

Pro Forma

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2019

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

A For the 2019 calendar year, or tax year beginning 10/01 , 2019, and ending 09/30 , 20 20																										
B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">C Name of organization CATHOLIC RELIEF SERVICES USCCB</td> <td>D Employer identification number 13-5563422</td> </tr> <tr> <td colspan="2">Doing business as</td> <td rowspan="2">E Telephone number 410-625-2220</td> </tr> <tr> <td>Number and street (or P.O. box if mail is not delivered to street address)</td> <td>Room/suite</td> </tr> <tr> <td colspan="2">228 West Lexington Street</td> <td rowspan="2">G Gross receipts \$ 1,197,499,310</td> </tr> <tr> <td colspan="2">City or town, state or province, country, and ZIP or foreign postal code Baltimore, MD, 21201-3413</td> </tr> <tr> <td colspan="2">F Name and address of principal officer: Sean Callahan 228 West Lexington Street, Baltimore, MD 21201-3413</td> <td>H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td> </tr> <tr> <td colspan="2">I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527</td> <td>H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)</td> </tr> <tr> <td colspan="2">J Website: ▶ www.crs.org</td> <td>H(c) Group exemption number ▶</td> </tr> <tr> <td>K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶</td> <td>L Year of formation: 1943</td> <td>M State of legal domicile: DC</td> </tr> </table>	C Name of organization CATHOLIC RELIEF SERVICES USCCB		D Employer identification number 13-5563422	Doing business as		E Telephone number 410-625-2220	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	228 West Lexington Street		G Gross receipts \$ 1,197,499,310	City or town, state or province, country, and ZIP or foreign postal code Baltimore, MD, 21201-3413		F Name and address of principal officer: Sean Callahan 228 West Lexington Street, Baltimore, MD 21201-3413		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	J Website: ▶ www.crs.org		H(c) Group exemption number ▶	K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶	L Year of formation: 1943	M State of legal domicile: DC
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Part I Summary

1 Briefly describe the organization's mission or most significant activities: See Schedule O.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

Activities & Governance	3	Number of voting members of the governing body (Part VI, line 1a)	3	23
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	999
	6	Total number of volunteers (estimate if necessary)	6	801
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
	b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

		Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	936,869,875
	9	Program service revenue (Part VIII, line 2g)	0
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	5,126,432
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-18,996,105
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	923,000,202
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	201,216,989
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	253,804,681
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	875,027
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 32,543,560	
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	489,410,008
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	945,306,705
19	Revenue less expenses. Subtract line 18 from line 12	-22,306,503	15,201,342
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	508,568,926
	21	Total liabilities (Part X, line 26)	345,291,439
	22	Net assets or fund balances. Subtract line 21 from line 20	163,277,487

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here		Date 3/25/2021
	Type or print name and title James Bond, Executive Vice President, CFO	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Catholic Relief Services – USCCB

EIN# 13-5563422

“Catholic Relief Services – USCCB is a 501(c)(3) exempt organization as a result of its affiliation with the Catholic Church. As a qualifying religious organization completion and filing of Form 990 is not required by the Internal Revenue Service.”

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III Yes No

1 Briefly describe the organization's mission:

Catholic Relief Services is the official international humanitarian agency of the Catholic community in the U.S. CRS provides assistance to the poor overseas without regard to race, religion or nationality by responding to emergencies and fighting poverty. CRS serves Catholics in the U.S. as they live their faith with their brothers and sisters around the world as part of one human family.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No
If "Yes," describe these changes on Schedule O.

4 Describe the 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 \$ 390,230,914 including grants of \$ 65,809,756) (Revenue \$ 0)
Emergency - Programs offering a wide array of responses tailored to the local context and needs of affected communities; providing lifesaving assistance including food, shelter, medical equipment and assistance, clean water and hygiene supplies to help people experiencing an emergency with urgent relief; building on existing local systems to restore livelihoods and the local economy; supporting the repair and rebuilding of safe homes and infrastructure; strengthening the capacity and reach of local partners to implement and manage quality, accountable and efficient emergency programming, including in a health pandemic; and providing the tools and skills people need to manage their own recovery. Provided support to over 15.8 million beneficiaries through 270 projects in 60 countries.

4b (Code:) (Expenses \$ 230,741,831 including grants of \$ 80,667,780) (Revenue \$ 0)
Health and Social Services - Programs seeking to ensure that all children reach their full health and development potential in safe and nurturing families by: reducing morbidity and mortality due to preventable diseases, including HIV and malaria, improving nutrition and ensuring families provide safe and nurturing care. Provided support to over 90.1 million beneficiaries through 158 projects in 44 countries.

4c (Code:) (Expenses \$ 87,397,598 including grants of \$ 17,989,837) (Revenue \$ 0)
Education - Programs seeking to improve learning and achievement for all children and adolescents by strengthening access to and delivery of basic literacy, numeracy and other life skills through both formal and non-formal education; ensuring that schools are safe and welcoming for students and teachers; engaging communities to support children's learning; and strengthening education systems to ensure sustained improvements in equity and quality. Provided support to over 5.4 million beneficiaries through 133 projects in 44 countries.

4d Other program services (Describe on Schedule O.) See Schedule O, Statement 2
(Expenses \$ 128,076,137 including grants of \$ 29,227,227) (Revenue \$ 0)

4e Total program service expenses **▶** 836,446,480

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IV</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b 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? <i>If "Yes," complete Schedule D, Part VII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c 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? <i>If "Yes," complete Schedule D, Part VIII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IX</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts I and IV.</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<input type="checkbox"/>	<input type="checkbox"/>
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Part IV Checklist of Required Schedules *(continued)*

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule J</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	<input checked="" type="checkbox"/>	
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		<input checked="" type="checkbox"/>
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		<input checked="" type="checkbox"/>
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		<input checked="" type="checkbox"/>
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule L, Part I</i>		<input checked="" type="checkbox"/>
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		<input checked="" type="checkbox"/>
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		<input checked="" type="checkbox"/>
28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		<input checked="" type="checkbox"/>
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		<input checked="" type="checkbox"/>
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		<input checked="" type="checkbox"/>
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	<input checked="" type="checkbox"/>	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		<input checked="" type="checkbox"/>
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		<input checked="" type="checkbox"/>
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	<input checked="" type="checkbox"/>	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?		<input checked="" type="checkbox"/>
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>		
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule R, Part VI</i>		<input checked="" type="checkbox"/>
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	<input checked="" type="checkbox"/>	

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		
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<input checked="" type="checkbox"/>	

Part V **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No
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 999		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		✓
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
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)?	✓	
b	If "Yes," enter the name of the foreign country ▶ See Schedule O, Statement 3 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?		✓
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		✓
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		✓
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		✓
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?		✓
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	✓	
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
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:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
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.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.	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	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	✓
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15	✓
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16	✓

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

Section 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		
	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 on Schedule O.		
1b	Enter the number of voting members included on line 1a, above, who are independent		
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?		<input checked="" type="checkbox"/>
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		<input checked="" type="checkbox"/>
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<input checked="" type="checkbox"/>
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		<input checked="" type="checkbox"/>
6	Did the organization have members or stockholders?	<input checked="" type="checkbox"/>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<input checked="" type="checkbox"/>	
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<input checked="" type="checkbox"/>	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
8a	The governing body?	<input checked="" type="checkbox"/>	
8b	Each committee with authority to act on behalf of the governing body?	<input checked="" type="checkbox"/>	
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 on Schedule O		<input checked="" type="checkbox"/>

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		<input checked="" type="checkbox"/>
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	<input checked="" type="checkbox"/>	
11b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	<input checked="" type="checkbox"/>	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	<input checked="" type="checkbox"/>	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	<input checked="" type="checkbox"/>	
13	Did the organization have a written whistleblower policy?	<input checked="" type="checkbox"/>	
14	Did the organization have a written document retention and destruction policy?	<input checked="" type="checkbox"/>	
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?		
15a	The organization's CEO, Executive Director, or top management official	<input checked="" type="checkbox"/>	
15b	Other officers or key employees of the organization		<input checked="" type="checkbox"/>
	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?	<input checked="" type="checkbox"/>	
16b	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 organization's exempt status with respect to such arrangements?	<input checked="" type="checkbox"/>	

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed ► AK, CA, CO, FL, KS, KY, LA, MD, MS, NM, OK, WI
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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 on Schedule O)
- 19** Describe on 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 ►

James Bond, (410)625-2220

228 West Lexington Street, Baltimore, MD 21201-3413

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

See instructions for the order in which to list the persons above.

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 hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Sean Callahan President	40.00			✓			494,123	0	66,570	
James Bond EVP - Chief Financial Officer	40.00			✓			285,318	0	42,495	
Schuyler Thorup EVP - Overseas Operations	40.00				✓		282,524	0	41,161	
Annemarie Reilly EVP - Strategy, Tech, Communications	40.00				✓		244,894	0	43,717	
Karl Lowe VP - Chief Information Officer	40.00				✓		239,508	0	34,762	
Mark Melia EVP - Charitable Giving	40.00				✓		226,425	0	42,627	
William O'Keefe EVP - Mission & Mobilization	40.00				✓		222,145	0	25,384	
Shawn Mood Former EVP - Human Resources	40.00				✓	✓	207,436	0	36,008	
Carolyn Roberts Interim EVP - Human Resources	40.00				✓		160,385	0	28,572	
Rev Msgr J Brian Bransfield Secretary	1.50 35.00	✓		✓			0	40,747	19,780	
Most Rev Frank J Caggiano Chair	1.50	✓		✓			0	0	0	
Ms Helen Alvare Director	1.50	✓					0	0	0	
Most Rev Timonthy P Broglio Director	1.50	✓					0	0	0	
Most Rev Edward J Burns Director	1.50	✓					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Ms Geraldine P Carolan Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Mrs Mary Jane Creamer Treasurer	1.50	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
Dr Patricia M Dinneen Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Felipe Estevez Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Shelton J Fabre Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Bernard A Hebda Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev James V Johnston Jr Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Honorable Rise Jones Pichon Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Mr Christopher J Policinski Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Mr Mark Rauenhorst Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Kevin C Rhoades Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Mark J Seitz Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Oscar A Solis Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Anthony B Taylor Director	1.50	<input checked="" type="checkbox"/>						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Ms Ann Thivierge Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Mr Stephen A Walsh Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Mr Brian Wenger Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Thomas Wenski Director	1.50	<input checked="" type="checkbox"/>						0	0	0
Most Rev Gregory J Mansour Chair	1.50	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	0	0	0
Mr Tom Arndorfer Director	1.50	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	0	0	0
Most Rev Paul S Coakley Director	1.50	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	0	0	0
Most Rev Jerome E Listecky Director	1.50	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	0	0	0
Most Rev Gregory L Parkes Director	1.50	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	0	0	0
Mrs Jeri Eckhart Queenan Director	1.50	<input checked="" type="checkbox"/>					<input checked="" type="checkbox"/>	0	0	0
1b Subtotal								2,362,758	40,747	381,076
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,362,758	40,747	381,076

