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Department of the Treasury Internal Revenue Service

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В

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Paid

Preparer

Use Only

For the 2014 calendar year, or tax year beginning

C Name of organization

Return of Organization Exempt From Income Tax

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

Do not enter social security numbers on this form as it may be made public

▶ Information about Form 990 and its instructions is at www irs gov/form990

NORFOLK CATHOLIC SCHOOLS FOUNDATION

2014 Open to Public Inspection

D Employer identification number

OMB No 1545-0047

Address change 23-7140264 Doing business as Name change Number and street (or P O box if mail is not delivered to street address) Room/suite E Telephone number P.O. BOX 402 Initial return Final return/ City or town, state or province, country, and ZIP or foreign postal code terminated NE 68702-0402 NORFOLK 946,158 G Gross receipts \$ Amended return Name and address of principal officer H(a) is this a group return for subordinates? Application pending DEE NEDROW 1005 KELLAND DRIVE H(b) Are all subordinates included? Yes 68701 If "No " attach a list (see instructions) NORFOLK NE X 501(c)(3) 4947(a)(1) or 527 Tax-exempt status 501(c) (insert no ) N/A Website > H(c) Group exemption number X Corporation Year of formation 1971 NE Form of organization State of legal domicile Part I Summary Briefly describe the organization's mission or most significant activities PROGRAM SUPPORT Activities & Governance 2 Check this box > if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) 9 4 Number of independent voting members of the governing body (Part VI, line 1b) Ō 5 5 Total number of individuals employed in calendar year 2014 (Part V. line 2a) 9 6 6 Total number of volunteers (estimate if necessary) 0 7a Total unrelated business revenue from Part VIII, column (C), line 12 7a 7b 0 b Net unrelated business taxable income from Form 990-T, line 34 Prior Year Current Year 232 27,359 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, line 2g) 10 Investment income (Part VIII, column (A), lines 3, 45 and 160 2 1
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 148,062 264, 673 162,294 12 Total revenue - add lines 8 through 11 (must equal Part VIII column (A), line (12) 292,032 119,169 103,000 13 Grants and similar amounts paid (Part IX, column (A)-lines-1-3) 0 14 Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0 16a Professional fundraising fees (Part IX, column (A), line 11e) 0 b Total fundraising expenses (Part IX, column (D), line 25) ▶ 12,008 18,111 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 137,280 115,008 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 19 Revenue less expenses Subtract line 18 from line 12 25,014 177,024 Beginning of Current Year End of Year 3.909.968 4.010 20 Total assets (Part X, line 16) 21 Total liabilities (Part X, line 26) 3,909,968 010 488 22 Net assets or fund balances Subtract line 21 from line 20 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is polete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge true, correct, and co Signature of officer Sign **OFFICER** DEE NEDROW Here Type or print name and title Print/Type preparer's name Date PTIN Check

May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions

P.O.

NORFOLK, NE

GAINES & ASSOCIATES

68702-1167

BOX 1167

WILLIAM L GAINES JR CPA

Firm's name

05/12/15

Firm's EIN

Phone no

self-employed

X Yes No Form 990 (2014)

P00009615

**4**7-0778301

402-379-9294

			OLS FOUNDATION 2	23-7140264	Pa	ge 2
	tatement of Program		•	this Doct III	1	(T)
	neck if Schedule O c		onse or note to any line in	this Part III	<del> </del>	X
	SUPPORT	Sion				
Did the orga	nization undertake any sig	Inificant program	services during the year which w	vere not listed on the		
=	90 or 990-EZ?				Yes	No
	scribe these new services					
Did the orga services?	inization cease conducting	, or make signific	ant changes in how it conducts,	any program	Yes X	No
	scribe these changes on S	chedule O				140
			nments for each of its three large	est program services, as measured by		
expenses S	Section 501(c)(3) and 501(	c)(4) organization	s are required to report the amoi	unt of grants and allocations to others,		
the total exp	enses, and revenue, if an	y, for each progra	m service reported			
a (Code	) (Expenses \$	103.00	00 including grants of \$	103,000 ) (Revenue \$		
			RAMS AND STUDENT			
	. 1,800)					
<b>b</b> (Code	) (Expenses \$	<del></del>	including grants of \$	) (Revenue \$		
- (	, (pen.ese +		mulasmy grams s v	, (		
c (Code	) (Expenses \$	(*)	including grants of \$	) (Revenue \$		
		•		-		
		,				
4d Other progr	ram services (Describe in	Schedule O )				
(Expenses		including gra		) (Revenue \$		
4e Total progra	am service expenses >		3,000			
AA					Form <b>99</b> (	(201

