . . . . . . . . . . . . . . . . . Ω 0 Total liabilities. Add lines 17 through 25 . 26 26

Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and

Capital stock or trust principal, or current funds . . . . . . . . .

Retained earnings, endowment, accumulated income, or other funds .

Paid-in or capital surplus, or land, building, or equipment fund . . .

complete lines 27 through 29, and lines 33 and 34.

Unrestricted net assets . . . . .

complete lines 30 through 34.

Temporarily restricted net assets . . .

Total liabilities and net assets/fund balances

1,358,644 Form 990 (2013)

946,728

411,916

1,358,644

0

0

27

28

29

30

31 0

32

33

0

638,381

638,381

638.381

Form 99	90 (2013)			Р	ag <b>ę 12</b>
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗆
1	Total revenue (must equal Part VIII, column (A), line 12)	1			35,201
2	Total expenses (must equal Part IX, column (A), line 25)	2			0
3	Revenue less expenses Subtract line 2 from line 1	3		6	35,201
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) .	4		6	38,381
5	Net unrealized gains (losses) on investments	5			85,062
6	Donated services and use of facilities	6			0
7	Investment expenses	7			
8	Prior period adjustments	8			0
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10	i I	1,3	58,644
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. 🗆
				Yes	No
1	Accounting method used to prepare the Form 990: 🗸 Cash 🔲 Accrual 🔲 Other			3 4	
	If the organization changed its method of accounting from a prior year or checked "Other," ex	olaın	in	. 🕯 🚯 s	1. "
	Schedule O.		'		* .
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2	а	1
	If "Yes," check a box below to indicate whether the financial statements for the year were comp	oiled o	or 🗀	( . <b>.</b> );	12.5
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2	ь	1
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	d on	a	18 10	HÇ I
	separate basis, consolidated basis, or both:				S.
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			i. Ži	z.
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersial	ht 💾	2	
•	of the audit, review, or compilation of its financial statements and selection of an independent accou			ျ	
	If the organization changed either its oversight process or selection process during the tax year, ex			<u> </u>	$\vdash \lnot$
	Schedule O.	,		~ ]	

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

**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.

За

3b

Form **990** (2013)

the Single Audit Act and OMB Circular A-133?. . . . . . .

#### SCHEDULE A (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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service ► Attach to Form 990 or Form 990-EZ.
► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization Employer identification number					on number					
Sacred Heart Cathedral Foundation Part I Reason for Public Charity Status (All organizations must complete this p						45-1	584666			
								instructi	ons.	
	ention of churc	hes, or association of	churche	s describ		•	•	i).		
		170(b)(1)(A)(ii). (Attac								
		spital service organiza on operated in conjun						O/L\/4\/A	V:::\	_
hospital's name			CHOIT WILL	тапоѕрп	iai descri	bed in <b>se</b>	ection 17	U(D)(1)(A	)(III). Enter th	3
5 An organization								ribed in		
<ul><li>6  A federal, state,</li><li>7  An organization</li></ul>	=									
8 A community tru	ust described in	n section 170(b)(1)(A	)(vi). (Coi	nplete Pa	art II )					
9 An organization receipts from a support from g	that normally ctivities related ross investme	receives: (1) more that to its exempt funct nt income and unre fter June 30, 1975. Se	an 331/39 nons—su lated bus	6 of its si bject to c siness ta	upport fro certain ex xable inc	xceptions come (les	s, and (2) ss sectio	) no mor	e than 331/39	% of its
10 An organization	organized and	operated exclusively	to test fo	or public s	safety Se	ee <b>sectio</b>	n 509(a)	(4).		
11 An organization purposes of on-	organized an e or more pub	nd operated exclusive flicly supported organ describes the type of	ely for th	ne benefi describe	t of, to p	perform ion 509(a	the funct a)(1) or se	tions of, ection 50	09(a)(2). See	out the section
a 🔲 Type I	<b>b</b> Type	_							tionally integi	ated
e By checking this other than found or section 509(a	dation manage		ıs not co	ntrolled o	irectly or	ndirectl	y by one	or more	disqualified p	persons
•		written determination	on from	the IDS	that it is	a Tuna	I Type	II or Tur	ممالل مد	+
organization, ch						a Type	i, Type	ii, Or Typ	pe III suppor	ung
•	7, 2006, has th	ne organization accep	oted any	gift or co	ontributio	n from a	ny of the			. П
(i) A person wh	no directly or in	ndirectly controls, eithody of the supported of								s No
		on described in (i) abo							11g(ii)	+-
		a person described in							11g(iii)	+
	_	on about the support	,, ,,						[9()]	
(i) Name of supported organization	(ii) EIN	(III) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document? (v) Did you notify the organization in col (i) of your support?		nization in of your	(vi) Is the organization in col (i) organized in the US?		(vii) Amount of suppor		
			Yes	No	Yes	No	Yes	No		
(A)										
(B)										
(C)										
(D)										
(E)	-									
			-		-		<b></b>	ļ	<del>-</del>	