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **▶** **307**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
Deloitte Consulting LLP, 1919 Lynn Street, Arlington, VA 22209	Software Consulting	12,201,751
Calmark Inc, 6518 Solution Drive, Chicago, IL 60677	Printing & Postage Services	5,035,345
Skyvision Global Networks, Theobold Street, Borehamwood, Herfordshire, United Kingdom	Internet Services	2,344,707
Mediassociates Inc, 75 Glen Rd, Sandy Hook, CT 06482	Marketing Services	1,693,096
Key Acquisition Partners LLC, 2525 Riva Rd, Ste 145, Annapolis, MD 21401	List Broker Services	1,358,744

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **▶** **74**

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a 1,975,729					
	b	Membership dues	1b 0					
	c	Fundraising events	1c 412,410					
	d	Related organizations	1d 13,279,955					
	e	Government grants (contributions)	1e 502,012,973					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f 403,647,764					
	g	Noncash contributions included in lines 1a-1f	1g \$ 186,821,722					
	h	Total. Add lines 1a-1f ▶		921,328,831				
	Program Service Revenue	2a	Business Code					
b								
c								
d								
e								
f		All other program service revenue . .		0	0	0		
g		Total. Add lines 2a-2f ▶		0				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		1,443,751	0	0	1,443,751	
	4	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0	
	5	Royalties ▶		0	0	0	0	
	6a	Gross rents	(i) Real	140,683				
			(ii) Personal	0				
			6b	Less: rental expenses	0			
			6c	Rental income or (loss)	140,683			
	d	Net rental income or (loss) ▶		140,683	140,683	0	0	
	7a	Gross amount from sales of assets other than inventory	(i) Securities	276,134,349				
			(ii) Other	238,510				
			7b	Less: cost or other basis and sales expenses . .	268,766,997	120,441		
			7c	Gain or (loss)	7,367,352	118,069		
	d	Net gain or (loss) ▶		7,485,421	7,485,421	0	0	
	8a	Gross income from fundraising events (not including \$ 412,410 of contributions reported on line 1c). See Part IV, line 18	8a	0				
			8b	Less: direct expenses	227,801			
			c	Net income or (loss) from fundraising events . . ▶		-227,801		0
	9a	Gross income from gaming activities. See Part IV, line 19	9a					
9b			Less: direct expenses					
c			Net income or (loss) from gaming activities . . . ▶					
10a	Gross sales of inventory, less returns and allowances	10a						
		10b	Less: cost of goods sold					
		c	Net income or (loss) from sales of inventory . . . ▶					
Miscellaneous Revenue	11a	Business Code						
	11a	Defined benefit plan adjustment	525110	-5,313,875	-5,313,875	0	0	
	b	Net change in annuities, trusts, PIF	525920	2,845,607	2,845,607	0	0	
	c							
	d	All other revenue		681,454	681,454	0	0	
e	Total. Add lines 11a-11d ▶		-1,786,814					
12	Total revenue. See instructions ▶		928,384,071	5,839,290	0	1,215,950		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 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	35,000	35,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	25,500	25,500		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	193,641,188	193,641,188		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	2,603,862	593,564	1,736,650	273,648
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	0
7	Other salaries and wages	195,004,489	166,778,876	16,321,006	11,904,607
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	13,362,313	11,428,206	1,118,366	815,741
9	Other employee benefits	46,128,749	41,276,639	2,928,491	1,923,619
10	Payroll taxes	13,328,421	10,976,726	1,411,658	940,037
11	Fees for services (nonemployees):				
a	Management	27,029,182	25,370,883	875,737	782,562
b	Legal	583,270	474,961	75,800	32,509
c	Accounting	715,983	478,915	237,068	0
d	Lobbying	12,128	12,128	0	0
e	Professional fundraising services. See Part IV, line 17	697,796			697,796
f	Investment management fees	559,486	4,715	343,734	211,037
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	3,175,035	1,848,757	830,167	496,111
12	Advertising and promotion	1,858,197	71,433	0	1,786,764
13	Office expenses	25,323,325	23,084,764	1,065,431	1,173,130
14	Information technology	19,276,954	6,262,636	12,062,747	951,571
15	Royalties	2,050	0	0	2,050
16	Occupancy	14,083,300	12,448,301	1,112,375	522,624
17	Travel	31,404,754	29,797,713	1,256,541	350,500
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	1,228,739	1,203,865	1,482	23,392
20	Interest	925,280	433,312	284,377	207,591
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	8,239,283	6,291,942	1,776,279	171,062
23	Insurance	937,785	322,763	564,495	50,527
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	<u>Food, other commodities and in-kind</u>	145,299,840	145,299,840	0	0
b	<u>Program labor and materials</u>	85,795,019	85,781,968	0	13,051
c	<u>Warehousing and freight</u>	61,116,657	61,097,621	0	19,036
d	<u>Vehicle and equipment</u>	7,635,614	7,635,614	0	0
e	All other expenses	13,153,530	3,768,650	190,285	9,194,595
25	Total functional expenses. Add lines 1 through 24e	913,182,729	836,446,480	44,192,689	32,543,560
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 <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720)	1,196,878	838,331	0	358,547

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing	60,473,404	1	67,716,439
	2 Savings and temporary cash investments	845,777	2	1,048,694
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	105,080,512	4	118,134,298
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	34,602,241	9	60,563,767
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 107,993,441		
	b Less: accumulated depreciation	10b 67,568,035	44,349,476	10c 40,425,406
	11 Investments—publicly traded securities	192,453,080	11	189,220,742
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11	24	13	24
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	70,764,412	15	77,949,860
16 Total assets. Add lines 1 through 15 (must equal line 33)	508,568,926	16	555,059,230	
Liabilities	17 Accounts payable and accrued expenses	139,588,361	17	157,838,021
	18 Grants payable		18	
	19 Deferred revenue	68,882,047	19	74,581,051
	20 Tax-exempt bond liabilities	19,414,695	20	19,419,592
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	3,845,457	24	22,828,850
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	113,560,879	25	96,543,775
	26 Total liabilities. Add lines 17 through 25	345,291,439	26	371,211,289
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	83,653,591	27	98,526,919
	28 Net assets with donor restrictions	79,623,896	28	85,321,022
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	163,277,487	32	183,847,941	
33 Total liabilities and net assets/fund balances	508,568,926	33	555,059,230	

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	928,384,071
2	Total expenses (must equal Part IX, column (A), line 25)	2	913,182,729
3	Revenue less expenses. Subtract line 2 from line 1	3	15,201,342
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	163,277,487
5	Net unrealized gains (losses) on investments	5	5,141,311
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain on Schedule O)	9	227,801
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	183,847,941

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		<input checked="" type="checkbox"/>
b Were the organization's financial statements audited by an independent accountant? 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: <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	<input checked="" type="checkbox"/>	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.	<input checked="" type="checkbox"/>	
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?	<input checked="" type="checkbox"/>	
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 on Schedule O and describe any steps taken to undergo such audits.	<input checked="" type="checkbox"/>	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization CATHOLIC RELIEF SERVICES USCCB	Employer identification number 13-5563422
-------------------------------------------------------------------	-----------------------------------------------------

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33¹/₃% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33¹/₃% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 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		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
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						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
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						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 33 1/3% support test—2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10%-facts-and-circumstances test—2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
3b	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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
4c	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)? <i>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) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," 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).</i>		
5b	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?		
5c	Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
9b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a	<input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b	<input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	<input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2	Activities Test. Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3	Parent of Supported Organizations. Answer (a) and (b) below.		
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI .		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1** Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

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		
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)
1 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):			
2 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		
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 Minimum Asset Amount (add line 7 to line 6)	8		
Section C—Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7 <input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).			

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization CATHOLIC RELIEF SERVICES USCCB	Employer identification number 13-5563422
---------------------------------------------------------------	-----------------------------------------------------

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) ▶ \$
- 3 Volunteer hours for political campaign activities (see instructions)

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures														
e	Total exempt purpose expenditures (add lines 1c and 1d)														
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)														
h	Subtract line 1g from line 1a. If zero or less, enter -0-														
i	Subtract line 1f from line 1c. If zero or less, enter -0-														
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?	✓		
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	✓		
c Media advertisements?		✓	
d Mailings to members, legislators, or the public?	✓		17,100
e Publications, or published or broadcast statements?		✓	
f Grants to other organizations for lobbying purposes?	✓		15,000
g Direct contact with legislators, their staffs, government officials, or a legislative body?	✓		533,936
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		✓	
i Other activities?		✓	
j Total. Add lines 1c through 1i			566,036
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		✓	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C, Part II-B, Line 1 - Catholic Relief Services participates in advocacy on public policy activities at the Federal level (within limits set by IRS regulations) on issues related to the organization's mission, including: foreign assistance funding and reform, food security and hunger issues, global health concerns, and efforts to assist in man-made and natural disasters around the world. Staff employed by Catholic Relief Services prepare and present written and oral testimony at legislative hearings in the Congress, communicate to policy makers and their staff in meetings and in written form, and issue press releases and public statements related to pending legislation. Catholic Relief Services also sends electronic mailings to constituents inviting them to communicate to policy makers and their staff in meetings and in written form. Board members of Catholic Relief Services, prepared by staff, also communicate and meet with policy makers and their staff. Catholic Relief Services contributes to organizations (within limits set by IRS regulations) to support their efforts in advocacy on public policy activities at the Federal level. Catholic Relief Services does not contribute to or participate in election campaigns. It does not endorse candidates for elective office, nor does it publish or distribute information that directly or indirectly endorses or opposes a candidate.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization: CATHOLIC RELIEF SERVICES USCCB; Employer identification number: 13-5563422

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate values, and yes/no questions about donor advisement.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Form for Part II with multiple questions (1-9) regarding conservation easements, including checkboxes for various purposes and a table for held easements at the end of the tax year.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III with questions (1a, 1b, 2) regarding collections of art and historical treasures, including revenue and asset reporting.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange program
 - e** Other _____
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|-----------------------------------------|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	18,346,047	18,337,132	15,154,045	9,113,886	7,564,159
b Contributions	0	238,668	2,000,509	5,371,123	1,266,340
c Net investment earnings, gains, and losses	2,145,267	1,032,842	1,885,191	1,060,493	669,408
d Grants or scholarships	0	0	0	0	0
e Other expenditures for facilities and programs	696,074	1,262,595	702,613	391,457	386,021
f Administrative expenses	0	0	0	0	0
g End of year balance	19,795,240	18,346,047	18,337,132	15,154,045	9,113,886

