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<sub>य</sub> ी इन		NOTICE 2	2018			0 2	, /
Form <b>990-T</b>	E	xempt Organization Bus			Tax Returi	2.	OMB No 1545-0687
7.5	•	(and proxy tax und	ler se	ection 6033(e))	190	~	0040
<u></u>	For ca	lendar year 2018 or other tax year beginning $\overline{ ext{APR}} \;\; 1$ ,	20	18 , and ending M	AR 31, 201	.9	2018
Department of the Treasury Internal Revenue Service	i	Go to www.irs.gov/Form990T for in Do not enter SSN numbers on this form as it may	nstructi	ons and the latest infor	mation.		Open to Public Inspection for 501(c)(3) Organizations Only
A Check box if	<del>  -</del>	Name of organization ( Check box if name of		<del></del>		DEmp	oloyer identification number
address changed	1			,			ployees' trust, see ructions )
B Exempt under section	Print	New Hampshire Catholic					02-0222163
X 501(d <b>ŷ 3</b> ) 408(e) 220(e)	Type	Number, street, and room or suite no. If a P.O. bo 215 Myrtle Street	x, see ir	nstructions.			elated business activity code Instructions )
408A 530(a)	1	City or town, state or province, country, and ZIP of	r foreig	n nostal code		┨	
529(a)		Manchester, NH 03104	900	0099			
Book value of all assets	L	E Croup exemption number (Con instructions)	<b></b>	0928	· · ·	F :	
98,797,5	79.	G Check organization type X 501(c) cor	poration	501(c) trust	401(a	) trust	Other trust
H Enter the number of the	organiza	tion's unrelated trades or dusinesses.	1	Describ	e the only (or first) ur	related	t
		ee Statement 1			e, complete Parts I-V.		
		ce at the end of the previous sentence, complete P	arts I an	ıd II, complete a Schedu	ile M for each additioi	nal trac	le or
business, then complete		<del></del>	-4		<u> </u>	17	'es X No
		oration a subsidiary in an affiliated group or a pare tifying number of the parent corporation.	กร-รบอร	idiary controlled group	' . <b>▶</b> l	Y	es 💹 No
J The books are in care of				Telen	hone number > 6	03-	-669-3030
		le or Business Income		(A) Income	(B) Expense		(C) Net
1 a Gross receipts or sale	es				,	-	
<b>b</b> Less returns and allo	wances	c Balance ▶	1c				<u> </u>
2 Cost of goods sold (S		1 V	2				
3 Gross profit. Subtrac		. ( *	3				<u> </u>
4a Capital gain net incor	•	,	4a				
		art II, line 17) (attach Form 4797)	4b		RECE		
c Capital loss deduction		·	4c				· <del> </del> ()
, .	•	thip or an S corporation (attach statement)	5		0 050 0	•	
<ul><li>6 Rent income (Schedum)</li><li>7 Unrelated debt-finance</li></ul>	,	ne (Schedule E)	7		B DEC 2	0 21	
_		nd rents from a controlled organization (Schedule F)	8	<del></del>			
		on 501(c)(7), (9), or (17) organization (Schedule G)	-		OGDE	M.	
10 Exploited exempt acti			10	<del> </del>		- California de Santonia	
11 Advertising income (			11				
12 Other income (See in	struction	s; attach schedule)	12				
13 Total. Combine lines	_	<del></del>	13	0 .	<u> </u>		
		ot Taken Elsewhere (See instructions for itions, deductions must be directly connecte					
		rectors, and trustees (Schedule K)		tilo difficiatod basilio	33 11.001110 7	14	<del></del>
15 Salaries and wages	10013, 411	cotors, and trustees (contidute K)				15	
16 Repairs and mainter	ance				• •	16	
17 Bad debts						17	<del></del>
18 Interest (attach sche	dule) (se	ee instructions)				18	
19 Taxes and licenses						19	
20 Charitable contributi	ons (See	instructions for limitation rules) Stateme	nt		tement 2	20	3,753.
21 Depreciation (attach		•		. 21			
	aimed or	Schedule A and elsewhere on return		[22a]	<del></del>	22b	<u></u>
23 Depletion	•				-	23	
24 Contributions to def		npensation plans				24	<del></del>
25 Employee benefit pro	•	hadula I\				25	<del></del>
<ul><li>26 Excess exempt expe</li><li>27 Excess readership c</li></ul>		-				26	<del></del>
28 Other deductions (at		· · · · · · · · · · · · · · · · · · ·			-1	27 28	<del> </del>
29 Total deductions. A					7.46	29	3,753.
		come before net operating loss deduction. Subtrac	t line 29	9 from line 13	J	/30	-3,753.