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

	## IV . Checklist of Required Schedules		<u>P</u> ;	age 3
Га	tiv Coneculist of Nequined Schedules	1	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			140
	complete Schedule A	1	_ <b>X</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	3	_	X
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		X
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		X_
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		X
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	-	X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			•
	complete Schedule D, Part III	8		X
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	9		x
10	debt negotiation services? If "Yes," complete Schedule D, Part IV  Did the organization, directly or through a related organization, hold assets in temporarily restricted	<del>                                   </del>	<del></del>	-
10	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		x
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10		-
• •	VII, VIII, IX, or X as applicable	ļ		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes,"		]	
_	complete Schedule D, Part VI	11a	ł	x
ь	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 169 If "Yes," complete Schedule D, Part VIII	_11c		X
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	<u> </u>	X
e	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		ļ	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	ļ	X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	<u> </u>	X
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	<del> </del> -	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	├	X
ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,		1	
	fundraising, business, investment, and program service activities outside the United States, or aggregate	445		- T
4-	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	<del> </del>	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	15		x
16	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	13	<del> </del> -	1-
10	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	<u>                                   </u>	1	† <u></u>
• •	Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on	<u> </u>	1	† <del></del>
	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	x
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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X

20b

	990 (2014) NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264  Int IV . Checklist of Required Schedules (continued)		P	age 4
	int ta . Checknet of Kednied Schednies (continued)	<del>-, </del>	Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		162	NO
۲.	domestic government on Part IX, column (A), line 12 If "Yes," complete Schedule I, Parts I and II	21	x	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		-	<del> </del>
	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	<del></del>	<del>                                     </del>	
	organization's current and former officers, directors, trustees, key employees, and highest compensated		ļ	
	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		1	
	through 24d and complete Schedule K. If "No," go to line 25a	24a	1	X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			<b></b>
	to defease any tax-exempt bonds?	24c		
ď	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a				
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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?	1		
	If "Yes," complete Schedule L, Part I	25b	<u> </u>	X
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 "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,		1	
	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	ļ	X
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	ļ	X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			1
	Schedule L, Part IV	286	4	X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	}	1	1
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	<del>↓</del>	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	<del>-</del>	X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified		Į	
	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	<del> </del>	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	+	X
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	+-	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III,		-	•
	or IV, and Part V, line 1	34		X
35a		35a	<del>'  </del>	+^
b				1
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35t	) [	1

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable

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,

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and

related organization? If "Yes," complete Schedule R, Part V, line 2

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

Form **990** (2014)

X

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Part VI

Pai	Check if Schedule O contains a response or note to any line in this Part V			
	Check if deficable of contains a response of flote to any line in this hart v	$\overline{}$	Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			<del></del>
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and		]	;
	reportable gaming (gambling) winnings to prize winners?	1c		X
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		ĺ	
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)			Í
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
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			Į
	account)?	4a		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	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			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c)			-
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			j
	and services provided to the payor?	7a		ĺ
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	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		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		İ
9	Sponsoring organizations maintaining donor advised funds.		'	
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring 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 10b			
11	Section 501(c)(12) organizations Enter	7		
а	Gross income from members or shareholders	_]		
b	Gross income from other sources (Do not net amounts due or paid to other sources	7		
	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			
13	Section 501(c)(29) qualified nonprofit health insurance issuers		<u></u>	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note See the instructions for additional information the organization must report on Schedule O			
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		X
<u>b</u>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
DAA		For	m <b>99</b>	0 (2014

NORFOLK

DAA

orm	990 (2014) NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264		P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and	for a "		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedulè O. Sée	ınstrı	uction	s
	Check if Schedule O contains a response or note to any line in this Part VI	_		
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 9			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 9			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	-	X
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		X
7a	Did the organization have members, stockholders or other persons who had the power to elect or appoint	_		77
	one or more members of the governing body?	7a		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	7.		x
۰	stockholders, or persons other than the governing body?	7b	·····	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following	0.0	X	İ
a	The governing body?	8a_ 8b	X	<b></b> -
р 9	Each committee with authority to act on behalf of the governing body?  Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at	90		<del> </del>
9	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Co			
<u> </u>	non 2.1 onoice (11110 decition 2 requeste information about policies historiquies by the internal revenue de	<u>uc</u> /	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,			-
_	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
	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 conflicts?	12b		X
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"			
	describe in Schedule O how this was done	12c		x
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		X
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 arrangement			
	with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its			
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the	1		
	organization's exempt status with respect to such arrangements?	16b		<u> </u>
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶ None			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only)			
	available for public inspection. Indicate how you made these available. Check all that apply			
	Own website Another's website Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
_	financial statements available to the public during the tax year			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
D	ON SMEJKAL 1405 NO. 30TH ST			