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

- a** Board designated or quasi-endowment 0 %
- b** Permanent endowment 81 %
- c** Term endowment 19 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

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

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)	✓	
3a(ii)		✓
3b		

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

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land	0	1,785,681	0	1,785,681
b Buildings	0	26,577,672	2,141,501	24,436,171
c Leasehold improvements	0	3,753,325	1,209,452	2,543,873
d Equipment	0	29,067,613	24,805,234	4,262,379
e Other	0	46,809,150	39,411,848	7,397,302
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				40,425,406

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) Undistributed commodities	77,949,860
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	77,949,860

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) Advances received for programs	52,955,785
(3) Annuities payable	43,587,990
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	96,543,775

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	933,631,635
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	5,141,311
b	Donated services and use of facilities	2b	578,621
c	Recoveries of prior year grants	2c	0
d	Other (Describe in Part XIII.)	2d	-559,486
e	Add lines 2a through 2d	2e	5,160,446
3	Subtract line 2e from line 1	3	928,471,189
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIII.)	4b	-87,118
c	Add lines 4a and 4b	4c	-87,118
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	928,384,071

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	913,061,181
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	578,621
b	Prior year adjustments	2b	0
c	Other losses	2c	0
d	Other (Describe in Part XIII.)	2d	-140,683
e	Add lines 2a through 2d	2e	437,938
3	Subtract line 2e from line 1	3	912,623,243
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0
b	Other (Describe in Part XIII.)	4b	559,486
c	Add lines 4a and 4b	4c	559,486
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	913,182,729

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Schedule D, Part V, Line 4 - General investment returns for use in agency's relief and development efforts.

Schedule D, Part X, Line 2 - Management evaluated CRS' tax positions and concluded that CRS had taken no uncertain tax positions that require adjustments to the financial statements to comply with the provision of this guidance. CRS would be liable for income taxes in the U.S. federal jurisdiction.

Schedule D, Part XI, Line 2d - Investment management fees \$559,486.

Schedule D, Part XI, Line 4b - Rental income \$140,683 and fundraising expenses \$227,801

Schedule D, Part XII, Line 2d - Rental income \$140,683.

Schedule D, Part XII, Line 4b - Investment management fees \$559,486.

**SCHEDULE F
(Form 990)**

Statement of Activities Outside the United States

OMB No. 1545-0047

2019

Open to Public Inspection

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**
▶ **Attach to Form 990.**

▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization

Catholic Relief Services USCCB

Employer identification number

13-5563422

Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Central Africa	10	852	Program Services	See Below	121,908,343
(2) East Africa	7	1328	Program Services	See Below	288,929,058
(3) Southern Africa	7	678	Program Services	See Below	60,998,862
(4) Western Africa	10	1047	Program Services	See Below	117,530,440
(5) Latin America & Caribbean	6	525	Program Services	See Below	65,097,465
(6) Europe to Central Asia	12	749	Program Services	See Below	58,295,151
(7) East & South Asia	12	566	Program Services	See Below	40,305,226
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
3a Subtotal	64	5745			753,064,545
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	64	5745			753,064,545

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			See Attachment						
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

3 Enter total number of other organizations or entities ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.
 Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No

- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No

- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No

- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No

- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No

- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Schedule F, Part I, Line 2 - CRS employs a number of procedures for monitoring the use of grants outside of the United States.

- Grant activities are planned and conducted in alignment with headquarters, Program Quality, and Support department guidelines

- Robust policies and procedures have been developed and implemented and are monitored for compliance to ensure the highest level of stewardship and accountability.

- Country programs perform partner assessments to determine capacity and adequacy of internal controls.

- Routine financial and performance reporting is reviewed and periodic site visits are conducted by program or finance staff to review program and financial compliance and to provide assistance when necessary.

- Regional technical, as well as financial staff, are also available to provide support.

- Headquarters employs staff responsible for monitoring and evaluation and for grant technical management which are available to support country programs.

- The Internal Audit department conducts periodic country program audits for financial and program reporting compliance which may also extend to subrecipient operations.

Multiple horizontal dashed lines for providing additional supplemental information.

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central Africa	Agriculture	940,006.93	Check or Wire			
		Central Africa	Agriculture	276,081.51	Check or Wire			
		Central Africa	Agriculture	196,253.20	Check or Wire			
		Central Africa	Agriculture	175,893.08	Check or Wire			
		Central Africa	Agriculture	78,487.46	Check or Wire			
		Central Africa	Agriculture	70,167.87	Check or Wire			
		Central Africa	Agriculture	63,840.02	Check or Wire			
		Central Africa	Agriculture	48,985.64	Check or Wire			
		Central Africa	Agriculture	44,577.35	Check or Wire			
		Central Africa	Agriculture	42,246.00	Check or Wire			
		Central Africa	Agriculture	26,801.66	Check or Wire			
		Central Africa	Agriculture	20,892.62	Check or Wire			
		Central Africa	Agriculture	17,911.86	Check or Wire			
		Central Africa	Agriculture	12,347.85	Check or Wire			
		Central Africa	Agriculture	11,878.56	Check or Wire			
		Central Africa	Agriculture	10,433.16	Check or Wire			
		Central Africa	Agriculture	8,676.29	Check or Wire			
		Central Africa	Agriculture	7,990.31	Check or Wire			
		Central Africa	Agriculture	6,224.36	Check or Wire			
		Central Africa	Agriculture	5,127.19	Check or Wire			
		Central Africa	Agriculture	5,001.47	Check or Wire			
		Central Africa	Education	1,454,020.27	Check or Wire			
		Central Africa	Education	149,591.07	Check or Wire			
		Central Africa	Education	69,318.49	Check or Wire			
		Central Africa	Education	54,770.19	Check or Wire			
		Central Africa	Education	46,125.25	Check or Wire			
		Central Africa	Education	34,732.03	Check or Wire			
		Central Africa	Emergency	499,456.18	Check or Wire			
		Central Africa	Emergency	326,132.94	Check or Wire			
		Central Africa	Emergency	305,587.00	Check or Wire			
		Central Africa	Emergency	202,687.18	Check or Wire			
		Central Africa	Emergency	201,028.00	Check or Wire			
		Central Africa	Emergency	145,196.13	Check or Wire			
		Central Africa	Emergency	131,066.50	Check or Wire			
		Central Africa	Emergency	102,580.75	Check or Wire			
		Central Africa	Emergency	102,100.92	Check or Wire			
		Central Africa	Emergency	95,055.41	Check or Wire			
		Central Africa	Emergency	58,944.17	Check or Wire			
		Central Africa	Emergency	51,133.18	Check or Wire			
		Central Africa	Emergency	41,036.00	Check or Wire			
		Central Africa	Emergency	40,701.50	Check or Wire			
		Central Africa	Emergency	39,235.00	Check or Wire			
		Central Africa	Emergency	24,869.07	Check or Wire			
		Central Africa	Emergency	24,047.05	Check or Wire			
		Central Africa	Emergency	19,833.73	Check or Wire			
		Central Africa	Emergency	12,900.09	Check or Wire			

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central Africa	Health	19,095,361.38	Check or Wire			
		Central Africa	Health	2,968,288.34	Check or Wire			
		Central Africa	Health	2,034,820.48	Check or Wire			
		Central Africa	Health	574,565.79	Check or Wire			
		Central Africa	Health	498,177.19	Check or Wire			
		Central Africa	Health	361,903.89	Check or Wire			
		Central Africa	Health	310,079.07	Check or Wire			
		Central Africa	Health	223,443.78	Check or Wire			
		Central Africa	Health	219,644.11	Check or Wire			
		Central Africa	Health	198,573.56	Check or Wire			
		Central Africa	Health	182,004.89	Check or Wire			
		Central Africa	Health	180,192.74	Check or Wire			
		Central Africa	Health	180,069.64	Check or Wire			
		Central Africa	Health	172,503.00	Check or Wire			
		Central Africa	Health	157,547.54	Check or Wire			
		Central Africa	Health	155,610.26	Check or Wire			
		Central Africa	Health	152,220.30	Check or Wire			
		Central Africa	Health	135,081.87	Check or Wire			
		Central Africa	Health	133,785.67	Check or Wire			
		Central Africa	Health	132,370.61	Check or Wire			
		Central Africa	Health	113,238.50	Check or Wire			
		Central Africa	Health	104,264.82	Check or Wire			
		Central Africa	Health	100,986.94	Check or Wire			
		Central Africa	Health	94,465.16	Check or Wire			
		Central Africa	Health	85,597.51	Check or Wire			
		Central Africa	Health	85,148.45	Check or Wire			
		Central Africa	Health	78,865.03	Check or Wire			
		Central Africa	Health	72,844.25	Check or Wire			
		Central Africa	Health	70,147.83	Check or Wire			
		Central Africa	Health	69,691.58	Check or Wire			
		Central Africa	Health	68,240.45	Check or Wire			
		Central Africa	Health	64,940.98	Check or Wire			
		Central Africa	Health	60,362.98	Check or Wire			
		Central Africa	Health	55,622.66	Check or Wire			
		Central Africa	Health	50,796.17	Check or Wire			
		Central Africa	Health	45,588.83	Check or Wire			
		Central Africa	Health	39,075.88	Check or Wire			
		Central Africa	Health	36,933.60	Check or Wire			
		Central Africa	Health	29,908.00	Check or Wire			
		Central Africa	Health	29,628.73	Check or Wire			
		Central Africa	Health	24,551.98	Check or Wire			
		Central Africa	Health	21,711.45	Check or Wire			
		Central Africa	Health	17,433.06	Check or Wire			
		Central Africa	Health	17,109.95	Check or Wire			
		Central Africa	Health	16,985.79	Check or Wire			
		Central Africa	Health	16,757.42	Check or Wire			