823701 01-09-19 LHA For Paperwork Reduction Act Notice, see instructions.

Deduction for net operating loss arising in tax years beginning on or after January 1, 2018 (see instructions)

-3,753. Form **990-T** (2018)

Unrelated business taxable income. Subtract line 31 from line 30

-	Title the difference of the control		
Part	VI Statements Regarding Certain Activities and Other Information (see instructions)		
56	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority	Yes	No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		
	FINCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country	.	
	here ►		X
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		X
	If "Yes," see instructions for other forms the organization may have to file.		
E0	Enter the amount of the example interest received or considered during the toy user N. C.	í l	

alties 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, Sign May the IRS discuss this return with Here President & CEO the preparer shown below (see Date Signature of officer Title instructions)? X Yes Print/Type preparer's name Check PTIN Preparer's signature Date self- employed Paid Nicholas E. Porto 12/05/19 P01310283 Preparer Firm's name ▶ Baker Newman & Noyes 01-0494526 Firm's EIN ▶ **Use Only** P.O. Box 507

04112

823711 01-09-19

Form 990-T (2018)

Phone no. (207)879-2100

Firm's address ▶ Portland,

Schedule A - Cost of Good	<b>s Sold.</b> Enter	method of invei	ntory v	aluation N/A				<del></del>	
1 Inventory at beginning of year	1		6	Inventory at end of yea	ır		6		
2 Purchases	2		7	Cost of goods sold. Su	ubtract I	ine 6			
3 Cost of labor	3			from line 5. Enter here	and in F	Part I,			
4 a Additional section 263A costs				line 2			7		
(attach schedule)	4a		8	Do the rules of section	263A (\	with respect to		Yes No	
b Other costs (attach schedule)	4b			property produced or a	acquired	l for resale) apply to		<u> </u>	
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income (see instructions)	(From Real	Property an	d Pe	rsonal Property	Leas	ed With Real Pro	perty	) 	
Description of property									
(1)									
(2)									
(3)									
(4)									
		ed or accrued	_			2/a) Dodustions directly		ad with the income in	
(a) From personal property (if the per rent for personal property is mor 10% but not more than 50%	e than	` 'of rent for	persona	sonal property (if the percental property exceeds 50% or if sed on profit or income)	age	3(a) Deductions directly columns 2(a) an	nd 2(b) (at	tach schedule)	
(1)									
(2)									
(3)									
(4)									
Total	0.	Total			0.	10.7.144.5			
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	n (A)	<b>&gt;</b>			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	<b>&gt;</b>	0.	
Schedule E - Unrelated Del	bt-Financed	I Income (see	ınstru	ictions)					
				2. Gross income from		<ol><li>Deductions directly control to debt-finance</li></ol>			
1. Description of debt-fi	nanced property		'	or allocable to debt- financed property	(a)	(a) Straight line depreciation (attach schedule)		(b) Other deductions (attach schedule)	
(1)			+		<u> </u>		1		
(2)			1				1		
(3)	· · · · · · · · · · · · · · · · · · ·	<del></del>	1	<del></del>			1		
(4)			$\top$		-				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a	adjusted basis illocable to nced property ischedule)	,	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deductions olumn 6 x total of columns 3(a) and 3(b))	
(1)				%_					
(2)				%					
(3)	1			%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		ter here and on page 1, art I, line 7, column (B)	
Totals				<b>&gt;</b>		0	•	0.	
Total dividends-received deductions in	ncluded in column	18 .		•				0.	
								Form 990-T (2018)	

