# **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

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

Department of the Treasury

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

Open to Public Inspection

Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. Inspection								
Α	For the	e 2023 calen	ing		, 20			
в	Check i	f applicable:	C Name of organization U.S. Catholic Sisters Against Human	Trafficking	D Emple	oyer identification number		
	Address	s change	Doing business as Alliance To End Human Trafficking		81-0	801552		
	Name c	hange	Room/suite	E Telepł	hone number			
	Initial re	turn	Suite 109	(267	)332-7768			
	Final ret	urn/terminated	City or town, state or province, country, and ZIP or foreign postal code					
	Amende	ed return	Brighton, MI 48114		G Gross	s receipts \$1,499,831.		
	Applica	tion pending	F Name and address of principal officer:	H(a) Is this a gro	oup return fo	or subordinates? 🗌 Yes 🛛 No		
			Sr. Sally Duffy, SC, 7575 Grand River Ave, Brighton, MI 48	8114 <b>H(b)</b> Are all su	ubordinat	es included? Yes No		
<u> </u>	Tax-exe	empt status:	▼ 501(c)(3)         501(c) (         ) (insert no.)         4947(a)(1) or         527	lf "No," a	ittach a li	st. See instructions.		
J	Website	e: www.a	lliancetoendtrafficking.org	H(c) Group ex	emption	number		
-		organization: 🔀	Corporation Trust Association Other L Year of form	nation: 2015	M State	of legal domicile: MI		
Pa	art I	Summa						
	1		cribe the organization's mission or most significant activities: <u>Alli</u>					
JCe			llaborative, faith-based national network that c					
Activities & Governance			vor services, and engages in advocacy in an effor					
ver	2		box $\hfill \square$ if the organization discontinued its operations or disposed	of more than 25	1 1	s net assets.		
ဗိ	3		S S S , , , ,		3	14		
న స	4		independent voting members of the governing body (Part VI, line 1		4	14		
itie	5		per of individuals employed in calendar year 2023 (Part V, line 2a)		5	6		
ctiv	6		per of volunteers (estimate if necessary)		6	75		
Ă	7a		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		7a	0.		
	b	Net unrelat	ed business taxable income from Form 990-T, Part I, line 11		7b	0.		
		<b>•</b> • • • •		Prior Year		Current Year		
ne	8		ons and grants (Part VIII, line 1h)	1,943,	494.	1,453,021.		
Revenue	9	•	ervice revenue (Part VIII, line 2g)					
Re	10		income (Part VIII, column (A), lines 3, 4, and 7d)	12,	482.	46,810.		
	11		nue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)					
	12		ue-add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,955,	976.	1,499,831.		
	13		I similar amounts paid (Part IX, column (A), lines 1–3)			197,344.		
	14	-	aid to or for members (Part IX, column (A), line 4)	1.0.5	6.0.0			
Expenses	15		her compensation, employee benefits (Part IX, column (A), lines 5–10)	185,	693.	288,746.		
en:	16a		al fundraising fees (Part IX, column (A), line 11e)					
EXE	17		aising expenses (Part IX, column (D), line 25) 73,756.	224	000	E00 E21		
_	17 18		enses (Part IX, column (A), lines 11a–11d, 11f–24e)		802.	509,531.		
	10		ess expenses. Subtract line 18 from line 12	510,		995,621.		
۲ X				1,445, Beginning of Curre		504,210. End of Year		
Net Assets or Fund Balances	20	Total asso	s (Part X, line 16)	2,614,		2,675,212.		
Asse Bala	20		ties (Part X, line 26)		418. 294.	180,937.		
Net.	21		or fund balances. Subtract line 21 from line 20	1,965,	2,494,275.			
- II D-	art II		re Block	, ZOS,	124.	4,494,473.		
	art II	Signatu						

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.

