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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

OMB No. 1545-0047 2015

		4947(a	i)(1) nonexempt cherita	ble trust.								
saftment of the Treasury		► Atte	ch to Form 990 or Form	1 990-EZ.			Open to Public					
nzi Revenue Service	► Information abou	ıt Schedule A (Fon	m 990 or 990-EZ) and its	ns is at my	www.us.gov/form990: Inspection							
e of the organization)					Employer identification	u umper					
nolic Schools Cen	ler for Excellence			ganizations must complete this part.) See instruc								
							ons.					
			is: (For lines 1 through									
	privention of churches, or association of churches described in section 170(b)(1)(A)(i).											
	ol described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) tal or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).											
A medical r	esearch organization	on operated in c	onjunction with a hos	oital desc	nbed in s	ection 170(b)(1)(A	(iii). Enter the					
	ation operated for Xb)(1)(A)(iv). (Com		college or university	owned c	r operate	d by a governmen	tal unit described in					
An organiza		receives a subs	nmental unit described stantial part of jts sup te'Part II.)				n the general public					
)(1)(A)(vi). (Complete	Part II.)								
An organizate receipts from support from acquired by	ntion that normally m activities related m gross investment the organization a	receives: (1) mo d to its exempt ent income and lifter June 30, 19	ore than 331/3% of its functions—subject to unrelated business 75. See section 509(support certain taxable (2), (Co	exception ncome .(le mplete Pa	ns, and (2) no mor ess section 511 to int III.)	e than 331/19% of its					
An organiza	tion organized and publicly supported	operated exclus	sively to test for publication for the benefit of the benefit of the benefit of the type of supporting	to perfor 09(a)(1) c	m the fun ir section	ctions of, or to cam 509(a)(2). See sec	tion 509(a)(3). Check					
the suppo		s) the power to re	supervised, or contro egularly appoint or ele Sections A and B.									
control or	management of th	ie supporting or	id or controlled in con ganization vested in th , Sections A and C.	* 1								
			ng organizațion opera s) You must comple				ly integrated with,					
that is not	functionally integr	ated The organi	porting organization of szation generally must mplete Part IV, Secti	satisfy a	distributi	on requirement and						
			written determination onally integrated supp				ii, Type iii					
	nber of supported o						[]					
		n about the supp	ported organization(s)									
(i) Name of suppor	ted organizátion	(#) EIN	(III) Type of organization (described on lines 159 above (see instructions))	(iv) is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
				Yes	No							
						<u></u>						
-			<u> </u>	·	,							
		l .	1	ı	1 1		I .					
el				L			orm 990 or 990-EZ) 2015.					

Par									
	(Complete only if you checked to Part III. If the organization fails to						any unaer		
Sect	ion A. Public Support	o quality dito	or and today in	siou below, p	icase compr	cte rait iii.j			
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total		
1	Gifts, grants, contributions, and		1						
	membership fees received. (Do not	1			İ] .			
	include any "unusual grants.") .					3,924,444	3,924,44		
2	Tax revenues levied for the								
	organization's benefit and either paid to or expended on its behalf		1			1 1			
	•					0	(
3	The value of services or facilities furnished by a governmental unit to the			l		1			
	organization without charge		j	(
4	Total. Add lines 1 through 3		 	 	773	3,924,444	3,924,444		
5	The portion of total contributions by		<u> </u>	<u> </u>		5,524,444	0,314,44		
•	each person (other than a			ļ					
	governmental unit or publicly			1]			
	supported organization) included on		İ						
	line 1 that exceeds 2% of the amount								
	shown on line 11, column (f)		<u> </u>	<u> </u>		 	3,722,466		
6 Sect	Public support. Subtract line 5 from line 4. ion B: Total Support		1	<u> </u>		<u> </u>	201,978		
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	#) Total		
7	Amounts from line 4	10) 2011	10/2012	(0) 2013	(4) 2014	3,924,444	(f) Total 3,924,444		
8	Gross income from interest, dividends,					3,524,444	3,824,444		
-	payments received on securities loans,		<u> </u>]		1			
	rents, royalties and income from similar		}			1			
	sources						, 0		
9	Net income from unrelated business								
	activities, whether or not the business					l i			
45	is regularly carried on		ļ		······································		0		
10	Other income Do not include gain or loss from the sale of capital assets					l			
	(Explain in Part VI.)								
11	Total support. Add lines 7 through 10		 			0	2 004 444		
12	Grôss receipts from related activities, etc.	(see instruction	ons)			12	3,924,444		
13	First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)								
	organization, check this box and stop her	'e					🕨 🛭		
	on C. Computation of Public Suppor	t Percentag	8						
14	Public support percentage for 2015 (line 6	i, column (f) di	vided by line 1	1, column (f))		14	%		
15	Public support percentage from 2014 Sch	edule A. Part	II, line 14			15	<u>%</u>		
16a	331/s% support test -2015. If the organization qual	ites as a not i	CLIECK THE DOX	on line 13, and	line 14 (\$ 33)	3% or more, ch			
ь	331/a% support test - 2014. If the organ	ires es a publ ization did no	ticky supported tickack a box	on line 13.or	189 and the				
_	check this box and stop here. The organic	zation qualifie	s as a publiciv	supported orga	noa, and inte	12 12/22/21/0			
17a	10%-facts-and-circumstances test-20						• □		
	10% or more, and if the organization mee	ts the "facts-	and-circumstar	nces" test, che	ck this box an	d stop here. Ex	nlain in		
	Part VI how the organization meets the "fa	icts-and-circu	mstances" tes	t. The organiza	tion qualifies	as a publicly sur	ported		
	organization						` ▶ '□		
b	10%-facts-and-circumstances test-20	14. If the orga	inization, did no	ot check a box	on line 13, 16	a, 16b, or 17a, a	and line		
	15 is 10% or more, and if the organizati	on meets the	*facts-and-cii	cumstances* 1	lest, check th	is box and stor	o ĥero.		
	Explain in Part VI how the organization me	ets the "facts	-and-circumst	ances" test. Th	ne organizatio	n qualifies as a i	oublicly		
18	supported organization	 			e e e e e e		· 🕨 🗆		
10	Private foundation. If the organization dicinstructions								
							· 🟲 📋		

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CATHOLIC SCHOOLS CENTER OF EXCELLENCE CSCOE 3033 EXCELSIOR BLVD STE 550 MINNEAPOLIS MN 55416



DECLARATION

320967

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Ignature of authorized individual Date

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