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)  1. Description of income  2. Amount of income directly connected quitates scheduley (attach schedule) (2) (3) (4)  Enter here and on page 1, 1 y Part I, line 9, column (8)  Totals  1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions)  3. Deductions directly connected quitates scheduley (attach schedule)  Enter here and on page 1, 1 y Part I, line 9, column (8)  Totals  1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions)  4. Net income (fixed) (see instructions)  4. Net income (fixed) (see instructions)  5. Cross income (fixed) (fi	Schedule F - Interest,	Annuities,	Royaltie	s, and Rent	s From C	ontrolle	ed Organiz	ations (	see instru	ictions	)	
Cooking   Cook				Exempt (	Controlled O	rganizatio	ons					
(1) (2) (3) (4) (5) (6) (7) (7) (8) (8) (8) (8) (9) (9) (9) (9) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (18) (18) (18) (18) (18) (18) (18	1. Name of controlled organiza	ition	identification		elated income instructions)	4. Tota paym	al of specified nents made	ıncluded ın	the controlls	ng	connected with income	
(1) (2) (3) (4) (5) (6) (7) (7) (8) (8) (8) (8) (9) (9) (9) (9) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18) (18) (18) (18) (18) (18) (18) (18	(1)						<del></del>	<u> </u>		_		
(d)  Nonexempt Controlled Organizations  7. Taxels is some  8. New unablade come loos)  9. Total of specified payments  (ii)  (ii)  (iii)  (ii					<del></del>				· · · · · · · · · · · · · · · · · · ·			
Comparing Controlled Organizations   Section 10   Section   Sect			· · · · · · · · · · · · · · · · · · ·									
Nonexempt Controlled Organizations   8, tel crowted in moral (loss)   9, Total of specified payments made   10, Part of column 9 that is ancluded with income in column 19 with income column 19 in a column 19 with income column 19 in a column 19												
7. Totals tricome 8. Nati internation income (loss) (see instructions) 9. Total of specified payments 10. Perior during specializing sp		ızations				<u> </u>						
(d)  Add columns 5 and 10  Enter there and on page 1. Part I. time 8, column (s)  Intals  Add columns 5 and 10  Enter there and on page 1. Part I. time 8, column (s)  I. Description of mome  2. Amount of income  2. Amount of income  3. Cyclicurous  (see instructions)  (4)  Enter there and on page 1. Type I. time 9, column (s)  (c)  (3)  (4)  Enter there and on page 1. Type II. time 9, column (s)  (b)  (c)  (3)  (4)  Enter there and on page 1. Type II. time 9, column (s)  (c)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (ese instructions)  4. An amounted trade or business are done there are done are done there are do		8. Net unrel		ss) 9. Total		ments	in the controll	ing organizati		1. Ded with i	uctions directly connected ncome in column 10	
(d)  Add columns 5 and 10  Enter there and on page 1. Part I. time 8, column (s)  Intals  Add columns 5 and 10  Enter there and on page 1. Part I. time 8, column (s)  I. Description of mome  2. Amount of income  2. Amount of income  3. Cyclicurous  (see instructions)  (4)  Enter there and on page 1. Type I. time 9, column (s)  (c)  (3)  (4)  Enter there and on page 1. Type II. time 9, column (s)  (b)  (c)  (3)  (4)  Enter there and on page 1. Type II. time 9, column (s)  (c)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (d)  Enter there and on page 1. Type II. time 9, column (s)  (ese instructions)  4. An amounted trade or business are done there are done are done there are do	(1)	<del> </del>							<del> </del>		· · · · · · · · · · · · · · · · · · ·	
(4)  Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (8)  O .  Column (9)  O .  Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (8)  O .  Column (9)  O .  Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (8)  O .  Column (9)  Co		<del> </del>			* *						· · · · · · · · · · · · · · · · · · ·	
Add columns 5 and 10   Enter here and on page 1, Part 1, Ine 8, column (8)   O . O .		<del>                                     </del>		<del></del>		•			-			
Totals  Add columns as and 10 Enter here and on page 1, Part 1, line 8, column (8)  O .  O .  Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)  1. Description of income  2. Amount of income directs here and on page 1, Part 1, line 8, column (8)  (1)  (2)  (3)  (4)  Enter here and on page 1, Part 1, line 8, column (8)  Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)  2. Gross organization of exploited activity  are added on the search of the sear		<del>                                     </del>				i i				·····	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)  1. Description of income  2. Amount of income directly connected quitates scheduley (attach schedule) (2) (3) (4)  Enter here and on page 1, 1 y Part I, line 9, column (8)  Totals  1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions)  3. Deductions directly connected quitates scheduley (attach schedule)  Enter here and on page 1, 1 y Part I, line 9, column (8)  Totals  1. Description of exploited Exempt Activity Income, Other Than Advertising Income (see instructions)  4. Net income (fixed) (see instructions)  4. Net income (fixed) (see instructions)  5. Cross income (fixed) (fi	<u> </u>	•		1	* P		Enter here and	on page 1, P	art I,	Enter he	re and on page 1, Part I,	