				11/11/2024								
Sign	Signature of officer			Date								
Here	William Miller, Treasurer											
	Type or print name and title											
Paid	Print/Type preparer's name	Preparer's signature	Date	Check if	PTIN							
Preparer	Barbara M. Zielinski	Preparer's signature Buttown M. Uelinst	11/11/2	024 self-employed	P01322973							
Use Only		Firm's EIN 43-1311065										
	Firm's address 1859 BOWLES AV	ENUE, SUITE 100, FENTON,	MO 63026	Phone no. (314)	644-2150							
May the IR	May the IRS discuss this return with the preparer shown above? See instructions											
For Paperwork Reduction Act Notice, see the separate instructions. BAA REV 05/09/24 PRO Form 990 (2023)												

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Part	III         Statement of Program Service Accomplishments           Check if Schedule O contains a response or note to any line in this Part III	
1	Briefly describe the organization's mission:	· · · · · <u>L</u>
•	Alliance to End Human Trafficking is a collaborative, faith-based nationa	1
	network offering education, supports access to survivor services, and engage	
	in an effort to eradicate modern-day slavery. We do this by providing inf	
	See Part III, Ln 1 statement	
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
4	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program service	a an manaurad by
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and alle the total expenses, and revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$274,541. including grants of \$180,000. ) (Revenue \$	0.)
	Survivor Services:	
	In 2023, the Alliance to End Human Trafficking (hereafter, "the Alliance"	
	provided nearly \$200,000 in grants and scholarships to survivors of	
	human trafficking and direct support organizations. Additionally, the	
	Alliance is a survivor informed organization, with a Survivor Advisory	
	Council offering opportunities for survivor leaders throughout the country	у
b	(Code:) (Expenses \$390,152. including grants of \$0.) (Revenue \$	
	Education: In 2023, the Alliance hosted a large conference in the Chicago area,	
	attended/exhibited at other conferences where we reached 1000s of	
	individuals. Additionally, we hosted webinars throughout the year	
	viewed by an additional 2500 people.	
c	(Code:) (Expenses \$131,835. including grants of \$) (Revenue \$ Advocacy:	<u> </u>
	In 2023, the Alliance partnered with the National Advocacy Center of	
	the Sisters of the Good Shepherd to teach individuals, policy and	
	legislation makers about the connection between human trafficking	
	and forced migration. During this time, we identified three bills	
	that contained "common sense" solutions that would mitigate the risk	
	faced by migrants to human trafficking. In this process, we held	
	listening sessions and webinars as a way of learning more and bringing	
	about awareness.	
łd	Other program services (Describe on Schedule O.)	
1.0	(Expenses \$ including grants of \$ ) (Revenue \$ )	
+e	Total program service expenses 796, 528.	- 000
		Form <b>990</b> (2023)

Form 99	00 (2023)		F	Page 3
Part	V 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)? If "Yes," complete Schedule A	1	×	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	×	
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>	3		×
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		×
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 Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i> .	5		×
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>	6		×
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>	7		×
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>	8		×
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>	9		×
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> .	10		×
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		×
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>	11b		×
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>	11c		×
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>	11d		×
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		×
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>	11f		×
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		×
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If</i> "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		×
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		×
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		×
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> .			
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		×
16	for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15		×
17	assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>	16		×
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8c2 <i>If "Yes," complete Schedule G. Part II</i> .	17		×
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		×
00-	If "Yes," complete Schedule G, Part III	19		×
20a b	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>	20a 20b		×
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? If "Yes," complete Schedule I, Parts I and II	200	×	

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Part	IV Checklist of Required Schedules (continued)			
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
23	Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	×	
	employees? If "Yes," complete Schedule J	23		×
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>	24a		×
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		×
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>	25b		×
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>	26		×
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>	27		×
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		×
b c	A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i> A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28b 28c		×
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29		×
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>	30		×
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> 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>	31		×
33	<i>complete Schedule N, Part II</i> 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> .	32		×
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>	34		×
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		×
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)? If "Yes," complete Schedule R, Part V, line 2.	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		×
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>	37		×
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	×	
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	<u> </u>		
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable <b>1a</b> 24	-		
b c	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable <b>1b</b> 0 Did the organization comply with backup withholding rules for reportable payments to vendors and			
-	reportable gaming (gambling) winnings to prize winners?	1c	×	

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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 <b>2a</b> 6								
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	×						
3a									
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3a 3b		×					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		×					
b									
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	_							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		×					
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5b 5c		×					
с 6а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	50							
ou	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		×					
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b							
7	Organizations that may receive deductible contributions under section 170(c).	0.0							
а	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?	7a		×					
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		<b> </b>					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was								
	required to file Form 8282?	7c		×					
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e		×					
e f	Did the organization receive any funds, directly or indirectly, to pay premiums of a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		×					
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
9 h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the								
	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.								
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		L					
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b							
10	Section 501(c)(7) organizations. Enter:								
a b	Initiation fees and capital contributions included on Part VIII, line 12       10a         Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities       10b								
b 11	Section 501(c)(12) organizations. Enter:								
a	Gross income from members or shareholders								
b	Gross income from other sources. (Do not net amounts due or paid to other sources								
	against amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
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.	40							
а	Is the organization licensed to issue qualified health plans in more than one state?	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								
с	Enter the amount of reserves on hand								
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?	15		×					
16	If "Yes," see the instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		×					
16	If "Yes," complete Form 4720, Schedule O.	10							
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities								
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17							
	If "Yes," complete Form 6069.								