Part							
	(Complete only if you checked the						alıfy under
	Part III. If the organization fails to	o quality unde	er the tests lis	sted below, p	lease comple	ete Part III.)	
	on A. Public Support						<del></del>
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")			102,302	471,374	593,742	1 <u>,16</u> 7,418
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf			0	0	0	0
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge		L	0	0	0	0
4	Total. Add lines 1 through 3	***		102,302	471,374	593,742	<u> 1,167,418</u>
5	The portion of total contributions by			1.2			
	each person (other than a	Rp F					
	governmental unit or publicly	1.0					
	supported organization) included on		(7)				
	line 1 that exceeds 2% of the amount			医髓线 多			
	shown on line 11, column (f).					<u> </u>	201,830
6	Public support. Subtract line 5 from line 4.		[	29.3% * 3		ý & ·	965,588
	on B. Total Support	1 () 2000		1 1 2011	4.0.0040	(.) 0040	(6 T.1.1
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
7	Amounts from line 4			102,302	471,374	593,742	1,167,418
8	Gross income from interest, dividends,						
	payments received on securities loans,	ļ					
	rents, royalties and income from similar	1					
_	sources	ļ		1,927	8,632	41,459	52,018
9	Net income from unrelated business						
	activities, whether or not the business			_			_
4.0	is regularly carried on			0	0	0	0
10	Other income. Do not include gain or	ŀ					
	loss from the sale of capital assets (Explain in Part IV.)			_			_
44		43000		0	0	0	0
11 12	<b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities, etc.		One)	1	<u> </u>	12	1,219,436
13	First five years. If the Form 990 is for t				or fifth tax w		0 501(a)(3)
13	organization, check this box and stop he						
Sooti	on C. Computation of Public Suppo			· · · · ·	<u> </u>	· · · ·	
14	Public support percentage for 2013 (line			11 column (fl)		14	%
15	Public support percentage for 2013 (line Public support percentage from 2012 Sc					15	<del></del>
16a	331/3% support test—2013. If the organ						
104	box and <b>stop here.</b> The organization qua						
b	331/3% support test—2012. If the orga			_			
b	check this box and <b>stop here</b> . The organ						· ► □
170	·	•	•	• • • • • • • • • • • • • • • • • • • •		a or 16b and	
17a	10%-facts-and-circumstances test – 2 10% or more, and if the organization me						
	Part IV how the organization meets the "						
	organization					LO L PUBLICIY S	. <b>&gt;</b> ¬
	<del>-</del>	040 1546		a a a a a a a a a a a a a a a a a a a			· · L
b	10%-facts-and-circumstances test—2						
	15 is 10% or more, and if the organization in Part IV how the organization in						
	supported organization	neets the lact			no organizatio	ii quaiiles as a	. <b>&gt;</b> 🗂
18	Private foundation. If the organization d	 Ind not check a			or 17h chec	k this hov and	see
10	i irrate iouridation. Il tile organization d	and thou officer a	POY OUT HITE IO	, ioa, iob, iii	,, or 17 D, 01160	and box and	