(see instructions)  1. Description of income 2. Amount of income directly connected (ettach schedule) (1) (2) (3) (4)  Enter here and on page 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Totals					▶			0.		0.	
1. Description of income  2. Amount of income directly connected (attach schedule)  (1)  (2)  (3)  (4)  Enter here and on page 1. Part I, line 9, column (A)  1. Description of exploited Exempt Activity Income, Other Than Advertising Income  (see instructions)  1. Description of exploited activity  2. Gross uncertain trade or business income business income business (column 2 business income business income business income business income business income  (1)  (2)  (3)  (4)  Enter here and on page 1. Part I, line (9, co) (A)  In line (9, co) (A)  Enter here and on page 1. Part I, line (9, co) (B)  In line (9, co) (A)  Enter here and on page 1. Part I, line (9, co) (B)  In line (9, co) (A)  Enter here and on page 1. Part I, line (9, co) (B)  In line (9, co) (A)  In line (9, co) (A)  In line (9, co) (B)  In line (9, c			e of a Se	ction 501(c)(	7), (9), or	(17) Or	ganizatior	1				
(2) (3) (4)  Enter here and on page 1, \$ Part I, line 9, column (A)  Part I, line 9, column (B)  Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income  (see instructions)  1. Description of exploited activity incomes income from trade or business income from trade or business income from trade or business income i	1. Desc	cription of income			2. Amount of	income	directly conne	cted			and set-asides	
(3) (4)    Enter here and on page 1, Part 1, line 9, column (A)   Part 1, line 9, column (A)   Part 1, line 9, column (B)   Consequence of the page 1, Part 1, line 9, column (B)   Consequence of the page 1, Part 1, line 9, column (B)   Consequence of the page 1, Part 1, line 9, column (B)   Consequence of the page 1, Part 1, line 9, column (B)   Consequence of the page 1, Part 1, line 9, column (B)   Consequence of the page 1, Part 1, line 9, column (B)   Column 1, line 1, line 1, line 1, column 1, line 1, column 1, line 1,	(1)											
Company   Part	(2)								<u> </u>			
Enter here and on page 1, 2   Part I, line 9, column (a)	(3)											
Totals	(4)											
Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income  (see instructions)  1. Description of exploited activity  2. Gross unrelated business income from trade or business income from trade or business income  (1)  (2)  (3)  (4)  Enter here and on page 1, Part I, line 10, col (A)  Totals  2. Gross unrelated business income  (see instructions)  2. Gross unrelated business income from unrelated trade or business income from activity that is not urrelated business income  (see instructions)  4. Net income (loss) from unrelated trade or business (column 2 gain, compute cols 5 intrough 7  5. Gross income from sativity that is not urrelated business income  (see instructions)  5. Gross income from sativity that is not urrelated business income  (see instructions)  5. Gross income from sativity that is not urrelated business income  (see instructions)  6. Expanses attributable to column 5 but not urrelated dual business income  (see instructions)  6. Expanses attributable to column 5 but not urrelated business income  (see instructions)  6. Expanses attributable to column 6 minus column 4)  7. Excess readership costs (column 6 minus column 4)  7. Excess readership costs (column 6 minus column 5)  7. Excess readership costs (column 6 minus column 5)  8. Part I Income From Periodical Reported on a Consolidated Basis  7. Excess readership costs (column 6 minus column 5)  9. Curculation income  (see instructions)  7. Excess readership costs (column 6 minus column 6)  9. So Circulation income  (see instructions)  8. Enter here and on page 1, Part I, line 10, col (B)  9. Curculation income  6. Readership costs (column 6 minus column 5, but not more than column 4)  7. Excess readership costs (column 6 minus column 5, but not more than column 6)  1. Name of periodical attributable to a service attrib											Part I, line 9, column (B)	
(see instructions)  1. Description of exploited activity  2. Gross income from activity hat is not unrelated business income  1. Description of exploited activity  2. Gross income from extrivation of unrelated business income  1. Description of exploited activity  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  2. Gross income from extrivation of unrelated business income  3. Drect advertising gam or (loss) (col 2 minus column 3) if a gain, compute cols 5 through 7  2. Gross income from extrivation of unrelated business income  3. Drect advertising gam or (loss) (col 2 minus column 5)  3. Drect advertising gam or (loss) (col 2 minus column 6)  3. Drect advertising income (see instructions)  4. Advertising gam or (loss) (col 2 minus column 3) if a gan, compute cols 5 through 7  3. Excess exemption is expensed (column 6)  4. Name of periodical  4. Advertising gam or (loss) (column 6 minus column 6)  3. Drect advertising income (see instructions)  4. Advertising gam or (loss) (column 6 minus col				<u> </u>	<u> </u>	¥ -1	ι, '	,			0.	