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Part	VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.			
	Check if Schedule O contains a response or note to any line in this Part VI		<u> </u>	. 🗙
Secti	ion A. Governing Body and Management			
1a	Enter the number of voting members of the governing body at the end of the tax year <b>1a</b> <u>1</u> 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.	1	Yes	No
b 2	Enter the number of voting members included on line 1a, above, who are independent . <b>1b</b> <u>14</u> 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?	_		×
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? .	3		×
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? . Did the organization have members or stockholders?	4 5 6 7a		× × ×
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		×
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	×	<u> </u>
ь 9	Each committee with authority to act on behalf of the governing body?	8b 9	×	×
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reve	-	ode.)	
0000		100 0	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		×
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a b 12a b c	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? Describe on Schedule O the process, if any, used by the organization to review this Form 990. Did the organization have a written conflict of interest policy? <i>If "No," go to line 13</i>	11a 12a 12b	× × ×	
13	describe on Schedule O how this was done.       . </td <td>12c 13</td> <td>××</td> <td><u> </u></td>	12c 13	××	<u> </u>
14 15	Did the organization have a written document retention and destruction policy? 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?	14	×	
a b	The organization's CEO, Executive Director, or top management official	15a 15b	×	×
16a		16a		×
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	ion C. Disclosure			<u> </u>
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply.	-T (sec	tion {	501(c)

- Own website Another's website I 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. Katie Boller-Gosewisch, 7575 Grand River Ave Suite 1-009, Brighton, MI 48114 (267)332-7768

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

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

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

		(C)								
(A)	(B)	Position						(D)	(E)	(F)
Name and title	Average				eck more than one s person is both an			Reportable	Reportable	Estimated amount
	hours	· ·				or/trust		compensation	compensation	of other
	per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/ 1099-MISC/ 1099-NEC)	from related organizations (W-2/ 1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(1) Sister Sally Duffy, SC	5.00									
President		×		×						
(2) Sister Judy Molosky, CSJ	3.00									
Vice President		×		×						
(3) William Miller Jr.	3.00									
Treasurer		×		×						
(4) Jeanne Atkinson	3.00									
Secretary		×		×						
(5) Sister Ann Oestreich, IHM President-Start year	5.00	×		×						
(6) Sister Teresa Ann Wolf, OSB	3.00									
Secretary-Start year		×		×						
(7) Sister Bridget Bearss, RSCJ Director	2.00	×								
(8) Sister Kathleen Bryant, RSC Director	2.00	×								
<b>(9)</b> Christine Cervenak Director	2.00	×								
(10) Sister Jeanne Christensen, RSM Director	2.00	×								
(11)Sister Kathleen Coll, SSJ Director	2.00	×								
(12) Sister Michelle Loisel, DC Director	2.00	×								
(13) Maria Elena Perales Director	2.00	×								
(14)Sister Maryann Mueller, CSSF Director	2.00	×								

