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Fûr	ه 990-Tرون ۱	ပ်ႏြော Exempt Organization Business Income Tax Return						OMB No 1545-0687	
		(and proxy tax under section 6033(e))							-
	For cellendar year 2018 or other tex year beginning SEP 1, 2018 and ending AUG 31, 2019					9	<i>2</i> 018		
Dep	artment of the Treasury		► Go to www.irs gov/Form990T for i		ons and the latest inform	ation 1908	_ [_
	nal Revenue Service	<u> </u>	Do not enter SSN numbers on this form as it ma			ition is a 501(c)(3)		Open to Public Inspection for 50 I(c)(3) Organizations Only	_
Α	Check box if address changed	-	Name of organization (Check box if name of				" (Emp	byer identification number loyees trust see	
_		 	CATHOLIC CHARITIES COM	MUN.	ITY SERVICES	•		ctions)	
	Exempt under section 501(c)(3 (b)	Print	ARCHDIOCESE OF NEW YOR				13-5562185 E Unrelated business activity code		_
Ę	501(c)(3 6) 408(e) 220(e)	Туре	Number, street, and room or suite no If a P.O bo 1011 FIRST AVENUE	x, see II	nstructions			nstructions)	
F	408A 530(a)		City or town, state or province, country, and ZIP of	v forein	n nostal code	 	{		
F	529(a)		NEW YORK, NY 10022	n luicig	in postal code		1		
C B	look value of all assets t end of year		F Group exemption number (See instructions)	L	·	-			
			G Check organization type ► X 501(c) cor	poratio	501(c) trust	401(a)	trust	Other trust	- 4
H 8	nter the number of the o	organiza	tion's unrelated trades or businesses		Describe	the only (or first) un	related		-
	ade or business here					complete Parts I-V		•	
0,			ce at the end of the previous sentence, complete Pa	arts I an	d II, complete a Schedule	M for each additiona	al trade	or	
	usiness, then complete I		 						_
			oration a subsidiary in an affiliated group or a parel ifying number of the parent corporation	nt-subs	idiary controlled group?	▶ 1.	Ye	sNo	
			IICHAEL FAVATA, DIRECTO	R O	FTSCAL Telepho	nne number 🕨 2	12-	371-1000	-
			le or Business Income	11 01	(A) Income	(B) Expenses		(C) Net	-
Z 1a	Gross receipts or sale			T	(,,,	(-,,		(5)	-
			c Balance ▶	10					
2	Cost of goods sold (S	chedule	A, line 7)	2					-
5 ; 3	Gross profit Subtract	line 2 fr	om line 1c	3					-
<u>~</u> 4a	Capital gain net incom	e (attaci	h Schedule D)	4a			Ì		_
2020	Net gain (loss) (Form	4797, P	art II, line 17) (attach Form 4797)	4b					_
<i>c</i> , c	Capital loss deduction	for trus	ats	4c		•			_
5	Income (loss) from a	partners	thip or an S corporation (attach statement)	5					_
6	Rent income (Schedul	,		6					_
7	Unrelated debt-finance		•	8					-
8			nd rents from a controlled organization (Schedule F)			-			
9 10		a section 501(c)(7), (9), or (17) organization (Schedule G) 9 Inty income (Schedule I) In International Internatio							-
11	Advertising income (S	•	•		···	-			
12	- '		tions, attach schedule)						-
13	Total. Combine lines			13	0.			·	-
			t Taken Elsewhere (See instructions fo						-
	(Except for c	ontribu	tions, deductions must be directly connected	with t	he unrelated business	ncome)			
14	Compensation of office	cers, dır	ectors, and trustees (Schedule K) REC	17	ED 1		14		_
15	Salaries and wages		ည				15		_
16	Repairs and maintena	ance	8 JUL 2		%	İ	16		_
17	Bad debts		+ 1	U 20	D20 9		17		-
18	Interest (attach sched	Jule) (se	e instructions)		781		18		-
19	Taxes and licenses	(0	L OGL	1 1	15		19		-
20 21	Depreciation (attach f	•	instructions for limitation rules)				20		-
22			Schedule A and elsewhere on return		21 22a		206		
23	Depletion	iiiica oii	Schedule A and elsewhere on return		[228]		22b		-
24	Contributions to defe	rred coo	nnensation plans				23 24		-
25	Employee benefit pro						25		-
26	Excess exempt expen	•	hedule I)				26		-
27	Excess readership co	,	•				27		-
28	Other deductions (att	•	· ·				28		-
29	Total deductions Ad		•			i	29	0.	•
30	Unrelated business ta	ıxable ın	come before net operating loss deduction. Subtrac	t line 29	from line 13	İ	30	0.	•
31	Deduction for net ope	rating lo	oss arising in tax years beginning on or after Janua	ry 1, 20	18 (see instructions)	ľ	31		_