#### 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.)

Secti	on A. Public Support	4114401 1110 11	Joto Hotou Bon	ow, produce of	simpleto i ait	,	
	dar year (or fiscal year beginning in)	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and membership fees		(.,		(4)	(,,====	(7)
	received. (Do not include any "unusual grants ")					Ì	
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	· · · · · ·	<del> </del>				
-	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						
	_		<del> </del>				
6	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3						
ra	received from disqualified persons .				İ		
_							
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						
_	· · · · · · · · · · · · · · · · · · ·	<del> </del>					
с 8	Add lines 7a and 7b	**	<del>                                     </del>		**	* *	
O	line 6)	~			· ·	, T	
Secti	on B. Total Support				1		
	dar year (or fiscal year beginning in) ▶	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	(a) 2009	(0) 2010	(6) 2011	(u) 2012	(e) 2013	(i) Total
10a	Gross income from interest, dividends,		-				
	payments received on securities loans, rents,						
	royalties and income from similar sources .						
h	Unrelated business taxable income (less						
_	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b				<u> </u>		
11	Net income from unrelated business						<del></del>
• •	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		1				
	(Explain in Part IV.)		1				
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatio	n's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	re					▶ 🗆
Secti	on C. Computation of Public Support						
15	Public support percentage for 2013 (line						%
16	Public support percentage from 2012 Sci	hedule A, Part	III, line 15 .	<u> </u>	<u></u> .	16	%
Secti	on D. Computation of Investment In	come Perce	entage				
17	Investment income percentage for 2013 (	line 10c, colur	nn (f) divided b	y line 13, colu	mn (f))	17	%
18	Investment income percentage from 2013						%
19a	331/3% support tests-2013. If the organ						
	17 is not more than 331/3%, check this box						
b	331/3% support tests - 2012. If the organiz						
	line 18 is not more than 331/3%, check this						
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions 🕨 🔲

Schedule A (F	orm 990 or 990-EZ) 20	13 Page 4
Part IV	Supplemental Part III, line 12.	<b>Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Also complete this part for any additional information. (See instructions).
	·	
		······································
		······································
	<del></del>	
•••••		
		······································

#### SCHEDULE D (Form 990)

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.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