(A) Name and the       (B) Particle (B) and the pervection of the transmission is both an pervection of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the transmission of the tr	Part	VII Section A. Officers, Directors,	Trustees,	Key I	Em	ploy	yee	s, an	d٢	lighest Compe	nsated	Emplo	yees (	contir	nuea
(i) it any hours for related organization       (i) is any hours for			Average hours	Position (do not check more than box, unless person is bo					n an	Reportable compensation	Repor compen	table isation	c	ated am of other	
Executive Director       ×       86,500.       0.         16)       ×       86,500.       0.         17)       10       10       10       10         18)       10       10       10       10       10         19)       10       10       10       10       10       10         20)       10       1			(list any hours for related organizations below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/ 1099-MISC/	organizatio 1099-N	ons (W-2/ /IISC/	fr orgar	rom the nization	and
16)       17)         17)       18)         18)       19)         20)       110         20)       110         20)       110         21)       110         22)       110         23)       110         24)       110         25)       110         26)       110         26)       110         26)       110         26)       110         27)       100         28)       100         29)       100         21)       100         22)       100         23)       100         24)       100         25)       100         26)       100         27)       100         28)       100         29)       100         20)       100         21)       100         22)       100         30       100         4       100         5       100         6       100         7       100         8       100			40.00				×			86,500.		0.			0
18)       19)         20)       20)         21)       21)         22)       23)         23)       24)         24)       25)         1b Subtotal       26, 500.         c Total from continuation sheets to Part VII, Section A       26, 500.         25)       26, 500.         26)       26, 500.         27)       26, 500.         28)       26, 500.         29.       26, 500.         20.       26, 500.         21.       26, 500.         23.       26, 500.         24.       26, 500.         25.       26, 500.         26.       20.         27.       20.         28.       27.         29.       20.         21.       20.         22.       20.         23.       20.         24.       20.         25.       20.         3.       Did the organization from the organization         4.       For any individual listed on line 1a, is the sum of reportable compensation and ther compensation from the organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such individual for services ren	16)														
19)       19)         20)       100         21)       100         22)       100         23)       100         24)       100         25)       100         26)       100         26)       100         26)       100         26)       100         27)       100         28)       100         29)       100         29)       100         20)       100         21)       100         21)       100         23)       100         24)       100         25)       100         100       100         201       100         210       100         210       100         210       100         210       100         210       100         210       100         210       100         210       100         210       100         210       100         210       100         210       100         210       1	17)														
20)       21)         21)       22)         22)       23)         23)       24)         24)       25)         1b       Subtotal         c       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization         2       Total number of individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such person         4       For any individual listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or	18)			-											
21)       21)         22)       22)         23)       23)         24)       24)         25)       25)         1b       Subtotal         25)       25)         26)       26)         27)       26)         28)       26)         29)       26)         21)       26)         21)       26)         22)       26)         23)       26)         24)       26)         25)       26)         26)       27)         27)       28)         28)       29)         29)       20)         21)       20)         22)       20)         23)       20)         24)       20)         25)       20)         21)       21)         22)       21)         23)       21)         24)       21)         25)       210)         30)       210)         4)       210)         5)       210)         5)       210)         6)	19)														
22)       23)       23)         23)       24)       24)         24)       25)       25)         25)       25)       26)         25)       27)       28)         26)       27)       28)         27)       28)       29)         26)       29)       20)         27)       29)       20)         28)       29)       20)         29)       20)       20)         21)       20)       20)         25)       20)       20)         26)       20)       20)         27)       20)       20)         28)       20)       20)         29)       20)       20)         21)       21)       21)         22)       21)       21)       21)         23)       22)       21)       22)         21)       21)       21)       22)         22)       21)       21)       21)         23)       21)       21)       21)         30)       21)       21)       21)       21)         31)       210)       21)	20)			-											
23)       23)         24)       24)         25)       86,500         1b       Subtotal         c       Total from continuation sheets to Part VII, Section A         d       Total from continuation sheets to Part VII, Section A         d       Total add lines 1b and 1c)         2       86,500         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         3       Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       Yes         4       5         Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       4         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         Section B. Independent Contractors       1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year ending with or within the organization's tax year ending with or within the organization's tax year endin	21)			-											
24)       86,500       0.         25)       86,500       0.         1b       Subtotal       86,500       0.         c       Total from continuation sheets to Part VII, Section A       86,500       0.         d       Total from continuation sheets to Part VII, Section A       86,500       0.         2       Total from continuation sheets to Part VII, Section A       86,500       0.         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       Yes         3       Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       3         4       For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organizations greater than \$150,000? If "Yes," complete Schedule J for such individual       4         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       4         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5       Did any person listed on line 1a receiv	22)			-											
25)       86,500.0.         1b       Subtotal	23)														
1b       Subtotal       86,500.       0.         c       Total from continuation sheets to Part VII, Section A       86,500.       0.         d       Total (add lines 1b and 1c)       86,500.       0.         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         3       Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       Yes         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? If "Yes," complete Schedule J for such individual       4         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5       Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax y         (A)       (B)       (C)	24)			-											
c       Total from continuation sheets to Part VII, Section A        86,500.       0.         d       Total (add lines 1b and 1c)        86,500.       0.         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       Yes         3       Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual       Yes         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? If "Yes," complete Schedule J for such individual       4         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         5       Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person       5         6       Independent Contractors       5         1       Complete this table for your five highest compensated independent contractors that received more than \$100,000 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax yearemployee inding with or within the organization's tax year.	25)			-											
<ul> <li>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</li> <li>3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual</li></ul>	с	Total from continuation sheets to Part	VII, Sectio	n A											0
<ul> <li>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></li></ul>		Total number of individuals (including bu	t not limited	 d to th	nose	e list	ted	above	e) w		e than \$1		of		0
<ul> <li>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></li></ul>	3											ensated		Yes	No X
<ul> <li>5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person</li></ul>	4	For any individual listed on line 1a, is the organization and related organizations	e sum of re greater th	porta	ble	con	npei	nsatio							
Section B. Independent Contractors         1       Complete this table for your five highest compensated independent contractors that received more than \$100,00 compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax y         (A)       (B)       (C)	5	Did any person listed on line 1a receive of	or accrue co												×
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax y (A) (B) (C)	Secti				010	001	loat		0, 0				5		^
		Complete this table for your five high													
			dress								vices				