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2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Central Africa	Health	15,667.91	Check or Wire			
		Central Africa	Health	15,407.00	Check or Wire			
		Central Africa	Health	14,658.19	Check or Wire			
		Central Africa	Health	10,625.28	Check or Wire			
		Central Africa	Health	9,886.84	Check or Wire			
		Central Africa	Microfinance	80,189.33	Check or Wire			
		Central Africa	Microfinance	59,976.57	Check or Wire			
		Central Africa	Microfinance	56,147.16	Check or Wire			
		Central Africa	Microfinance	45,691.88	Check or Wire			
		Central Africa	Microfinance	42,670.12	Check or Wire			
		Central Africa	Microfinance	5,397.80	Check or Wire			
		Central Africa	Peacebuilding	159,771.38	Check or Wire			
		Central Africa	Peacebuilding	127,684.37	Check or Wire			
		Central Africa	Peacebuilding	115,216.36	Check or Wire			
		Central Africa	Peacebuilding	100,666.61	Check or Wire			
		Central Africa	Peacebuilding	61,983.74	Check or Wire			
		Central Africa	Peacebuilding	44,876.59	Check or Wire			
		Central Africa	Peacebuilding	40,294.60	Check or Wire			
		Central Africa	Peacebuilding	33,983.31	Check or Wire			
		Central Africa	Peacebuilding	28,195.60	Check or Wire			
		Central Africa	Peacebuilding	21,252.33	Check or Wire			
		Central Africa	Peacebuilding	19,850.78	Check or Wire			
		Central Africa	Peacebuilding	19,418.35	Check or Wire			
		Central Africa	Peacebuilding	18,271.63	Check or Wire			
		Central Africa	Peacebuilding	16,848.60	Check or Wire			
		Central Africa	Peacebuilding	8,005.43	Check or Wire			
		Central Africa	Peacebuilding	6,966.92	Check or Wire			
		Central Africa	Peacebuilding	5,258.69	Check or Wire			
		Central Africa	Water	38,065.00	Check or Wire			
		East & South Asia	Agriculture	171,589.97	Check or Wire			
		East & South Asia	Agriculture	120,670.00	Check or Wire			
		East & South Asia	Agriculture	35,259.85	Check or Wire			
		East & South Asia	Agriculture	22,214.00	Check or Wire			
		East & South Asia	Agriculture	10,000.00	Check or Wire			
		East & South Asia	Agriculture	5,004.00	Check or Wire			
		East & South Asia	Education	1,028,455.59	Check or Wire			
		East & South Asia	Education	79,467.00	Check or Wire			
		East & South Asia	Education	70,283.67	Check or Wire			
		East & South Asia	Education	57,776.31	Check or Wire			
		East & South Asia	Education	48,433.24	Check or Wire			
		East & South Asia	Education	25,644.00	Check or Wire			
		East & South Asia	Education	10,577.17	Check or Wire			
		East & South Asia	Emergency	1,178,419.09	Check or Wire			
		East & South Asia	Emergency	171,174.92	Check or Wire			
		East & South Asia	Emergency	145,949.00	Check or Wire			
		East & South Asia	Emergency	145,432.87	Check or Wire			

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(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East & South Asia	Emergency	135,114.74	Check or Wire			
		East & South Asia	Emergency	100,628.07	Check or Wire			
		East & South Asia	Emergency	90,280.00	Check or Wire			
		East & South Asia	Emergency	83,075.00	Check or Wire			
		East & South Asia	Emergency	73,847.43	Check or Wire			
		East & South Asia	Emergency	73,799.29	Check or Wire			
		East & South Asia	Emergency	71,575.96	Check or Wire			
		East & South Asia	Emergency	64,456.23	Check or Wire			
		East & South Asia	Emergency	60,592.14	Check or Wire			
		East & South Asia	Emergency	48,145.11	Check or Wire			
		East & South Asia	Emergency	47,788.14	Check or Wire			
		East & South Asia	Emergency	42,053.90	Check or Wire			
		East & South Asia	Emergency	39,525.45	Check or Wire			
		East & South Asia	Emergency	38,386.00	Check or Wire			
		East & South Asia	Emergency	35,000.00	Check or Wire			
		East & South Asia	Emergency	35,000.00	Check or Wire			
		East & South Asia	Emergency	34,029.00	Check or Wire			
		East & South Asia	Emergency	27,948.10	Check or Wire			
		East & South Asia	Emergency	25,163.00	Check or Wire			
		East & South Asia	Emergency	24,381.69	Check or Wire			
		East & South Asia	Emergency	22,646.00	Check or Wire			
		East & South Asia	Emergency	22,067.00	Check or Wire			
		East & South Asia	Emergency	19,246.26	Check or Wire			
		East & South Asia	Emergency	18,242.57	Check or Wire			
		East & South Asia	Emergency	17,931.75	Check or Wire			
		East & South Asia	Emergency	16,525.30	Check or Wire			
		East & South Asia	Emergency	15,000.00	Check or Wire			
		East & South Asia	Emergency	13,262.00	Check or Wire			
		East & South Asia	Emergency	8,374.00	Check or Wire			
		East & South Asia	Emergency	7,885.60	Check or Wire			
		East & South Asia	Emergency	6,624.00	Check or Wire			
		East & South Asia	Emergency	5,299.00	Check or Wire			
		East & South Asia	Emergency	5,220.00	Check or Wire			
		East & South Asia	Fundraising	57,621.00	Check or Wire			
		East & South Asia	Health	212,120.00	Check or Wire			
		East & South Asia	Health	139,223.00	Check or Wire			
		East & South Asia	Health	112,572.03	Check or Wire			
		East & South Asia	Health	110,406.73	Check or Wire			
		East & South Asia	Health	106,905.91	Check or Wire			
		East & South Asia	Health	100,547.02	Check or Wire			
		East & South Asia	Health	99,134.00	Check or Wire			
		East & South Asia	Health	99,075.42	Check or Wire			
		East & South Asia	Health	91,845.85	Check or Wire			
		East & South Asia	Health	86,157.05	Check or Wire			
		East & South Asia	Health	80,019.78	Check or Wire			
		East & South Asia	Health	76,425.30	Check or Wire			

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		East & South Asia	Health	72,223.97	Check or Wire			
		East & South Asia	Health	56,310.42	Check or Wire			
		East & South Asia	Health	52,742.00	Check or Wire			
		East & South Asia	Health	50,916.85	Check or Wire			
		East & South Asia	Health	22,376.00	Check or Wire			
		East & South Asia	Health	17,912.00	Check or Wire			
		East & South Asia	Health	17,005.00	Check or Wire			
		East & South Asia	Health	6,773.00	Check or Wire			
		East & South Asia	Peacebuilding	41,195.05	Check or Wire			
		East & South Asia	Peacebuilding	40,002.99	Check or Wire			
		East & South Asia	Peacebuilding	19,658.86	Check or Wire			
		East & South Asia	Peacebuilding	16,225.39	Check or Wire			
		East & South Asia	Peacebuilding	10,926.44	Check or Wire			
		East Africa	Agriculture	531,017.62	Check or Wire			
		East Africa	Agriculture	326,818.29	Check or Wire			
		East Africa	Agriculture	281,335.82	Check or Wire			
		East Africa	Agriculture	236,867.44	Check or Wire			
		East Africa	Agriculture	160,111.52	Check or Wire			
		East Africa	Agriculture	145,100.59	Check or Wire			
		East Africa	Agriculture	95,839.95	Check or Wire			
		East Africa	Agriculture	83,458.00	Check or Wire			
		East Africa	Agriculture	63,592.24	Check or Wire			
		East Africa	Agriculture	31,171.21	Check or Wire			
		East Africa	Agriculture	14,413.65	Check or Wire			
		East Africa	Agriculture	12,650.98	Check or Wire			
		East Africa	Agriculture	5,238.76	Check or Wire			
		East Africa	Education	684,081.97	Check or Wire			
		East Africa	Education	432,788.14	Check or Wire			
		East Africa	Education	258,335.63	Check or Wire			
		East Africa	Education	245,787.48	Check or Wire			
		East Africa	Education	210,185.31	Check or Wire			
		East Africa	Education	201,686.94	Check or Wire			
		East Africa	Education	169,208.34	Check or Wire			
		East Africa	Education	144,674.44	Check or Wire			
		East Africa	Education	116,196.14	Check or Wire			
		East Africa	Education	115,248.07	Check or Wire			
		East Africa	Education	109,104.80	Check or Wire			
		East Africa	Education	103,216.06	Check or Wire			
		East Africa	Education	90,476.33	Check or Wire			
		East Africa	Education	86,892.03	Check or Wire			
		East Africa	Education	11,031.86	Check or Wire			
		East Africa	Emergency	5,637,746.35	Check or Wire			
		East Africa	Emergency	4,740,596.47	Check or Wire			
		East Africa	Emergency	4,394,326.31	Check or Wire			
		East Africa	Emergency	2,460,820.66	Check or Wire			
		East Africa	Emergency	2,026,864.93	Check or Wire			

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(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Africa	Emergency	1,199,721.07	Check or Wire			
		East Africa	Emergency	1,185,876.34	Check or Wire			
		East Africa	Emergency	1,044,639.28	Check or Wire			
		East Africa	Emergency	909,663.22	Check or Wire			
		East Africa	Emergency	882,323.05	Check or Wire			
		East Africa	Emergency	865,089.95	Check or Wire			
		East Africa	Emergency	774,179.40	Check or Wire			
		East Africa	Emergency	677,953.88	Check or Wire			
		East Africa	Emergency	568,508.00	Check or Wire			
		East Africa	Emergency	562,236.50	Check or Wire			
		East Africa	Emergency	412,527.29	Check or Wire			
		East Africa	Emergency	148,983.81	Check or Wire			
		East Africa	Emergency	105,659.91	Check or Wire			
		East Africa	Emergency	88,839.51	Check or Wire			
		East Africa	Emergency	83,165.11	Check or Wire			
		East Africa	Emergency	82,606.70	Check or Wire			
		East Africa	Emergency	78,485.35	Check or Wire			
		East Africa	Emergency	67,963.31	Check or Wire			
		East Africa	Emergency	45,713.40	Check or Wire			
		East Africa	Emergency	41,308.77	Check or Wire			
		East Africa	Emergency	33,391.91	Check or Wire			
		East Africa	Emergency	28,549.17	Check or Wire			
		East Africa	Emergency	25,848.00	Check or Wire			
		East Africa	Emergency	23,975.44	Check or Wire			
		East Africa	Emergency	22,334.00	Check or Wire			
		East Africa	Emergency	22,104.62	Check or Wire			
		East Africa	Emergency	16,756.22	Check or Wire			
		East Africa	Emergency	14,945.23	Check or Wire			
		East Africa	Emergency	13,250.98	Check or Wire			
		East Africa	Emergency	10,637.14	Check or Wire			
		East Africa	Emergency	10,135.02	Check or Wire			
		East Africa	Health	1,268,588.69	Check or Wire			
		East Africa	Health	1,069,902.92	Check or Wire			
		East Africa	Health	864,045.72	Check or Wire			
		East Africa	Health	768,589.34	Check or Wire			
		East Africa	Health	683,561.22	Check or Wire			
		East Africa	Health	578,344.73	Check or Wire			
		East Africa	Health	573,888.06	Check or Wire			
		East Africa	Health	502,345.61	Check or Wire			
		East Africa	Health	487,710.12	Check or Wire			
		East Africa	Health	473,968.50	Check or Wire			
		East Africa	Health	462,169.00	Check or Wire			
		East Africa	Health	446,076.19	Check or Wire			
		East Africa	Health	434,805.17	Check or Wire			
		East Africa	Health	404,928.75	Check or Wire			
		East Africa	Health	382,339.90	Check or Wire			