1. Description of exploited activity production of exploited activity production income from trade or business income income income income from trade or business income or business income from trade or business income from trade or business income from trade or business income income from trade or business income income from trade or business income from trade or	-	-	ctivity In	come, Othe	r Than Ac	lvertisi 	ng Income	• 		***	<b></b>	
(2) (3) (4)  Enter here and on page 1, Part I, line 10, col (A)  Totals  Description of periodical separations advertising income (see instructions)  2. Gross advertising advertising income (see instructions)  1. Name of periodical separations advertising costs advertising costs (a) 3) If a gain, compute cols 5 through 7  (1) (2) (3) (4)  Totals (carry to Part II, line (5))  Description or (loss) (col 2 minus col 2 minus col 3) If a gain, compute cols 5 through 7  Totals (carry to Part II, line (5))  O .  O .  Cinter here and on page 1, Part I, line 26  O .  O .  O .  O .  O .  O .  O .  O		unrelated but	siness om	lirectly connected with production of unrelated	from unrelated business (co minus colum gain, comput	trade or olumn 2 n 3) If a e cols 5	from activity to is not unrelated	that ted	attributable	to	expenses (column 6 minus column 5, but not more than	
(2) (3) (4)  Enter here and on page 1, Part I, line 10, col (A)  Totals  Description of periodical separations advertising income (see instructions)  2. Gross advertising advertising income (see instructions)  1. Name of periodical separations advertising costs advertising costs (a) 3) If a gain, compute cols 5 through 7  (1) (2) (3) (4)  Totals (carry to Part II, line (5))  Description or (loss) (col 2 minus col 2 minus col 3) If a gain, compute cols 5 through 7  Totals (carry to Part II, line (5))  O .  O .  Cinter here and on page 1, Part I, line 26  O .  O .  O .  O .  O .  O .  O .  O	(1)											
(4)  Enter here and on page 1, Part I, line 10, col (A)  Totals  O. O. O.  Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising income  3. Direct advertising costs  3. Direct advertising costs (col 2 minus col 3) If a gain, compute cols 5 through 7  (1)  (2)  (3)  (4)  Totals (carry to Part II, line (5))  0. O.  Enter here and on page 1, Part I, line 26  A. Advertising gain or (loss) (col 2 minus col 2 minus col 3) If a gain, compute cols 5 through 7  Totals (carry to Part II, line (5))  0. O.  O.  O.  Totals (carry to Part II, line (5))	(2)											
(4)  Enter here and on page 1, Part I, line 10, col (A)  Totals  O. O. O.  Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising income  3. Direct advertising costs  3. Direct advertising costs (col 2 minus col 3) If a gain, compute cols 5 through 7  (1)  (2)  (3)  (4)  Totals (carry to Part II, line (5))  0. O.  Enter here and on page 1, Part I, line 26  A. Advertising gain or (loss) (col 2 minus col 2 minus col 3) If a gain, compute cols 5 through 7  Totals (carry to Part II, line (5))  0. O.  O.  O.  Totals (carry to Part II, line (5))	(3)											
Totals    Page 1, Part I, Inne 10, col (A)   Part II, Inne 26											<u> </u>	
Schedule J - Advertising Income (see instructions)  Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical 2. Gross advertising income income advertising costs of advertising costs advertising costs of advert		page 1, Pa	ert I, (A)	page 1, Part I, line 10, col (B)							on page 1, Part II, line 26	
Part I Income From Periodicals Reported on a Consolidated Basis  1. Name of periodical  2. Gross advertising income  3. Direct advertising costs or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  (1)  (2)  (3)  (4)  Totals (carry to Part II, line (5))  • A. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7  5. Circulation income  6 Readership costs (column 6 minus column 4)  7. Excess readership costs (column 5, but not more than column 4)		ina la comi			L	· · · · · · · · · · · · · · · · · · ·					1 0.	
1. Name of periodical  2. Gross advertising income  3. Direct advertising costs  or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7  (1)  (2)  (3)  (4)  Totals (carry to Part II, line (5))  3. Direct advertising costs  or (loss) (col 2 minus col 3) if a gain, compute cols 5 through 7  5. Circulation income  costs (column 6 minus column 4)  costs (column 5, but not more than column 4)					solidated	Basis		, <u>-</u>		•_		
(2) (3) (4)  Totals (carry to Part II, line (5))   0. 0.	1. Name of periodical	ad	vertising		or (loss) (c col 3) If a g	ol 2 minus aın, comput				ıp	costs (column 6 minus column 5, but not more	
(3) (4)  Totals (carry to Part II, line (5))   0. 0. 0.										$\dashv$		
(4)  Totals (carry to Part II, line (5)) ▶ 0. 0. 0.					$\dashv$		<b>—</b>			$\dashv$		
Totals (carry to Part II, line (5)) ▶ 0. 0.		· <del>-  </del> - · ·			-					_		
	\¬/						1	<del></del>				
	Totals (carry to Part II, line (5))	<b>&gt;</b>	0.	0							0. Form <b>990-T</b> (2018)	