NE 68702

form 990 (2014)	NORFOLK	CATHOLIC	SCHOOLS	FOUNDATION	23-7140264

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any	off	x unle	ss pe nd a d	ition more rson i	than or s both a r/truste	an e)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W 2/1099-MISC)	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	( <b>V</b> 2 1033 Miles)	organization and related organizations
(1) SALLY LEWIS	0.00									
DIRECTOR	0.00	x	ļ					o	0	0
(2) DON SMEJKAL	0.00	^	-			1-1		<u> </u>	<u> </u>	<u> </u>
	0.00					1 1				
DIRECTOR	0.00	X	ł		1			0	0	0
(3) DALE STEPHENSON										
	0.00	İ	1		l	1				
DIRECTOR	0.00	X	<u> </u>		<u> </u>			0	0	0
(4) MARK FITZGERALD										
	0.00			}						
SECRETARY	0.00	X	ļ	X	1	$\downarrow \downarrow \downarrow$		0	0	0
(5) WILLIAM L. GAINI		1		1						
	0.00		ŀ							
TREASURER	0.00	X	├-	X	╄	-		0	0	0
(6) DR. MICHAEL MAII		1				ļj				}
DIRECTOR	0.00	7.7		ŀ				O	c	
DIRECTOR NEDBOW	0.00	X	┼-	-	╂—	+ -		ļ <u>U</u>		0
(7) DEE NEDROW	0.00	1			1					
PRESIDENT	0.00	x		x				0	d	0
(8) DR. COURTNEY GOI		┼^	<del> </del>	1	╁	-		<u> </u>	<del> </del>	<del>' </del>
(c, zit. Cookiikii Go	0.00									
DIRECTOR	0.00	x				'		Ò	į c	o
(9) MARK WEIDNER	1	† <u></u>	<del>                                     </del>	†	†	+ -	-	<del> </del>	1	<del> </del>
• • • • • • • • • • • • • • • • • • • •	0.00			-				}		
DIRECTOR	0.00	X						0		0
(10)										
(11)		-	-		-					
DAA			1_		1_	Щ.				Form <b>990</b> (2014)

23/140264 05/12/2015	8 01 AM				
Form 990 (2014)	NORFOLK	CATHOLIC	SCHOOLS	FOUNDATION	23-7140264

Par	t VII Section A Officers	, Directors, Tru	stee	s, K	ey E	mpl	oyee	s, a	and Highest Compensated	Employees (continued)			
	(A) Name and title	(B) Average hours per week (list any hours for	off	k, unle icer ai	ss pe	nore rson recto	than o	ee)	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F Estim amou oth comper from	ated nt of er isation the	
		related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	Former	(W-2/1099-MISC)		organi and re organia	lated	
(12)													
(13)												_	
(14)				-									
(15)				-	 							_	
(16)					-							*****	
(17)								-				·- <u>·</u>	
(18)													
(19)								-					
1b c d	Sub-total Total from continuation she Total (add lines 1b and 1c)						-11	<b>&gt; &gt;</b>		- C100 000 d			
	Total number of individuals (i reportable compensation from	n the organizatio	n ▶	0			<del>-</del>					Yes	No
3 4	Did the organization list any fi employee on line 1a? If "Yes For any individual listed on lii organization and related orga	," complete Sche ne 1a, is the sum	edule of re	J fo epor	r suc table	ch in	idivid mper	lual Isat	ion and other compensation	n from the	3		х
5	individual  Did any person listed on line for services rendered to the	1a receive or ac	crue	com	pens	satio	on fro	m a	any unrelated organization o		5		x
Sect 1	tion B. Independent Contract Complete this table for your f	ors								than \$100,000 of			
	compensation from the organ								ndar year ending with or wil			(C)	
	Name ar	o ousiness address						1	Descr	phon of services		Compensi	ation
	·							+		<del></del>			
					_	-		$\dagger$					
								+					
								+					
2	Total number of independent												
DAA	received more than \$100,000	or compensation	אוז ווכ	ım tr	e or	gan	izatio	n 🕨	<u> </u>	0	<u>_</u>	orm <b>99</b>	0 (2014

Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (A) (C) (D) Revenue Unrelated exempt business excluded from tax function under sections 512-514 revenue revenue 1a Federated campaigns 1a **b** Membership dues 1b c Fundraising events 1c ਫ਼ੵਫ਼ d Related organizations 1d e Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f 27,359 20,470 g Noncash contributions included in lines 1a-1f \$ h\_Total Add lines 1a-1f 27,359 Program Service Revenue Busn Code 2a b С d f All other program service revenue g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 131,858 131,858 Income from investment of tax-exempt bond proceeds Royalties (i) Real (ii) Personal 6a Gross rents Less rental exps Rental inc or (loss) Net rental income or (loss) Gross amount from (i) Securities (ii) Other sales of assets 718,211 68,730 other than inventory b Less cost or other 654,126 basis & sales exps c Gain or (loss) 64,085 68,730 d Net gain or (loss) 132,815 ▶ 64,085 68,730 8a Gross income from fundraising events Other Revenue (not including \$ of contributions reported on line 1c) See Part IV, line 18 b Less direct expenses c Net income or (loss) from fundraising events ▶ 9a Gross income from gaming activities See Part IV, line 19 b Less direct expenses c Net income or (loss) from gaming activities ▶ 10a Gross sales of inventory, less returns and allowances b Less cost of goods sold b c Net income or (loss) from sales of inventory Miscellaneous Revenue Busn Code 11a b All other revenue Total. Add lines 11a-11d Total revenue. See instructions 292,032 64,085 200,588