	. and organization		Employer Identification flumber
Sacred	Heart Cathedral Foundation		45-1584666
Par		or Advised Funds or Other Similar Fu	
	Complete if the organization answ	vered "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)		<del></del>
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	ct to the organization's exclusive legal conti	rol <sup>2</sup> Yes 🗌 No
6	Did the organization inform all grantees, doi	nors, and donor advisors in writing that gra	
	only for charitable purposes and not for the		
	conferring impermissible private benefit? .		· · · · · · · · · · · · · · · · · · ·
Par			
	Complete if the organization answ	ered "Yes" to Form 990, Part IV, line 7	
1	Purpose(s) of conservation easements held to		
	Preservation of land for public use (e.g.,		of an historically important land area
	☐ Protection of natural habitat	·	of a certified historic structure
	☐ Preservation of open space		
2	Complete lines 2a through 2d if the organiza	tion held a qualified conservation contribut	ion in the form of a conservation
	easement on the last day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements .		. 2a
b	Total acreage restricted by conservation eas	sements	2b
С	Number of conservation easements on a cer		2c
d	Number of conservation easements includ	• •	
	historic structure listed in the National Regis		
3	Number of conservation easements modified	d, transferred, released, extinguished, or tei	
	tax year ►		, 0
4	Number of states where property subject to	conservation easement is located ▶	
5	Does the organization have a written poli		spection, handling of
	violations, and enforcement of the conservat		
6	Staff and volunteer hours devoted to monito	ring, inspecting, and enforcing conservation	
	<b>&gt;</b>	5, 1	3
7	Amount of expenses incurred in monitoring,	inspecting, and enforcing conservation eas	sements during the year
	<b>▶</b> \$	3	3 4,
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)?		· · · · · · · · · · · · · · · · · · ·
9	In Part XIII, describe how the organization re	ports conservation easements in its revenu	
	balance sheet, and include, if applicable, the		
	organization's accounting for conservation e		
Part	III Organizations Maintaining Colle	ctions of Art, Historical Treasures, o	r Other Similar Assets.
		ered "Yes" to Form 990, Part IV, line 8.	
1a	If the organization elected, as permitted und		
	works of art, historical treasures, or other		
	public service, provide, in Part XIII, the text of	of the footnote to its financial statements the	at describes these items.
b	If the organization elected, as permitted ur	nder SFAS 116 (ASC 958), to report in its	revenue statement and balance sheet
	works of art, historical treasures, or other		
	public service, provide the following amount		
	(i) Revenues included in Form 990, Part VIII,	line 1	▶ \$
	(ii) Assets included in Form 990, Part X		<b>&gt;</b> \$
2	If the organization received or held works	of art, historical treasures, or other similar	ar assets for financial gain, provide the
	following amounts required to be reported un		
а	Revenues included in Form 990, Part VIII, lin		
b	Assets included in Form 990, Part X		<b>&gt;</b> \$

Part	III Organizations Maintaining	Collections of A	rt, Historical T	reasures, or Of	her Similar Ass	ets (continued)
3	Using the organization's acquisition, a collection items (check all that apply):	accession, and oth	er records, chec	k any of the follow	wing that are a sig	inificant use of its
а	☐ Public exhibition		d 🗌 Loan	or exchange prog	rams	
b	☐ Scholarly research					
С	☐ Preservation for future generations	<b>S</b>				
4	Provide a description of the organizat XIII.	ion's collections ar	nd explain how th	ney further the org	ganızatıon's exemp	ot purpose in Part
5	During the year, did the organization	solicit or receive d	lonations of art,	historical treasure	s, or other similar	
	assets to be sold to raise funds rather	than to be maintain	ned as part of the	e organization's co	ollection?	☐ Yes ☐ No
Part						
	Complete if the organization	answered "Yes"	to Form 990, P	art IV, line 9, or	reported an amo	ount on Form
	990, Part X, line 21.	<del></del>				
1a	Is the organization an agent, trustee,					
	included on Form 990, Part X? .					☐ Yes ☐ No
b	If "Yes," explain the arrangement in Pa	art XIII and complet	te the following ta	able:	Δm	ount
_	Posinning holanos			4		
C	<b>3 3</b>	. <i></i>		<u>10</u>	<del> </del>	
d	Distributions during the year			16		
e f	Ending balance			11		
2a	Did the organization include an amour					☐ Yes ☐ No
	If "Yes," explain the arrangement in Pa					
Par		***************************************				
	Complete if the organization	answered "Yes"	to Form 990, P	art 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	0	0	0	NA	NA
b	Contributions	395,000	0	0	NA	NA
C	Net investment earnings, gains, and			1		
	losses	16,916	0		NA	NA.
d	Grants or scholarships	0	0	0	NA.	NA
е	Other expenditures for facilities and					
	programs	0	0			NA NA
f	Administrative expenses	0	0	·		NA_
g	End of year balance	411,916	0		1	NA_
2	Provide the estimated percentage of t			, column (a)) held	as·	
a	Board designated or quasi-endowmer		!%o			
b	Permanent endowment	0%				
С	Temporarily restricted endowment ► The percentages in lines 2a, 2b, and 2		104			
3a	Are there endowment funds not in the			at are held and ad	lministered for the	
Ju	organization by:	o poodoolon or the	o organization the			Yes No
	(i) unrelated organizations					3a(i) ✓
	(ii) related organizations					3a(ii) ✓
b	If "Yes" to 3a(II), are the related organ	izations listed as re	quired on Sched	ule R?		3b
4	Describe in Part XIII the intended uses	of the organization	n's endowment fo	unds		
Parl	VI Land, Buildings, and Equip	ment.				
	Complete if the organization	answered "Yes"	to Form 990, P	art IV, line 11a.	See Form 990, F	art X, line 10.
	Description of property	(a) Cost or othe (investment			Accumulated epreciation	(d) Book value
1a	Land			1.3.1		
b	Buildings					_
C	Leasehold improvements					
d	Equipment					
е	Other					
Total.	Add lines 1a through 1e. (Column (d) n	nust equal Form 99	0, Part X, column	(B), line 10(c).)		