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(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Africa	Health	369,221.05	Check or Wire			
		East Africa	Health	368,847.40	Check or Wire			
		East Africa	Health	366,311.25	Check or Wire			
		East Africa	Health	355,957.73	Check or Wire			
		East Africa	Health	335,716.24	Check or Wire			
		East Africa	Health	334,357.52	Check or Wire			
		East Africa	Health	325,382.21	Check or Wire			
		East Africa	Health	300,000.00	Check or Wire			
		East Africa	Health	298,559.76	Check or Wire			
		East Africa	Health	294,603.45	Check or Wire			
		East Africa	Health	284,193.04	Check or Wire			
		East Africa	Health	280,736.26	Check or Wire			
		East Africa	Health	279,800.12	Check or Wire			
		East Africa	Health	277,037.56	Check or Wire			
		East Africa	Health	273,427.00	Check or Wire			
		East Africa	Health	269,673.56	Check or Wire			
		East Africa	Health	267,767.06	Check or Wire			
		East Africa	Health	258,922.35	Check or Wire			
		East Africa	Health	227,165.42	Check or Wire			
		East Africa	Health	227,013.89	Check or Wire			
		East Africa	Health	220,711.11	Check or Wire			
		East Africa	Health	216,908.00	Check or Wire			
		East Africa	Health	211,072.47	Check or Wire			
		East Africa	Health	194,145.80	Check or Wire			
		East Africa	Health	180,912.33	Check or Wire			
		East Africa	Health	179,992.70	Check or Wire			
		East Africa	Health	171,207.69	Check or Wire			
		East Africa	Health	162,292.64	Check or Wire			
		East Africa	Health	155,706.57	Check or Wire			
		East Africa	Health	140,050.43	Check or Wire			
		East Africa	Health	130,963.25	Check or Wire			
		East Africa	Health	124,806.43	Check or Wire			
		East Africa	Health	121,355.12	Check or Wire			
		East Africa	Health	119,177.76	Check or Wire			
		East Africa	Health	114,445.39	Check or Wire			
		East Africa	Health	108,744.55	Check or Wire			
		East Africa	Health	88,624.53	Check or Wire			
		East Africa	Health	84,958.87	Check or Wire			
		East Africa	Health	73,812.43	Check or Wire			
		East Africa	Health	68,903.25	Check or Wire			
		East Africa	Health	60,517.54	Check or Wire			
		East Africa	Health	51,395.00	Check or Wire			
		East Africa	Health	50,010.00	Check or Wire			
		East Africa	Health	39,869.51	Check or Wire			
		East Africa	Health	37,115.15	Check or Wire			
		East Africa	Health	33,704.97	Check or Wire			

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2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		East Africa	Health	28,100.31	Check or Wire			
		East Africa	Health	18,153.42	Check or Wire			
		East Africa	Microfinance	137,235.57	Check or Wire			
		East Africa	Partner Capacity Strengthening	278,182.00	Check or Wire			
		East Africa	Partner Capacity Strengthening	35,401.61	Check or Wire			
		East Africa	Partner Capacity Strengthening	34,315.62	Check or Wire			
		East Africa	Peacebuilding	1,120,654.24	Check or Wire			
		East Africa	Peacebuilding	734,560.64	Check or Wire			
		East Africa	Peacebuilding	371,753.82	Check or Wire			
		East Africa	Peacebuilding	17,627.96	Check or Wire			
		East Africa	Peacebuilding	16,366.23	Check or Wire			
		East Africa	Water	163,889.13	Check or Wire			
		East Africa	Water	11,931.51	Check or Wire			
		East Africa	Water	9,896.94	Check or Wire			
		East Africa	Water	8,197.32	Check or Wire			
		Europe,Middle East,Centr Asia	Education	610,870.61	Check or Wire			
		Europe,Middle East,Centr Asia	Education	115,159.96	Check or Wire			
		Europe,Middle East,Centr Asia	Education	44,735.77	Check or Wire			
		Europe,Middle East,Centr Asia	Education	29,514.21	Check or Wire			
		Europe,Middle East,Centr Asia	Education	17,000.00	Check or Wire			
		Europe,Middle East,Centr Asia	Education	14,707.29	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	2,185,055.78	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	1,887,871.72	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	1,331,634.85	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	1,178,099.07	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	954,849.95	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	752,147.07	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	405,456.46	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	401,861.40	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	376,362.06	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	341,800.80	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	225,772.65	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	181,455.49	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	176,099.43	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	135,747.04	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	134,989.54	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	102,640.84	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	78,287.18	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	57,927.24	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	45,182.82	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	33,131.00	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	28,263.88	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	23,801.24	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	21,541.25	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	20,568.04	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	20,000.00	Check or Wire			

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		Europe,Middle East,Centr Asia	Emergency	15,000.00	Check or Wire			
		Europe,Middle East,Centr Asia	Emergency	12,533.07	Check or Wire			
		Europe,Middle East,Centr Asia	Health	203,662.57	Check or Wire			
		Europe,Middle East,Centr Asia	Health	108,044.60	Check or Wire			
		Europe,Middle East,Centr Asia	Indirect Program Support	31,855.86	Check or Wire			
		Europe,Middle East,Centr Asia	Indirect Program Support	21,600.00	Check or Wire			
		Europe,Middle East,Centr Asia	Microfinance	261,824.86	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	263,549.28	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	130,783.40	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	120,468.37	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	87,531.60	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	68,508.69	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	51,908.10	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	22,118.44	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	14,295.35	Check or Wire			
		Europe,Middle East,Centr Asia	Peacebuilding	14,232.80	Check or Wire			
		Latin America & Caribbean	Agriculture	459,583.16	Check or Wire			
		Latin America & Caribbean	Agriculture	427,735.11	Check or Wire			
		Latin America & Caribbean	Agriculture	424,061.79	Check or Wire			
		Latin America & Caribbean	Agriculture	398,456.99	Check or Wire			
		Latin America & Caribbean	Agriculture	364,892.07	Check or Wire			
		Latin America & Caribbean	Agriculture	231,359.59	Check or Wire			
		Latin America & Caribbean	Agriculture	153,661.09	Check or Wire			
		Latin America & Caribbean	Agriculture	151,381.73	Check or Wire			
		Latin America & Caribbean	Agriculture	150,558.01	Check or Wire			
		Latin America & Caribbean	Agriculture	118,023.14	Check or Wire			
		Latin America & Caribbean	Agriculture	95,426.24	Check or Wire			
		Latin America & Caribbean	Agriculture	95,260.85	Check or Wire			
		Latin America & Caribbean	Agriculture	71,470.84	Check or Wire			
		Latin America & Caribbean	Agriculture	59,886.12	Check or Wire			
		Latin America & Caribbean	Agriculture	53,463.00	Check or Wire			
		Latin America & Caribbean	Agriculture	50,102.65	Check or Wire			
		Latin America & Caribbean	Agriculture	38,572.51	Check or Wire			
		Latin America & Caribbean	Agriculture	34,429.98	Check or Wire			
		Latin America & Caribbean	Agriculture	33,500.60	Check or Wire			
		Latin America & Caribbean	Agriculture	26,738.96	Check or Wire			
		Latin America & Caribbean	Agriculture	22,381.36	Check or Wire			
		Latin America & Caribbean	Agriculture	19,255.46	Check or Wire			
		Latin America & Caribbean	Agriculture	12,190.61	Check or Wire			
		Latin America & Caribbean	Agriculture	10,464.29	Check or Wire			
		Latin America & Caribbean	Agriculture	7,111.20	Check or Wire			
		Latin America & Caribbean	Education	1,457,909.38	Check or Wire			
		Latin America & Caribbean	Education	865,218.90	Check or Wire			
		Latin America & Caribbean	Education	490,661.70	Check or Wire			
		Latin America & Caribbean	Education	426,502.83	Check or Wire			
		Latin America & Caribbean	Education	337,161.60	Check or Wire			

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(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Latin America & Caribbean	Education	148,696.43	Check or Wire			
		Latin America & Caribbean	Education	44,401.88	Check or Wire			
		Latin America & Caribbean	Education	32,500.00	Check or Wire			
		Latin America & Caribbean	Emergency	703,232.60	Check or Wire			
		Latin America & Caribbean	Emergency	438,734.00	Check or Wire			
		Latin America & Caribbean	Emergency	304,781.32	Check or Wire			
		Latin America & Caribbean	Emergency	208,451.58	Check or Wire			
		Latin America & Caribbean	Emergency	185,948.32	Check or Wire			
		Latin America & Caribbean	Emergency	127,554.40	Check or Wire			
		Latin America & Caribbean	Emergency	106,851.23	Check or Wire			
		Latin America & Caribbean	Emergency	83,124.19	Check or Wire			
		Latin America & Caribbean	Emergency	72,402.32	Check or Wire			
		Latin America & Caribbean	Emergency	61,837.30	Check or Wire			
		Latin America & Caribbean	Emergency	51,880.00	Check or Wire			
		Latin America & Caribbean	Emergency	50,947.07	Check or Wire			
		Latin America & Caribbean	Emergency	50,497.70	Check or Wire			
		Latin America & Caribbean	Emergency	45,339.98	Check or Wire			
		Latin America & Caribbean	Emergency	44,565.36	Check or Wire			
		Latin America & Caribbean	Emergency	42,400.32	Check or Wire			
		Latin America & Caribbean	Emergency	42,032.22	Check or Wire			
		Latin America & Caribbean	Emergency	41,145.41	Check or Wire			
		Latin America & Caribbean	Emergency	38,563.69	Check or Wire			
		Latin America & Caribbean	Emergency	33,854.78	Check or Wire			
		Latin America & Caribbean	Emergency	32,020.19	Check or Wire			
		Latin America & Caribbean	Emergency	30,979.20	Check or Wire			
		Latin America & Caribbean	Emergency	30,139.37	Check or Wire			
		Latin America & Caribbean	Emergency	21,301.40	Check or Wire			
		Latin America & Caribbean	Emergency	20,211.74	Check or Wire			
		Latin America & Caribbean	Emergency	15,574.10	Check or Wire			
		Latin America & Caribbean	Emergency	14,170.59	Check or Wire			
		Latin America & Caribbean	Emergency	13,183.85	Check or Wire			
		Latin America & Caribbean	Emergency	13,120.45	Check or Wire			
		Latin America & Caribbean	Emergency	11,691.44	Check or Wire			
		Latin America & Caribbean	Emergency	11,541.60	Check or Wire			
		Latin America & Caribbean	Emergency	11,526.54	Check or Wire			
		Latin America & Caribbean	Emergency	11,000.00	Check or Wire			
		Latin America & Caribbean	Emergency	9,808.94	Check or Wire			
		Latin America & Caribbean	Emergency	9,702.96	Check or Wire			
		Latin America & Caribbean	Emergency	9,120.80	Check or Wire			
		Latin America & Caribbean	Emergency	8,764.46	Check or Wire			
		Latin America & Caribbean	Emergency	8,607.32	Check or Wire			
		Latin America & Caribbean	Emergency	7,739.86	Check or Wire			
		Latin America & Caribbean	Emergency	7,647.13	Check or Wire			
		Latin America & Caribbean	Emergency	6,887.45	Check or Wire			
		Latin America & Caribbean	Emergency	6,789.15	Check or Wire			
		Latin America & Caribbean	Emergency	5,569.50	Check or Wire			