## Form 990 (2014) NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264

	rt IX Statement of Functional Exp				
Section	on 501(c)(3) and 501(c)(4) organizations must co		ner organizations must com	nplete column (A)	•
	Check if Schedule O contains a response				
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	103,000	103,000		
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22			-,	
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				,
4	Individuals See Part IV, lines 15 and 16  Benefits paid to or for members			<u> </u>	·
5	Compensation of current officers, directors,				<del></del>
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and		}	ł	
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				<del></del>
10 11	Payroll taxes Fees for services (non-employees)			<del></del>	<del></del>
a	Management			į	
	Legal				
С	Accounting	500		500	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				<del></del>
f	Investment management fees	9,758	<u> </u>	9,758	<del></del>
g	Other (If line 11g amount exceeds 10% of line 25, column				
40	(A) amount, list line 11g expenses on Schedule O )				
12 13	Advertising and promotion Office expenses	125		125	
14	Information technology			120	
15	Royalties				<del></del>
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	<u> </u>			
19	Conferences, conventions, and meetings				<del>,, , , , , , , , , , , , , , , , , , ,</del>
20	Interest			<del></del>	
21 22	Payments to affiliates  Depreciation, depletion, and amortization				
23	Insurance	744		744	<del></del>
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	FOREIGN TAX	881		881	
b		ļ <del></del>			
C		<u> </u>			<del></del>
d	All other expenses				
e 25	Total functional expenses Add lines 1 through 24e	115,008	103,000	12,008	
26	Joint costs Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here   following SOP 98-2 (ASC 958-720)	123,000	203,000	22,000	

	111 A				<del></del> ,	<del></del>
		Check if Schedule O contains a response or note	to any line in this Part X	<del></del>	—	
				(A) Beginning of year		( <b>B</b> ) End of year
	1	Cash—non-interest bearing			1	
	2	Savings and temporary cash investments	Į	3,300	2	7,822
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and former of	ficers, directors,			
		trustees, key employees, and highest compensated em	ployees		-	
		Complete Part II of Schedule L	Į.		5	
	6	Loans and other receivables from other disqualified pers	sons (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			
ts		organizations (see instructions) Complete Part II of Sch	nedule L		6	
Assets	7	Notes and loans receivable, net			7	
ĕ	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or				
		other basis Complete Part VI of Schedule D	10a			
	b	Less accumulated depreciation	10b		10c	
	11	Investments—publicly traded securities	3,906,668	11	4,002,666	
	12	Investments—other securities See Part IV, line 11		12		
	13	Investments—program-related See Part IV, line 11		13		
	14	Intangible assets		14		
	15	Other assets See Part IV, line 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 3	4)	3,909,968	16	4,010,488
	17	Accounts payable and accrued expenses			17	
	18	Grants payable		18		
	19	Deferred revenue			19	
	20	Tax-exempt bond liabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of	of Schedule D		21	
S	22	Loans and other payables to current and former officers	s, directors,			
Liabilities	ł	trustees, key employees, highest compensated employ	ees, and			
abi		disqualified persons Complete Part II of Schedule L			22	
	23	Secured mortgages and notes payable to unrelated thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated third p	parties		24	
	25	Other liabilities (including federal income tax, payables	to related third			
	l	parties, and other liabilities not included on lines 17-24)	Complete Part X		}	
		of Schedule D			25	
	26	Total liabilities Add lines 17 through 25		0	26	0
	İ	Organizations that follow SFAS 117 (ASC 958), chec	ck here ▶ 🗓 and			
ces		complete lines 27 through 29, and lines 33 and 34				
lan	27	Unrestricted net assets		3,909,968	27	4,010,488
Ва	28	Temporarily restricted net assets			28	tr1
pur	29	Permanently restricted net assets	 	29	-	
Ę		Organizations that do not follow SFAS 117 (ASC 95	8), check here ▶ and			
Net Assets or Fund Balances	1	complete lines 30 through 34				
set	30	Capital stock or trust principal, or current funds			30	
AS	31	Paid-in or capital surplus, or land, building, or equipment	nt fund		31	
ě	32	Retained earnings, endowment, accumulated income,	or other funds		32	<u> </u>
	33	Total net assets or fund balances		3,909,968		4,010,488
	34	Total liabilities and net assets/fund balances		3,909,968	34	4,010,488