	Name and business address	Description of services	Compensation
2	Total number of independent contractors (including but not limited to received more than \$100,000 of compensation from the organization	o those listed above) who	

Part VIII Statement of Revenue Check if Schedule O contain

Part	t VIII	Statement of Revenue Check if Schedule O contains a respon	so or noto to ar	ov line in this Dr	ort VIII		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
່ ເ	1a	Federated campaigns 1a					
ant	b	Membership dues	39,980.	-			
β	с	Fundraising events <b>1c</b>		_			
ifts,	d	Related organizations 1d					
nila n	е	Government grants (contributions) 1e		_			
Sir	f	All other contributions, gifts, grants,					
her		and similar amounts not included above <b>1f</b>	1,413,041.	-			
d trib	g	Noncash contributions included in lines 1a–1f	¢				
Contributions, Gifts, Grants, and Other Similar Amounts	h	Ines 1a-1f         1g           Total. Add lines 1a-1f         .		1 452 021			
0 **			Business Code	1,453,021.			
e	2a						
ω Ž	b						
Jram Ser Revenue	c						
am	d						
Program Service Revenue	е						
Pr	f	All other program service revenue					
	g	Total. Add lines 2a–2f	<u></u>				
	3	Investment income (including dividend other similar amounts)					
		-		46,810.	0.	0.	46,810.
	4 5	Income from investment of tax-exempt be					
	5	Royalties	(ii) Personal				
	6a	Gross rents 6a	()	-			
	b	Less: rental expenses 6b		-			
	с	Rental income or (loss) 6c					
	d	Net rental income or (loss)					
	7a	Gross amount from (i) Securities	(ii) Other	_			
		sales of assets					
		other than inventory <b>7a</b>		-			
venue	b	Less: cost or other basis and sales expenses . <b>7b</b>					
	_	and sales expenses . 7b Gain or (loss) 7c		-			
Re	d	Net gain or (loss)         .					
Other Re		Gross income from fundraising					
ð		events (not including \$					
		of contributions reported on line					
		1c). See Part IV, line 18 8a					
	b	Less: direct expenses 8b					
	c	Net income or (loss) from fundraising eve	ents				
	9a	Gross income from gaming activities. See Part IV, line 19 . 9a					
	b	Less: direct expenses 9b		-			
	-	Net income or (loss) from gaming activiti					
	10a						
		returns and allowances 10a					
	b	Less: cost of goods sold 10b					
	с	Net income or (loss) from sales of invent	ory				
sn			Business Code				
leo ue	11a						
scellaneo Revenue	b						
Miscellaneous Revenue	C d						
Ξ.	d e	All other revenue					
	12	•	<u></u> .	1,499,831.	0.	0.	46,810.
				,,		5.	,