## Form 990-T (2018) New Hampshire Catholic Charities 02-02221 Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis )

1. Name of periodical		2. Gross advertising income	3. Direct advertising costs	Advertising gain or (loss) (col. 2 minus col. 3) If a gain, compute cols. 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			****				
(2)							
(3)			* -				
(4)							
Totals from Part I	<b>&gt;</b>	0.	0.	\$		,	0.
		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)	1 ,			Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	<b>&gt;</b>	0.	0.				0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		•	0.

Form 990-T (2018)

Form	990-T	Description	of Organization's	Primary Unrelated	Statement	1
			Business Activity	У		

Parking Fringe Benefits subject to 512(a)(7)

To Form 990-T, Page 1

Form 990-T	Contributions	Statement	2
Description/Kind of Property	Method Used to Determine FMV	Amount	
Public Charities	N/A	65,92	22.
Total to Form 990-T, Page 1, 1	ine 20	65,92	22.

Form 990-T	Contributions Summary		Statement	3
Qualified	Contributions Subject to 100% Limit			
For Tax For Tax For Tax For Tax	of Prior Years Unused Contributions Year 2013 Year 2014 Year 2015 Year 2016 Year 2017 74,325			
Total Carr		74,325 65,922		
	ributions Available come Limitation as Adjusted	140,247 3,753		
Excess 100	Contributions % Contributions ss Contributions	136,494 0 136,494		
Allowable	Contributions Deduction		3,7	753
Total Cont	ribution Deduction	<del>.</del> =	3,7	753