orm	990 (2014) NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264			Page <b>12</b>
	rt 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		2,032
2	Total expenses (must equal Part IX, column (A), line 25)	2	11.	5,008
3	Revenue less expenses Subtract line 2 from line 1	3	17	7,024
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	3,90	9,968
5	Net unrealized gains (losses) on investments	5		
6	Donated services and use of facilities	6		
7	Investment expenses	7		
8	Prior period adjustments	8		
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-7	6,504
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	33, column (B))	10	4,01	0,488
Pa	rt XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
				es No
1	Accounting method used to prepare the Form 990 X Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in		_	
	Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			-
b	Were the organization's financial statements audited by an independent accountant?		2b	X
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a			-
	separate basis, consolidated basis, or both			
	Separate basis Consolidated basis Both consolidated and separate basis			
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight			
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	1
	If the organization changed either its oversight process or selection process during the tax year, explain in			
	Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in			
	the Single Audit Act and OMB Circular A-133?		3a	1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b	
			Form	990 (2014)

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.

▶ 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

OMB No 1545-0047

Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

Open to Public

		NORFOLK CATH	HOLIC SCHOOLS	FOUNDAT	ION	23-7140	264	
Part I	Reaso	on for Public Charity	Status (All organizat	ions must co	mplete	this part ) See instruction	S	_
he orga	nization is not	a private foundation becaus	se it is (For lines 1 through	11, check only	one box	)		
1	A church, cor	evention of churches, or ass	sociation of churches desc	ribed in section	170(b)(1	)(A)(i).		
2	A school desc	cribed in section 170(b)(1)(	(A)(ii) (Attach Schedule E	)				
3	A hospital or	a cooperative hospital servi	ice organization described	in section 170(	o)(1)(A)(i	ii)		
4	•					170(b)(1)(A)(III) Enter the ho	spital's name,	
	city, and state		•	•				
5	•		of a college or university o	wned or operate	d by a go	vernmental unit described in		
- لــا		b)(1)(A)(iv). (Complete Part			, ,			
6		te, or local government or g		ed in section 170	)(b)(1)(A)	(v)		
7		,	•			unit or from the general public		
	-	section 170(b)(1)(A)(vi). (C						
8		trust described in section		e Part II)				
9	•				ontributio	ons, membership fees, and gro	ss	
ليبينا	_	· · · · · · · · · · · · · · · · · · ·	• •			) no more than 33 1/3% of its		
		gross investment income a						
		e he organization after June 3						
10	An organizati	on organized and operated	exclusively to test for publ	lic safety See s	ection 50	9(a)(4)		
1 X	An organizati	on organized and operated	exclusively for the benefit	of, to perform th	e functio	ns of, or to carry out the purpos	ses of	
_	one or more p	publicly supported organization	itions described in section	509(a)(1) or sec	ction 509	(a)(2) See section 509(a)(3).	Check	
	the box in line	es 11a through 11d that des	scribes the type of support	ing organization	and com	plete lines 11e, 11f, and 11g		
a 🗌	Type I A sup	porting organization operat	ted, supervised, or controll	ed by its suppor	ted organ	ization(s), typically by giving		
	the supported	d organization(s) the power	to regularly appoint or elec-	ct a majority of th	ne directo	ers or trustees of the supporting	)	
	organization	You must complete Part	IV, Sections A and B					
<b>b X</b>	Type II. A su	pporting organization super	rvised or controlled in conn	ection with its si	pported	organization(s), by having		
	control or ma	nagement of the supporting	g organization vested in the	e same persons	that cont	rol or manage the supported		
	organization(	s) You must complete Pa	art IV, Sections A and C.					
c [_	Type III func	tionally integrated. A supp	porting organization operat	ted in connection	with, an	d functionally integrated with,		
	its supported	organization(s) (see instruc	ctions) You must comple	ete Part IV, Sect	ions A, [	), and E.		
d	Type III non-	functionally integrated. A	A supporting organization o	perated in conn	ection wit	h its supported organization(s)		
	that is not fur	nctionally integrated. The or	rganization generally must	satisfy a distribi	ition requ	irement and an attentiveness		
	requirement (	(see instructions) You mus	st complete Part IV, Sect	ions A and D, a	nd Part \	<i>I</i> .		
е	Check this bo	ox if the organization receive	red a written determination	from the IRS th.	at it is a T	ype I, Type II, Type III		
	functionally in	ntegrated, or Type III non-fu	unctionally integrated supp	orting organizati	on			_
		r of supported organizations					<u></u>	1
g Pr	ovide the follow	ving information about the s	supported organization(s)	<del></del>		<del></del>	r <del></del>	_
	ne of supported	(n) EIN	(iii) Type of organization	1	rganization ir governing	(v) Amount of monetary	(vi) Amount of	
01	rganization		(described on lines 1–9 abov€ or IRC section		nent?	support (see instructions) -	other support (see instructions)	
			(see instructions))			,	,	
				Yes	No			
A) N	ORFOLK (	ATHOLIC SCHOO	1	t t				_
		99-9999999	1	X				0
B)								
		<del> </del>	<del></del>			<del>                                     </del>		-
C)								
			<del> </del>					_
D)				j				
		<del> </del>	+		<del>                                     </del>		<del> </del>	_
E)					}			
			<del> </del>					_
otal		1					1	