Part VII	Investments—Other Securitie Complete if the organization an		rm 990. Part IV. lır	ne 11b. See Form	990. Part X. line 12.
	(a) Description of security or catego (including name of security)		(b) Book value	(c) Me	thod of valuation d-of-year market value
(1) Financial	derivatives				
	neld equity interests				<u> </u>
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)		·			
(H)				_	
	b) must equal Form 990, Part X, col (B) line 12.)			*	
Part VIII	Investments—Program Relate		000 5 11141	44 0 5	200 5
	Complete if the organization an	swered "Yes" to Foi			
	(a) Description of investment		(b) Book value		ethod of valuation d-of-year market value
(1)					
(2)	<del></del>	_	<del></del>		<del></del>
(3)					
(4)		<u></u> .			<del></del>
(5)					
(6)					
<u>(7)</u> <u>(8)</u>				-	
(9)				<del>- </del>	
	b) must equal Form 990, Part X, col. (B) line 13)	····		1.8 × 6 ×	
Part IX	Other Assets.		<u> </u>		<u> </u>
	Complete if the organization an	swered "Yes" to For	m 990. Part IV. lir	ne 11d. See Form	990. Part X. line 15.
		(a) Description			(b) Book value
(1)					
(2)					
(3)					
(4)		<del>.</del>			
(5)					***
(6)					
(7)					
(8)					
(9)					
	mn (b) must equal Form 990, Part X,	col. (B) line 15.)	· · · · ·	<u> ▶</u>	
Part X	Other Liabilities.				
	Complete if the organization and line 25.	swered "Yes" to For	m 990, Part IV, Iir	ne 11e or 11f. See	e Form 990, Part X,
1.	(a) Description of liability	(b) Book value			
(1) Federal in		1			
(2)					
(3)					
(4)					
(5)		-			
(6)		<u> </u>			
(7)					
(8)		_			
(9)					
	o) must equal Form 990, Part X, col. (B) line 25)	•			
	uncertain tax positions. In Part XIII, pro		note to the organization	on's financial stateme	ents that reports the
araan, zation!	hability for upgorton tou positions and			Ale of a second by	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part				Return.	
	Complete if the organization answered "Yes" to Form 990, I				·
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				
а	Net unrealized gains on investments	2a			
b	Donated services and use of facilities	2b		1 72	
С	Recoveries of prior year grants	2c		] "]	
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1	1 1 1		3	_ <del></del>
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII )	4b			
C	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			5	
Part				er Return	•
	Complete if the organization answered "Yes" to Form 990,	aπ IV, III	ne iza.		
1	Total expenses and losses per audited financial statements			1	<del></del>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	ایما		/	
a	Donated services and use of facilities	2a		4, 1	
b	Prior year adjustments	2b	<del></del>	-	
C	Other losses	2c		-	
d	Other (Describe in Part XIII )	2d		2e	
e	Add lines 2a through 2d	-		3	
3	Subtract line <b>2e</b> from line <b>1</b>	1 1			<del></del>
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a	Other (Describe in Part XIII )	4b		1	
b	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, Iir			5	<u> </u>
	XIII Supplemental Information.	,.		1 0	
	e the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a an	d 4. Part	V. lines 1b and 2l	o. Part V. lı	ne 4: Part X, line
	XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part				
The au	asi-endowment is for the furtherance of Catholic education through support	of a local p	arochial school of	fering grade	es K-8 and
1111111				Y-Y	
SUDDO	ted by or affiliated with Sacred Heart Cathedral parish.				
HIJI.					
		<b></b>		<b></b>	
	·				