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Latin America & Caribbean	Emergency	5,323.40	Check or Wire			
		Latin America & Caribbean	Indirect Program Support	9,752.93	Check or Wire			
		Latin America & Caribbean	Microfinance	77,712.61	Check or Wire			
		Latin America & Caribbean	Microfinance	54,261.06	Check or Wire			
		Latin America & Caribbean	Microfinance	35,000.00	Check or Wire			
		Latin America & Caribbean	Partner Capacity Strengthening	120,000.00	Check or Wire			
		Latin America & Caribbean	Partner Capacity Strengthening	40,696.64	Check or Wire			
		Latin America & Caribbean	Partner Capacity Strengthening	34,168.82	Check or Wire			
		Latin America & Caribbean	Partner Capacity Strengthening	13,198.05	Check or Wire			
		Latin America & Caribbean	Partner Capacity Strengthening	6,958.11	Check or Wire			
		Latin America & Caribbean	Partner Capacity Strengthening	6,666.67	Check or Wire			
		Latin America & Caribbean	Peacebuilding	2,264,365.66	Check or Wire			
		Latin America & Caribbean	Peacebuilding	886,790.29	Check or Wire			
		Latin America & Caribbean	Peacebuilding	312,998.75	Check or Wire			
		Latin America & Caribbean	Peacebuilding	99,163.73	Check or Wire			
		Latin America & Caribbean	Peacebuilding	88,889.87	Check or Wire			
		Latin America & Caribbean	Peacebuilding	66,842.26	Check or Wire			
		Latin America & Caribbean	Peacebuilding	59,800.74	Check or Wire			
		Latin America & Caribbean	Peacebuilding	31,025.58	Check or Wire			
		Latin America & Caribbean	Peacebuilding	20,702.27	Check or Wire			
		Latin America & Caribbean	Peacebuilding	19,245.77	Check or Wire			
		Latin America & Caribbean	Peacebuilding	18,415.22	Check or Wire			
		Latin America & Caribbean	Peacebuilding	15,702.21	Check or Wire			
		Latin America & Caribbean	Peacebuilding	15,222.37	Check or Wire			
		Latin America & Caribbean	Peacebuilding	12,987.44	Check or Wire			
		Latin America & Caribbean	Peacebuilding	9,690.37	Check or Wire			
		Latin America & Caribbean	Peacebuilding	5,600.99	Check or Wire			
		Latin America & Caribbean	Peacebuilding	5,555.58	Check or Wire			
		Latin America & Caribbean	Water	194,597.04	Check or Wire			
		Latin America & Caribbean	Water	120,000.00	Check or Wire			
		Latin America & Caribbean	Water	46,329.84	Check or Wire			
		Latin America & Caribbean	Water	32,856.58	Check or Wire			
		Southern Africa	Agriculture	368,165.49	Check or Wire			
		Southern Africa	Agriculture	118,588.13	Check or Wire			
		Southern Africa	Agriculture	69,325.59	Check or Wire			
		Southern Africa	Agriculture	59,682.66	Check or Wire			
		Southern Africa	Agriculture	32,180.70	Check or Wire			
		Southern Africa	Agriculture	16,442.47	Check or Wire			
		Southern Africa	Education	100,688.73	Check or Wire			
		Southern Africa	Education	28,068.09	Check or Wire			
		Southern Africa	Education	23,833.18	Check or Wire			
		Southern Africa	Education	5,610.47	Check or Wire			
		Southern Africa	Emergency	213,753.75	Check or Wire			
		Southern Africa	Emergency	158,968.96	Check or Wire			
		Southern Africa	Emergency	121,520.08	Check or Wire			
		Southern Africa	Emergency	56,340.00	Check or Wire			

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Southern Africa	Emergency	48,910.00	Check or Wire			
		Southern Africa	Emergency	43,800.00	Check or Wire			
		Southern Africa	Emergency	43,088.44	Check or Wire			
		Southern Africa	Emergency	35,662.37	Check or Wire			
		Southern Africa	Emergency	33,298.25	Check or Wire			
		Southern Africa	Emergency	22,173.51	Check or Wire			
		Southern Africa	Emergency	19,422.24	Check or Wire			
		Southern Africa	Emergency	19,396.21	Check or Wire			
		Southern Africa	Emergency	13,800.00	Check or Wire			
		Southern Africa	Emergency	9,634.00	Check or Wire			
		Southern Africa	Health	1,721,733.76	Check or Wire			
		Southern Africa	Health	1,518,915.59	Check or Wire			
		Southern Africa	Health	1,285,591.77	Check or Wire			
		Southern Africa	Health	1,020,063.21	Check or Wire			
		Southern Africa	Health	754,945.55	Check or Wire			
		Southern Africa	Health	670,503.86	Check or Wire			
		Southern Africa	Health	611,767.01	Check or Wire			
		Southern Africa	Health	585,404.12	Check or Wire			
		Southern Africa	Health	562,313.59	Check or Wire			
		Southern Africa	Health	530,283.31	Check or Wire			
		Southern Africa	Health	526,909.87	Check or Wire			
		Southern Africa	Health	507,994.04	Check or Wire			
		Southern Africa	Health	470,724.04	Check or Wire			
		Southern Africa	Health	470,648.45	Check or Wire			
		Southern Africa	Health	418,022.59	Check or Wire			
		Southern Africa	Health	390,996.71	Check or Wire			
		Southern Africa	Health	365,821.23	Check or Wire			
		Southern Africa	Health	289,388.40	Check or Wire			
		Southern Africa	Health	286,210.60	Check or Wire			
		Southern Africa	Health	250,792.97	Check or Wire			
		Southern Africa	Health	242,630.69	Check or Wire			
		Southern Africa	Health	231,948.30	Check or Wire			
		Southern Africa	Health	225,396.33	Check or Wire			
		Southern Africa	Health	219,537.57	Check or Wire			
		Southern Africa	Health	182,969.99	Check or Wire			
		Southern Africa	Health	150,421.00	Check or Wire			
		Southern Africa	Health	136,290.77	Check or Wire			
		Southern Africa	Health	125,726.33	Check or Wire			
		Southern Africa	Health	114,773.17	Check or Wire			
		Southern Africa	Health	96,114.60	Check or Wire			
		Southern Africa	Health	71,994.56	Check or Wire			
		Southern Africa	Health	62,286.57	Check or Wire			
		Southern Africa	Health	59,306.76	Check or Wire			
		Southern Africa	Health	55,372.30	Check or Wire			
		Southern Africa	Health	49,845.64	Check or Wire			
		Southern Africa	Health	44,925.86	Check or Wire			

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		Southern Africa	Health	43,344.00	Check or Wire			
		Southern Africa	Health	41,936.77	Check or Wire			
		Southern Africa	Health	24,310.52	Check or Wire			
		Southern Africa	Health	19,943.01	Check or Wire			
		Southern Africa	Health	12,100.76	Check or Wire			
		Southern Africa	Health	9,354.41	Check or Wire			
		Southern Africa	Health	8,694.86	Check or Wire			
		Southern Africa	Health	7,608.24	Check or Wire			
		Southern Africa	Health	6,823.90	Check or Wire			
		Southern Africa	Health	5,928.76	Check or Wire			
		Southern Africa	Health	5,472.60	Check or Wire			
		Southern Africa	Health	5,130.20	Check or Wire			
		Southern Africa	Health	5,071.46	Check or Wire			
		Southern Africa	Indirect Program Support	7,200.00	Check or Wire			
		Southern Africa	Peacebuilding	152,206.39	Check or Wire			
		Southern Africa	Peacebuilding	48,528.52	Check or Wire			
		Southern Africa	Peacebuilding	39,344.00	Check or Wire			
		Southern Africa	Peacebuilding	7,286.25	Check or Wire			
		Southern Africa	Water	166,207.04	Check or Wire			
		Southern Africa	Water	138,121.21	Check or Wire			
		Southern Africa	Water	33,863.84	Check or Wire			
		West Africa	Agriculture	347,870.00	Check or Wire			
		West Africa	Agriculture	214,344.99	Check or Wire			
		West Africa	Agriculture	173,984.29	Check or Wire			
		West Africa	Agriculture	160,857.00	Check or Wire			
		West Africa	Agriculture	109,000.00	Check or Wire			
		West Africa	Agriculture	34,320.00	Check or Wire			
		West Africa	Agriculture	31,048.38	Check or Wire			
		West Africa	Agriculture	5,463.21	Check or Wire			
		West Africa	Agriculture	5,293.93	Check or Wire			
		West Africa	Agriculture	5,149.90	Check or Wire			
		West Africa	Education	342,371.12	Check or Wire			
		West Africa	Education	313,361.04	Check or Wire			
		West Africa	Education	194,697.89	Check or Wire			
		West Africa	Education	186,431.28	Check or Wire			
		West Africa	Education	167,272.27	Check or Wire			
		West Africa	Education	157,598.52	Check or Wire			
		West Africa	Education	82,772.16	Check or Wire			
		West Africa	Education	82,061.94	Check or Wire			
		West Africa	Emergency	412,868.28	Check or Wire			
		West Africa	Emergency	327,892.36	Check or Wire			
		West Africa	Emergency	202,724.00	Check or Wire			
		West Africa	Emergency	181,206.27	Check or Wire			
		West Africa	Emergency	100,000.00	Check or Wire			
		West Africa	Emergency	98,103.63	Check or Wire			
		West Africa	Emergency	91,918.76	Check or Wire			