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)

Sec	tion A. Public Support							
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014		(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	1						
3	The value of services or facilities furnished by a governmental unit to the organization without charge		·					
4	Total Add lines 1 through 3				<u> </u>			
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support Subtract line 5 from line 4							
	tion B. Total Support							
Caler	dar year (or fiscal year beginning in) ▶	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014		(f) Total
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on			<u> </u>				
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)							
11	Total support. Add lines 7 through 10			<u> </u>				
12	Gross receipts from related activities, etc	(see instructions)					12	
13	First five years If the Form 990 is for the	organization's firs	t, second, third, f	ourth, or fifth tax ye	ear as a section 50	1(c)(3)		
	organization, check this box and stop her					· · · · · · · · · · · · · · · · · · ·		<b>•</b>
Sec	tion C. Computation of Public Su	upport Percen	tage		<del></del>			
14	Public support percentage for 2014 (line 6	i, column (f) divide	d by line 11, colu	mn (f))		<u> </u>	14	%_
15	Public support percentage from 2013 Sch					L	15	<u></u> %
16a	33 1/3% support test—2014 If the organ	ization did not che	ck the box on line	e 13, and line 14 is	33 1/3% or more,	check this		. —
	box and stop here. The organization qual							▶ [_
b	33 1/3% support test—2013 If the organ				15 is 33 1/3% or r	nore,		
	check this box and stop here. The organi	•		_				
17a		•						
	10% or more, and if the organization mee							
	Part VI how the organization meets the "fa	acts-and-circumsta	inces" test. The c	organization qualifie	es as a publicly su	оропеа		. ┌─
	organization	40 1545	المحاج فيات لدات	hav an han 12-1	16a 16b as 17a a			<u> </u>
b	10%-facts-and-circumstances test—20	•						
	15 is 10% or more, and if the organization			·	•			
	Explain in Part VI how the organization me	eets the facts-and	a-circumstances	test The organizat	non quannes as a	Jublicly		_
10	supported organization	id not chook a have	on line 12 15c	16h 17a ar 17h a	hack this hav and	200		
18	Private foundation If the organization di	u not check a box	on me 13, 10a,	100, 17a, 01 17D, C	HECK HIIS DOX AND	366		▶ □
	instructions							

Schedule A (Form 990 or 990-EZ) 2014 NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264

Part III	Support Schedule for Organizations Describe	d in Section 509(a)(2
	cappert concadio for organizations bootings	2 III 000tion 000(2/(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)

Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in) ▶	(a) 2010	<b>(b)</b> 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total Add lines 1 through 5						<u> </u>
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons		·				
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from	·			1		
	line 6)		<u></u>	1		<u> </u>	
	tion B. Total Support			T	1 1 0 0 1 0	1	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6			<u> </u>		-	<del> </del>
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			<del> </del>	<u> </u>		<del> </del>
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years If the Form 990 is for the	organization's firs	t, second, third, f	ourth, or fifth tax ye	ear as a section 50	)1(c)(3)	
	organization, check this box and stop her	-					<u> </u>
Sec	tion C. Computation of Public Si	upport Percen	tage				
15	Public support percentage for 2014 (line 8	3, column (f) divide	d by line 13, colu	mn (f))		15	%
16	Public support percentage from 2013 Sch					16	<u> </u>
Sec	ction D. Computation of Investme					<del></del>	<del></del>
17	Investment income percentage for 2014 (		•	3, column (f))		17	
18	Investment income percentage from 2013				,,		3 %
19a	33 1/3% support tests—2014. If the orga						▶ □
L	17 is not more than 33 1/3%, check this b						▶ ∐
b	33 1/3% support tests—2013. If the orgaline 18 is not more than 33 1/3%, check the						▶ □
20	Private foundation. If the organization di		=			_	
		E SHOOK & DOX	<u> </u>				