Schedule D (For	n 990) 2013 Page	Э
Part XIII	Supplemental Information (continued)	_
The funds set	aside in a quasi-endowment are for the furtherance of Catholic education; with the primary intent to support	·
a local parocl	ial school serving grades K- 8 that is supported by or affiliated with Sacred Heart Cathedral Catholic Parish, Davenport, IA.	

#### SGHEDULE M (Form 990)

### **Noncash Contributions**

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

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Department of the Treasury Internal Revenue Service

► Attach to Form 990.

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

Name of the organization

Employer identification number

Part	Types of Property			L				
•		(a) Check if applicable	(b) Number of contributions or items contributed	(c)  Noncash contribution  amounts reported on  Form 990, Part VIII, line 1g	Method of noncash con			_
1 2 3	Art—Works of art Art—Historical treasures Art—Fractional interests							
4 5 6	Books and publications Clothing and household goods							
7 8 9 10	Boats and planes Intellectual property Securities—Publicly traded Securities—Closely held stock .	<b>4</b>	7	140,676	Sales Procee	eds		<u> </u>
11	Securities—Closely field stock .  Securities—Partnership, LLC, or trust interests  Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15 16 17	Real estate—Residential Real estate—Commercial Real estate—Other					<del></del>		
18 19 20	Collectibles							
21 22 23	Taxidermy							
24 25 26	Archeological artifacts Other ► () Other ► ()							
27 28 29	Other ► ( ) Other ► ( ) Number of Forms 8283 received	by the ore	ganization during the tax y	year for contributions for				
	which the organization completed				29	0	Yes	No
30a	During the year, did the organizar 28, that it must hold for at least the to be used for exempt purposes	nree years f	rom the date of the initial c	ontribution, and which is n	ot required	30a		
ь 31	If "Yes," describe the arrangement Does the organization have a contributions?	gift accep				31	1	
32a	Does the organization hire or use contributions?				ell noncash	32a	1	
ь 33	If "Yes," describe in Part II If the organization did not report a describe in Part II.	n amount in	column (c) for a type of pro	pperty for which column (a)	s checked,			

Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.
The amour	nt reported in Part I, coumn (b) is the number of contributions.
	An investment advisor is used to sell securities and reinvest the proceeds.

#### SCHEDULE O (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

Open to Public Inspection

Name of the organization	Employer identification number
Sacred Heart Cathedral Foundation	45-1584666
Part VI, Section B, Lines 11b and 12c and Section C, Line 19	
11b. A masting of all members of its governing board was held to review the Form 000 and its ashedutes	
11b: A meeting of all members of its governing board was held to review the Form 990 and its schedules.	
12c: Currently, the only relationship is with the investment advisor and that relationship is reviewed quarterly at meetings of the finance	
committee of the organization. No other work that could result in conflict exists at this time.	
19: All documentation is available upon request; no requests for documentation were received during the year. The public is made aware	
of the entity and availability of information, from time to time, by announcement in the Church bulletin for Sacred Heart Cathedral	
er are orang and availability or missing and name to thing by announcement in the orange paleeting society relatives and	
Catholic Parish, Davenport, IA	
•	
······	
••••••	

Schedule O (Form 990 or 990-EZ) (2013)	Page 2
Name of the organization	Employer identification number
Sacred Heart Cathedral Foundation	45-1584666
······································	