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		West Africa	Emergency	88,026.00	Check or Wire			
		West Africa	Emergency	57,860.43	Check or Wire			
		West Africa	Emergency	50,259.82	Check or Wire			
		West Africa	Emergency	42,819.40	Check or Wire			
		West Africa	Emergency	35,050.88	Check or Wire			
		West Africa	Emergency	26,513.57	Check or Wire			
		West Africa	Emergency	26,099.50	Check or Wire			
		West Africa	Emergency	24,247.43	Check or Wire			
		West Africa	Emergency	16,444.15	Check or Wire			
		West Africa	Emergency	15,965.94	Check or Wire			
		West Africa	Emergency	11,809.38	Check or Wire			
		West Africa	Emergency	7,187.07	Check or Wire			
		West Africa	Emergency	6,393.56	Check or Wire			
		West Africa	Health	2,423,833.74	Check or Wire			
		West Africa	Health	1,885,377.21	Check or Wire			
		West Africa	Health	454,725.95	Check or Wire			
		West Africa	Health	443,669.88	Check or Wire			
		West Africa	Health	240,297.19	Check or Wire			
		West Africa	Health	195,581.19	Check or Wire			
		West Africa	Health	121,145.88	Check or Wire			
		West Africa	Health	120,231.80	Check or Wire			
		West Africa	Health	88,416.47	Check or Wire			
		West Africa	Health	82,630.34	Check or Wire			
		West Africa	Health	72,624.10	Check or Wire			
		West Africa	Health	70,742.75	Check or Wire			
		West Africa	Health	63,720.19	Check or Wire			
		West Africa	Health	58,155.07	Check or Wire			
		West Africa	Health	55,648.24	Check or Wire			
		West Africa	Health	49,145.61	Check or Wire			
		West Africa	Health	44,401.11	Check or Wire			
		West Africa	Health	43,360.02	Check or Wire			
		West Africa	Health	40,770.54	Check or Wire			
		West Africa	Health	39,028.35	Check or Wire			
		West Africa	Health	36,640.84	Check or Wire			
		West Africa	Health	36,441.06	Check or Wire			
		West Africa	Health	36,380.21	Check or Wire			
		West Africa	Health	36,062.05	Check or Wire			
		West Africa	Health	34,524.90	Check or Wire			
		West Africa	Health	26,671.20	Check or Wire			
		West Africa	Health	26,595.09	Check or Wire			
		West Africa	Health	22,203.99	Check or Wire			
		West Africa	Health	15,475.60	Check or Wire			
		West Africa	Health	14,833.60	Check or Wire			
		West Africa	Health	14,443.42	Check or Wire			
		West Africa	Health	9,782.73	Check or Wire			
		West Africa	Indirect Program Support	95,269.60	Check or Wire			

CRS USCCB

Schedule F (Form 990)

Part II - Grants and Other Assistance to Organizations or Entities Outside the United States

2019 (FY2020)

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		West Africa	Microfinance	350,000.00	Check or Wire			
		West Africa	Microfinance	43,180.10	Check or Wire			
		West Africa	Microfinance	20,000.00	Check or Wire			
		West Africa	Microfinance	6,227.20	Check or Wire			
		West Africa	Partner Capacity Strengthening	45,379.49	Check or Wire			
		West Africa	Partner Capacity Strengthening	42,408.82	Check or Wire			
		West Africa	Partner Capacity Strengthening	15,811.28	Check or Wire			
		West Africa	Peacebuilding	173,859.32	Check or Wire			
		West Africa	Peacebuilding	133,006.66	Check or Wire			
		West Africa	Peacebuilding	114,608.87	Check or Wire			
		West Africa	Peacebuilding	82,733.63	Check or Wire			
		West Africa	Peacebuilding	74,230.00	Check or Wire			
		West Africa	Peacebuilding	47,940.00	Check or Wire			
		West Africa	Peacebuilding	42,798.29	Check or Wire			
		West Africa	Peacebuilding	35,274.27	Check or Wire			
		West Africa	Peacebuilding	33,318.77	Check or Wire			
		West Africa	Peacebuilding	30,446.48	Check or Wire			
		West Africa	Peacebuilding	29,680.25	Check or Wire			
		West Africa	Peacebuilding	25,416.99	Check or Wire			
		West Africa	Peacebuilding	22,301.01	Check or Wire			
		West Africa	Peacebuilding	20,384.48	Check or Wire			
		West Africa	Peacebuilding	20,000.00	Check or Wire			
		West Africa	Peacebuilding	18,803.07	Check or Wire			
		West Africa	Peacebuilding	15,966.00	Check or Wire			
		West Africa	Peacebuilding	13,278.99	Check or Wire			
		West Africa	Peacebuilding	8,690.12	Check or Wire			
		West Africa	Water	133,800.69	Check or Wire			
		West Africa	Water	42,887.18	Check or Wire			
		West Africa	Water	31,308.24	Check or Wire			
		West Africa	Water	31,250.51	Check or Wire			
		West Africa	Water	5,364.18	Check or Wire			

**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2019

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

CATHOLIC RELIEF SERVICES USCCB

13-5563422

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a** Mail solicitations
 - b** Internet and email solicitations
 - c** Phone solicitations
 - d** In-person solicitations
 - e** Solicitation of non-government grants
 - f** Solicitation of government grants
 - g** Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? **Yes** **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1 See Schedule G, Part IV, Statement 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total				0	697,796	-697,796

- 3** List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

AK, AL, AR, CA, CO, CT, DC, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, NC, ND, NH, NJ, NM, NY, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		Milwaukee Event (event type)	Helping Hands H Trinity (event type)	32 (total number)	
Revenue	1 Gross receipts	40,717	50,004	286,713	377,434
	2 Less: Contributions	40,717	50,004	286,713	377,434
	3 Gross income (line 1 minus line 2)	0	0	0	0
Direct Expenses	4 Cash prizes	0	0	0	0
	5 Noncash prizes	778	0	0	778
	6 Rent/facility costs	315	0	0	315
	7 Food and beverages	12,329	0	0	12,329
	8 Entertainment	2,545	0	0	2,545
	9 Other direct expenses	8,003	31,002	172,829	211,834
	10 Direct expense summary. Add lines 4 through 9 in column (d) ▶				227,801
11 Net income summary. Subtract line 10 from line 3, column (d) ▶				-227,801	

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		1 Gross revenue			
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
7 Direct expense summary. Add lines 2 through 5 in column (d) ▶					
8 Net gaming income summary. Subtract line 7 from line 1, column (d) ▶					

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

Fundraiser Activity Information

Name and Address	Activity	C1	Gross Receipts	C2	C3
Further LLC 181 Harry S Truman Parkway Ste 265 Annapolis, MD 21401	Fundraising Counsel	No	0	447,752	-447,752
DonorVoice LLC 11710 Plaza Amercia Drive Ste 2000 Reston, VA 20190	Fundraising Counsel	No	0	214,265	-214,265
Engage Group LLC 7160 Columbia Gateway Drive Ste 200 Columbia, MD 21046	Fundraising Counsel	No	0	35,779	-35,779
Total:			0	697,796	-697,796

C1 = Fundraiser control of funds?

C2 = Amount paid to (or retained by) fundraiser

C3 = Amount paid to (or retained by) organization

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

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

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

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Employer identification number

13-5563422

CATHOLIC RELIEF SERVICES USCCB

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Sch I, Stmt 1							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 1
- 3 Enter total number of other organizations listed in the line 1 table ▶ 0

Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non-cash asst.
Name and address	United States Catholic Conference of Bishops 3211 Fourth Street NE Washington, DC 20017	53-0196617	35,000	0
IRC code section	3			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Sponsorship			

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Name of the organization

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

Open to Public Inspection

CATHOLIC RELIEF SERVICES USCCB

Employer identification number

13-5563422

Part I Questions Regarding Compensation

	Yes	No
<p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <p> <input type="checkbox"/> First-class or charter travel <input checked="" type="checkbox"/> Housing allowance or residence for personal use <input checked="" type="checkbox"/> Travel for companions <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Discretionary spending account <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) </p>		
<p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p>	✓	
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?</p>	✓	
<p>3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <p> <input checked="" type="checkbox"/> Compensation committee <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Approval by the board or compensation committee </p>		
<p>4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.</p>		✓
		✓
		✓
<p>Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.</p>		
<p>5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" on line 5a or 5b, describe in Part III.</p>		✓
		✓
<p>6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" on line 6a or 6b, describe in Part III.</p>		✓
		✓
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III</p>		✓
<p>8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p>		✓
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1	(i)	491,801	0	2,322	51,473	18,532	564,128	0
	(ii)	0	0	0	0	0	0	0
2	(i)	284,076	0	1,242	27,398	18,532	331,248	0
	(ii)	0	0	0	0	0	0	0
3	(i)	212,874	0	69,650	26,064	18,271	326,859	0
	(ii)	0	0	0	0	0	0	0
4	(i)	243,675	0	1,219	28,620	18,487	292,001	0
	(ii)	0	0	0	0	0	0	0
5	(i)	237,284	0	2,224	24,048	14,060	277,616	0
	(ii)	0	0	0	0	0	0	0
6	(i)	225,294	0	1,131	27,530	18,358	272,313	0
	(ii)	0	0	0	0	0	0	0
7	(i)	220,197	0	1,948	25,384	3,226	250,755	0
	(ii)	0	0	0	0	0	0	0
8	(i)	159,009	0	1,376	13,475	17,549	191,409	0
	(ii)	0	0	0	0	0	0	0
9	(i)	206,401	0	1,035	20,911	18,226	246,573	0
	(ii)	0	0	0	0	0	0	0
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Schedule J, Part I, Line 1a - Housing is provided for qualified international staff residing outside their home country. The costs associated with housing are included in the employee's income. Qualified international staff are tax indemnified for host country tax obligations. Qualified international staff also receive travel for companions when traveling for home leave, which is included in the employee's income.

**SCHEDULE K
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

CATHOLIC RELIEF SERVICES USCCB

Employer identification number

13-5563422

Part I Bond Issues

	(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
							Yes	No	Yes	No	Yes	No
A	Maryland Economic Development Corporation	52-1376562	57420NAT8	06/01/2006	19,555,000	Renovation to HQ office space		✓		✓		✓
B												
C												
D												

Part II Proceeds

		A		B		C		D	
1	Amount of bonds retired		0						
2	Amount of bonds legally defeased		0						
3	Total proceeds of issue		19,555,000						
4	Gross proceeds in reserve funds		0						
5	Capitalized interest from proceeds		1,232,000						
6	Proceeds in refunding escrows		0						
7	Issuance costs from proceeds		226,850						
8	Credit enhancement from proceeds		0						
9	Working capital expenditures from proceeds		0						
10	Capital expenditures from proceeds		19,328,149						
11	Other spent proceeds		0						
12	Other unspent proceeds		0						
13	Year of substantial completion		2008						
		Yes	No	Yes	No	Yes	No	Yes	No
14	Were the bonds issued as part of a refunding issue of tax-exempt bonds (or, if issued prior to 2018, a current refunding issue)?		✓						
15	Were the bonds issued as part of a refunding issue of taxable bonds (or, if issued prior to 2018, an advance refunding issue)?		✓						
16	Has the final allocation of proceeds been made?	✓							
17	Does the organization maintain adequate books and records to support the final allocation of proceeds?	✓							

Part III Private Business Use

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		✓						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		✓						
3a Are there any management or service contracts that may result in private business use of bond-financed property?		✓						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of bond-financed property?		✓						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government . . . ▶								
5 Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government . . . ▶								
6 Total of lines 4 and 5								
7 Does the bond issue meet the private security or payment test?	✓							
8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		✓						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of								
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1.141-12 and 1.145-2?	✓							

Part IV Arbitrage

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	✓							
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?								
b Exception to rebate?								
c No rebate due?								
If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3 Is the bond issue a variable rate issue?	✓							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

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Department of the Treasury
Internal Revenue Service

- ▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
- ▶ **Attach to Form 990.**
- ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Name of the organization

Employer identification number

CATHOLIC RELIEF SERVICES USCCB

13-5563422

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	✓	1	85,210	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory	✓	11	101,475,541	FMV
20 Drugs and medical supplies	✓	4	12,029,683	FMV
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (<u>Bed nets</u>)	✓	4	26,574,537	FMV
26 Other ▶ (<u>Freight</u>)	✓	12	45,390,177	FMV
27 Other ▶ (<u>Miscellaneous</u>)	✓	9	1,266,574	FMV
28 Other ▶ ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	✓	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

Part II **Supplemental Information.** 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.