## Schedule A (Form 990 or 990-EZ) 2014 NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I if you checked 11a of Part I, complete Sections A and B if you checked 11b of Part I, complete Sections A and C if you checked 11c of Part I, complete Sections A, D, and E if you checked 11d of Part I, complete Sections A and D, and complete Part V)

	on A. All Supporting Organizations	<del></del>		
1	Are all of the organization's supported organizations listed by name in the organization's governing	[	Yes	No
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		v	
_	class or purpose, describe the designation. If historic and continuing relationship, explain	1	X	
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			**
	organization was described in section 509(a)(1) or (2)	2	_	X
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below	3a		X
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination	3b		ļ
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)			
	(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		ļ
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If			
	"Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		X
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign			
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			}
	despite being controlled or supervised by or in connection with its supported organizations	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination			
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	j	İ	
	purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"	ļ		
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action,	]		
	(iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document)	_5a	<u> </u>	X
b	Type I or Type II only Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		<u> </u>
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to	Í		
	anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (c) other supporting organizations that also		1	
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6		X
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial			
	contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent		1	
	controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		X
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 79	Γ	]	
	If "Yes," complete Part I of Schedule L (Form 990)	8		X
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI	9a	]	X
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b	1	x
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit			
_	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		x
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f)			
	(regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting	ļ		
	organizations)? If "Yes," answer (b) below	10a		x
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
_	determine whether the organization had excess business holdings )	10ь		1

8 Minimum Asset Amount (add line 7 to line 6)

1 Adjusted net income for prior year (from Section A, line 8, Column A)

3 Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount Subtract line 5 from line 4, unless subject to

Section C - Distributable Amount

Enter greater of line 2 or line 3Income tax imposed in prior year

2 Enter 85% of line 1

Schedule A (Form 990 or 990-EZ) 2014 NORFOLK CATHOLIC SCHO  Part V Type III Non-Functionally Integrated 509(a)(3) Support			12 <b>64</b> Page
1 Check here if the organization satisfied the Integral Part Test as a qualifying			1
other Type III non-functionally integrated supporting organizations must con			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2	_ <del></del>	
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
_5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year)			
a Average monthly value of securities	1a	·	
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI)			
Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount,			
see instructions)	4		<u> </u>
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 035	6	· · · · · · · · · · · · · · · · · · ·	
7 Recoveries of prior-year distributions	7		

8

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3 4

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emergency temporary reduction (see instructions)

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

Schedule A (Form 990 or 990-EZ) 2014

Current Year

	9(a)(3) Supporting Organiza	tions (continued)	
Section D - Distributions		<del></del>	Current Year
Amounts paid to supported organizations to accomplish exe			
2 Amounts paid to perform activity that directly furthers exemp	t purposes of supported	ł	
organizations, in excess of income from activity			
3 Administrative expenses paid to accomplish exempt purpos	es of supported organizations		
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval required)			
6 Other distributions (describe in Part VI) See instructions			<del></del>
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations to which the	e organization is responsive		
(provide details in Part VI) See instructions			
9 Distributable amount for 2014 from Section C, line 6			
Line 8 amount divided by Line 9 amount	<del></del>		<del></del>
	(1)	(ii)	(111)
Section E - Distribution Allocations (see instructions	Excess Distributions	Underdistributions	Distributable
		Pre-2014	Amount for 2014
1 Distributable amount for 2014 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2014			
(reasonable cause required-see instructions)			
3 Excess distributions carryover, if any, to 2014			
<u>a</u>			
<u>b</u>			
С			
<u>d</u>			
e From 2013			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2014 distributable amount			
Carryover from 2009 not applied (see instructions)			
Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2014 from Section			
D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2014 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2014, if	į		
any Subtract lines 3g and 4a from line 2 (if amount	[		
greater than zero, see instructions)			
6 Remaining underdistributions for 2014 Subtract lines 3h			1
and 4b from line 1 (if amount greater than zero, see			Ì
instructions)			<del> </del>
7 Excess distributions carryover to 2015 Add lines 3j		1	
and 4c		ļ	ļ
8 Breakdown of line 7			
<u>a</u>		<u> </u>	<b></b>
b		1	1

Schedule A (Form 990 or 990-EZ) 2014

d Excess from 2013 e Excess from 2014 Schedule A (Form 990 or 990-EZ) 2014 NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264

Page 8

Part Vi Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, and Part III, line 12 Also complete this part for any additional information (See instructions)

AM
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æ
05/12/2015
237140264

SCHEDULE (Form 990)

Name of the organization

Parti

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990

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

NORFOLK CATHOLIC SCHOOLS FOUNDATION

or government

Part #

2300 MADISON AV

NORFOLK

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3

3

Inspection

Employer identification number

23-7140264

OMB No 1545-0047

Open to Public 2014

ş × Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990, (h) Purpose of grant or assistance Yes non-cash assistance (g) Description of Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and (f) Method of valuation (book, FMV, appraisal, other) (e) Amount of noncash assistance 103,000 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States (d) Amount of cash grant (c) IRC section if applicable General Information on Grants and Assistance (b) EIN the selection criteria used to award the grants or assistance? 68701 (a) Name and address of organization (1) NORFOLK CATHOLIC SCHOOLS Ä

For Paperwork Reduction Act Notice, see the Instructions for Form 990 DAA Enter total number of other organizations listed in the line 1 table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3

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6

9

Schedule I (Form 990) (2014)