32	Unrelated business ta	xable in	come Subtract line 31 from line 30				32	0.	
82370	01 01-09-19 LHA For	Paperv	work Reduction Act Notice, see instructions					Form 990-T (2018)	<u> </u>

CATHOLIC CHARITIES COMMUNITY SERVICES, ARCHDIOCESE OF NEW YORK

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Part			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	33	0.
34	Amounts paid for disallowed fringes *Repealed under H.R. Further Consolidated Appropriations Act, 2020	34	0.
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	35	
36	Total of unrelated business taxable income before specific deduction, Subtract line 35 from the sum of		
	lines 33 and 34	36	
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	37	
38	Unrelated business taxable income Subtract line 37 from line 36. If line 37 is greater than line 36,		
	enter the smaller of zero or line 36	38	0.
Part	IV Tax Computation		
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	▶ 39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from		
	Tax rate schedule or Schedule D (Form 1041)	▶ 40	
41	Proxy tax. See instructions	▶ 41	
42	Alternative minimum tax (trusts only)	42	——
43	Tax on Noncompliant Facility Income. See instructions	43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies	44	0.
Part	V Tax and Payments		
45 a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116) 45a		
b	Other credits (see instructions) 45b	7	
C	General business credit. Attach Form 3800 45c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827) 45d	7	
е	Total credits. Add lines 45a through 45d	45e	
46	Subtract line 45e from line 44	46	0.
47	Other taxes. Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedul		
48	Total tax. Add lines 46 and 47 (see instructions)	48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2	49	0.
50 a	Payments: A 2017 overpayment credited to 2018 50a 50a 9,55'	7.	
t	2018 estimated tax payments 516 566 23, 023	ī.	
c	Tax deposited with Form 8868	-	
	Foreign organizations Tax paid or withheld at source (see instructions) 50d	-	
	Backup withholding (see instructions) 50e	7	
f	Credit for small employer health insurance premiums (attach Form 8941) 50f		
	Other credits, adjustments, and payments: Form 2439	\dashv	
	☐ Form 4136 Other Total ▶ 50g		
51	Total payments. Add lines 50a through 50g	51	32,578.
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached	52	
53	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed	53	
54	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid	>5 55₄	32,578.
55		>5655	32,578.
Part \			
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 >		
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		
	If "Yes," see instructions for other forms the organization may have to file.		
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$		
	Under penalties of perjury I declare that I have examined this return including accompanying schedules and statements, and to the best of my known	wledge and belief i	is true
Sign	correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Digitally signed by Beatriz Diaz		
Here	Executive Director	May the IRS discu the preparer show	
	Signa	instructions)?	
	Print/Type preparer's name Preparer's signature Date Check	al PTIN	
Paid	self- employ	- I	
Prepa	CARREDO M UTCCING A No. No. 07/10/20	I	543209
Use (DVE O CONTOR DAVIEG TIP		728945
036 (665 FIFTH AVENUE		
	Firm's address ► NEW YORK, NY 10022 Phone no.	212-286	-2600
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