Schedule M, Part I, Line 6 - The number represents countries where vehicles were donated.

Schedule M, Part I, Line 19 - The number represents countries with donated food programs.

Schedule M, Part I, Line 20 - The number represents countries with donated pharmaceutical programs.

Schedule M, Part I, Lines 25-28 - Line - 25 - The number represents countries where bed nets treated with long-lasting insecticide were donated. Line - 26 - The number represents countries where freight is provided by donors. Line - 27 - The number represents countries where other miscellaneous assets were donated.

Schedule M, Part I, Line 32b - CRS uses a third party to process and sell non-cash donations of vehicles.

Multiple horizontal dashed lines for supplemental information.

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

Department of the Treasury
Internal Revenue Service

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.

▶ Attach to Form 990 or 990-EZ.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

CATHOLIC RELIEF SERVICES USCCB

Employer identification number

13-5563422

Form 990, Part I, Line 1 - Catholic Relief Services is the official international humanitarian agency of the Catholic community in the U.S. CRS provides assistance to the poor overseas without regard to race, religion or nationality by responding to emergencies and fighting poverty. CRS serves Catholics in the U.S. as they live their faith with their brothers and sisters around the world as part of one human family.

Form 990, Part VI, Section A, Line 6 - All of the US Catholic Bishops that are members of the United States Conference of Catholic Bishops, the parent organization of Catholic Relief Services are de facto members of Catholic Relief Services.

Form 990, Part VI, Section A, Line 7a - The members are the members of the United States Conference of Catholic Bishops. Membership is of a single class, and each member is entitled to one vote on matters presented.

Form 990, Part VI, Section A, Line 7b - The members pursuant to the Bylaws have the following rights and powers: 1) To elect one more than half of the total number of the corporations' Directors. 2) To remove, with or without cause, any Director elected by the members. 3) To fill vacancies (by death or resignation) of a Director elected by the members. 4) To approve the alteration, amendment, repeal or adoption of laws proposed by the Board of Directors.

Form 990, Part VI, Section B, Line 11b - The Form 990 is reviewed by staff, executive management, and the Board of Directors before filing with localities.

Form 990, Part VI, Section B, Line 12c - Directors and key employees are required to annually submit a written declaration regarding any potential conflicts of interest. Any potential conflicts of interest disclosed is reviewed and managed by the Board of Directors Executive Committee. In addition, key employees are governed by an employment policy which comprehensively describes and prohibits activities and transactions that could give rise to conflicts of interest; Failure to comply can result in dismissal.

Form 990, Part VI, Section B, Line 15 - The Compensation Committee of the Board sets the compensation of the President.

Form 990, Part VI, Section C, Line 19 - Financial Statements are available to the public on Catholic Relief Services website. Governing documents and Conflicts of Interest Policy will be made available upon request.

Form 990, Part XI, Line 9 - Fundraising event expense \$227,801.

Reasonable Cause Explanations

Explanation

Catholic Relief Services - USCCB is a 501(c)(3) exempt organization as a result of its affiliation with the Catholic Church. As a qualifying religious organization completion and filing of Form 990 is not required by the Internal Revenue Service.

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	Agriculture - Programs helping smallholder farming families increase food security and income by restoring degraded land, improving sustainable production systems, upgrading seed systems, strengthening farmer organizations, enhancing women's decision-making roles, linking farmers to markets and financial services, and producing more nutritious foods. Provided support to over 7.0 million beneficiaries through 149 projects in 49 countries.	72,251,122	13,564,639	0
	Justice and Peacebuilding - Programs to strengthen faith-based and other civil society partners' capacity to promote social change by improving social cohesion through non-violent conflict prevention, mitigation and resolution and by influencing and engaging with government to advance social justice in the areas of gender inequality and gender-based violence, resource-based conflict, protection of vulnerable children and adults, prevention of human trafficking and positive youth development. Provided support to over 2.2 million beneficiaries through 125 projects in 41 countries.	31,543,280	10,687,493	0
	Water and Environment - Programs focusing on three priority areas: safe water, sanitation and hygiene for health and well-being in emergency and development contexts; improving water availability and watershed management for agriculture and sustainable landscapes; and water finance and governance, convening stakeholder groups to access capital and equitably govern water resources to achieve sustainable water access for all. Provided support to over 15.4 million beneficiaries through 143 projects in 40 countries.	12,275,905	1,622,289	0
	Partner Capacity Strengthening - Programs and activities improving the programmatic and operational competency of an individual, group, network, system, or organization by: learning new knowledge, skills, attitudes; improving systems, and structures needed to function effectively towards sustainability and achievement of goals; and accompanying colleagues in partners organizations with continuous improvement and applied learning. Provided support to over 1.8 million beneficiaries through 241 projects in 59 countries.	6,314,255	1,959,043	0
	Small Enterprise - Programs to support and develop sustainable, community-led and community-managed savings and internal lending communities (SILC) that provide a range of financial services (savings, loans, mobile money) and products to poor individuals, particularly women and rural farmers, who have limited or no access to capital in the formal financial markets. Provided support to over 2.1 million beneficiaries through 139 projects in 42 countries.	5,691,575	1,393,763	0
Total:		128,076,137	29,227,227	0

Name Of Foreign Country

Name

Afghanistan
Bosnia-Herzegovina
Bolivia
Burma
Benin
Burundi
Cambodia
Chad
Congo (Brazzaville)
Congo (Kinshasa)
Cameroon
Colombia
Central African Republic
Dominican Republic
Egypt
El Salvador
Ethiopia
The Gambia
Ghana
Guam
Greece
Guatemala
Guinea
Haiti
Honduras
Indonesia
India
Israel
Iraq
Kenya
Laos
Lebanon
Liberia
Lesotho
Madagascar
Malawi
Macedonia

Mali
Mexico
Mozambique
Niger
Nigeria
Nepal
Nicaragua
S. Sudan
Guinea-Bissau
Serbia
Philippines
Rwanda
South Africa
Senegal
Sierra Leone
Somalia
Sudan
Togo
East Timor
Tanzania
Uganda
United Kingdom (England, Northern Ireland, Scotland, and Wales)
Burkina Faso
Vietnam
Zambia
Zimbabwe

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
▶ Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2019

**Open to Public
Inspection**

Name of the organization

CATHOLIC RELIEF SERVICES USCCB

Employer identification number

13-5563422

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
<u>(1) Isidro Investments LLC (85-2324774)</u> <u>228 W Lexington St, Baltimore, MD 21201</u>	<u>Impact Investment Providing Loans in Latin America</u>	<u>MD</u>	<u>0</u>	<u>0</u>	<u>Catholic Relief Services</u>
<u>(2)</u>					
<u>(3)</u>					
<u>(4)</u>					
<u>(5)</u>					
<u>(6)</u>					

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
<u>(1) Catholic Relief Services Foundation (56-2621455)</u> <u>228 West Lexington Street, Baltimore, MD 21201-3413</u>	<u>Advisory</u>	<u>MD</u>	<u>501(c)(3)</u>	<u>Exempt</u>	<u>Catholic Relief Services</u>		<input checked="" type="checkbox"/>
<u>(2) United States Conference of Catholic Bishops (53-0196617)</u> <u>3211 4th Street NE, Washington, DC 20017</u>	<u>Ecclesiastical Svcs</u>	<u>DC</u>	<u>501(c)(3)</u>	<u>Exempt</u>	<u>N/A</u>		<input checked="" type="checkbox"/>
<u>(3) 228 West Lexington Street LLC</u> <u>228 West Lexington Street, Baltimore, MD 21201-3443</u>	<u>Property Holding</u>	<u>MD</u>	<u>501(c)(3)</u>	<u>III-F1</u>	<u>Catholic Relief Services</u>		<input checked="" type="checkbox"/>
<u>(4)</u>							
<u>(5)</u>							
<u>(6)</u>							
<u>(7)</u>							

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) CRS Global Services Private Limited Greater Kailash Enclave, New Delhi 110048, India	Information Technology Support	India	Catholic Relief Services	C	23,218	406,649	100%		<input checked="" type="checkbox"/>
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		✓
b Gift, grant, or capital contribution to related organization(s)	✓	
c Gift, grant, or capital contribution from related organization(s)	✓	
d Loans or loan guarantees to or for related organization(s)		✓
e Loans or loan guarantees by related organization(s)		✓
f Dividends from related organization(s)		✓
g Sale of assets to related organization(s)		✓
h Purchase of assets from related organization(s)		✓
i Exchange of assets with related organization(s)		✓
j Lease of facilities, equipment, or other assets to related organization(s)		✓
k Lease of facilities, equipment, or other assets from related organization(s)		✓
l Performance of services or membership or fundraising solicitations for related organization(s)		✓
m Performance of services or membership or fundraising solicitations by related organization(s)	✓	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		✓
o Sharing of paid employees with related organization(s)		✓
p Reimbursement paid to related organization(s) for expenses		✓
q Reimbursement paid by related organization(s) for expenses		✓
r Other transfer of cash or property to related organization(s)		✓
s Other transfer of cash or property from related organization(s)		✓

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
United States Conference of Catholic Bishops	b	35,000	Cash
(1) United States Conference of Catholic Bishops	c	469,634	Cash
(2) United States Conference of Catholic Bishops	c	12,810,321	Cash
(3) CRS Global Services Private Limited	m	23,218	Cash
(4)			
(5)			
(6)			

Part VI **Unrelated Organizations Taxable as a Partnership.** Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512–514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
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