Schedule I (Fo	Schedule I (Form 990) (2014) NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264  Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22	DLIC SCHOOLS  Domestic Individua	FOUNDATION 2 Is. Complete if the	3-7140264 organization answere	d "Yes" to Form 990, Part I	V, line 22
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(e) Method of valuation (book, (f) Description of non-cash assistance FMV, appraisal, other)
-						
2						
9						
4						
SO.						
9						
7						
Part IV	Supplemental Information. Provide the information req	ide the information re	quired in Part I, line	2, Part III, column (b	juired in Part I, line 2, Part III, column (b), and any other additional information	nformation

**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.

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

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

NORFOLK CATHOLIC SCHOOLS FOUNDATION

Employer identification number 23-7140264

Form 990, Part III, Line 4d - All Other Accomplishment NORFOLK CATHOLIC SCHOOL PROGRAMS AND STUDENTS

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990 No review was or will be conducted.

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation No documents available to the public

Form 990, Part XI, Line 9 - Other Changes in Net Assets Explanation MARKET VALUE INCREASE Ŝ -76,504 10. Net gain or (loss) on sales of inventory

12 Total revenue. Add lines 1 through 11

15 Compensation of officers, directors, trustees, etc.

19 Occupancy, rent, utilities, and maintenance

22. Total expenses Add lines 13 through 21

23 Excess or (Deficit) Subtract line 22 from line 12

30. Number of voting members of governing body

31 Number of independent voting members of governing body

16 Salaries, other compensation, and employee benefits

13 Grants and similar amounts paid

14 Benefits paid to or for members

17 Professional fundraising fees

20 Depreciation and Depletion

18 Other professional fees

24 Total exempt revenue

25 Total unrelated revenue

Total excludable revenue

21 Other expenses

Total assets

29 Retained earnings

32 Number of employees

33 Number of volunteers

28 Total liabilities

11 Other revenue

**Two Year Comparison Report** Form **990** 2013 & 2014 For calendar year 2014, or tax year beginning Name Taxpayer Identification Number NORFOLK CATHOLIC SCHOOLS FOUNDATION 23-7140264 2013 2014 **Differences** 14,232 27,359 13,127 1 Contributions, gifts, grants 2 2 Membership dues and assessments 3 Government contributions and grants 3 4 Program service revenue 4. 107,874 131,858 23,984 5. 5 Investment income 6 Proceeds from tax exempt bonds 6. 40,188 132,815 92,627 7 Net gain or (loss) from sale of assets other than inventory 7 8 8 Net income or (loss) from fundraising events 9 9 Net income or (loss) from gaming

10.

11

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31.

33.

162,294

119,169

12,929

5,182

137,280

162,294

148,062

3,909,968

3,909,968

9

0

9

25,014

292,032

103,000

10,258

1,750

115,008

177,024

292,032

264,673

4,010,488

4,010,488

9

0

9

129,738

-16,169

-2,671

-3,432

-22,272

152,010

129,738

116,611

100,520

100,520

		ias retain matery			2014
Name NORFOLK	NORFOLK CATHOLIC SCHOOLS FOUNDATION			Employer 23-7	Employer Identification Number 23-7140264
	2010 2011	2012	2013	2014	2015
Contributions, giffs, grants		5,310	14,232	27,359	
Membership dues					
Program service revenue					
Capital gain or loss		-846	40,188	132,815	
Investment income		151,239	107,874	131,858	
Fundraising revenue (income/loss)					
Gaming revenue (income/loss)					
Other revenue					
Total revenue			162,294	292,032	
Grants and similar amounts paid		133,275	119,169	103,000	
Benefits paid to or for members					
Compensation of officers, etc					
Other compensation					
Professional fees			12,929	10,258	
Occupancy costs					
Depreciation and depletion				1	
Other expenses		14,785	5,182	_	
Total expenses		148,060	137,280	٦	
Excess or (Deficit)		7,643	25,014	177,024	
Total exempt revenue		155,703	162.294	292.032	
Total unrelated revenue					
Total excludable revenue		155,703	148,062	264,673	
Total Assets		3,726,400	3,909,968	4,010,488	
Total Liabilities				0.0	
Net Fund Balances	!	3, 726,400	3, 909, 968	4, UIU, 488	

237140264 NORFOLK CATHOLIC SCHOOLS FOUNDATION Federal Statements

\$ 109,750

FYE. 12/31/2014

Total

5/12/2015 8:01 AM

Taxable	Interest	on investments

Description							
		Amount	Unrelated Business Code		Postal / Code	Acquired after 6/30/75	US Obs (\$ or %)
INTEREST INCOME	Ć	20 050		14			
	\$	20,059		14			
Total	\$	20,059					
Doggran	tion		<u>le Dividends fro</u>				
Descript	tion						
						Acquired after	US
DIVIDENDS		Amount	Business Code	_Code_	Code	6/30/75	Obs (\$ or %)