#### Part IX Statement of Functional Expenses

Check if Schedule O contains a response or note to any line in this Part IX **(D)** Fundraising Do not include amounts reported on lines 6b. 7b. (A) Total expenses (B) Program service (C) Management and 8b, 9b, and 10b of Part VIII. general expenses expenses expenses Grants and other assistance to domestic organizations 1 and domestic governments. See Part IV, line 21 183,060. 183,060. 2 Grants and other assistance to domestic individuals. See Part IV, line 22 . . . . . 14,284. 14,284. Grants and other assistance to foreign 3 organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members . . . . 5 Compensation of current officers, directors, trustees, and key employees . . . . . 55,848. 86,500. 13,611. 17,041. 6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . Other salaries and wages . . . . . 7 157,919. 101,960. 24,849. 31,110. Pension plan accruals and contributions (include 8 section 401(k) and 403(b) employer contributions) Other employee benefits . . . . . . . 9 24,484. 15,336. 4,891. 4,257. 10 Payroll taxes . . . . . . . . . . . . 19,843. 12,638. 3,454. 3,751. 11 Fees for services (nonemployees): Management . . . . . . . а . . Legal . . . . . . . . . . . . . . b С Accounting . . . . . . . . . . . 10,832. 0. 10,832. Ο. d Lobbying . . . . . . . . . Professional fundraising services. See Part IV, line 17 е Investment management fees . . . . . f Other. (If line 11g amount exceeds 10% of line 25, column a (A), amount, list line 11g expenses on Schedule O.) 302,227. 249,693. 35,263. 17,271. 12 Advertising and promotion . . . . 970. 871. 99. Ο. 13 26,095. 16,992. 9,076. 27. Office expenses . . . . . . . 14 Information technology . . . . . 34,279. 34,279. Ο. 0. 15 Royalties . . . . . . . . . Occupancy . . . . . . . . . . . 16 Travel . . . . . . . . . . . . . 17 114,385. 94,459 19,926. 0. 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings . 3,336. 299. 20,743. 17,108. 20 Interest . . . . . . . . . . . . 21 Payments to affiliates . . . . . 22 Depreciation, depletion, and amortization . 23 Insurance . . . . . . . . . . . . . 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.) а b С d All other expenses е 25 Total functional expenses. Add lines 1 through 24e 995,621. 796,528. 125,337. 73,756. Joint costs. Complete this line only if the 26 organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here [] if following ŠOP 98-2 (ASC 958-720)

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

-	n 990 (20				Page <b>11</b>
Ρ	art X	Balance Sheet Check if Schedule O contains a response or note to any line in this Pa	rt X		🗆
			<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash-non-interest-bearing	62,774.	1	106,682.
	2	Savings and temporary cash investments	2,551,644.	2	93,895.
	3	Pledges and grants receivable, net	, ,	3	508,715.
	4	Accounts receivable, net		4	65.
	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	
ets	7	Notes and loans receivable, net		-	
Assets	8	Inventories for sale or use		8	
4	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments-publicly traded securities		11	1,965,855.
	12	Investments-other securities. See Part IV, line 11		12	
	13	Investments-program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	2,614,418.	16	2,675,212.
	17	Accounts payable and accrued expenses	4,294.	17	34,937.
	18	Grants payable		18	· · · · ·
	19	Deferred revenue	645,000.	19	146,000.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.		21	
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
bili		controlled entity or family member of any of these persons		22	
Lia	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		27	
		parties, and other liabilities not included on lines 17–24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	649,294.	26	180,937.
lces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ılar	27	Net assets without donor restrictions	1,041,467.	27	2,071,867.
ä	28	Net assets with donor restrictions	923,657.	28	422,408.
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here D and complete lines 29 through 33.			,
or F	00			00	
ts (	29	Capital stock or trust principal, or current funds		29	
.es	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds .	1 0/2 10:	31	0 404 000
let	32	Total net assets or fund balances	1,965,124.	32	2,494,275.
	33	Total liabilities and net assets/fund balances	2,614,418.	33	2,675,212.

REV 05/09/24 PRO

Form **990** (2023)

Form 9	90 (2023)				Pa	ige <b>12</b>
Par	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	1	4	99,8	31.
2	Total expenses (must equal Part IX, column (A), line 25)	2		9	95,6	21.
3	Revenue less expenses. Subtract line 2 from line 1	3		5	04,2	10.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1	L,9	65,1	24.
5	Net unrealized gains (losses) on investments	5			24,9	941.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	32, column (B)) ..................................	10	2	2,4	94,2	75.
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:  Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	on			
	Schedule O.					
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a	×	
	If "Yes," check a box below to indicate whether the financial statements for the year were con	npilec	d or			
	reviewed on a separate basis, consolidated basis, or both.					
	🛛 Separate basis 🛛 Consolidated basis 🗌 Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b		×
	If "Yes," check a box below to indicate whether the financial statements for the year were aud	ited o	n a 🗌			
	separate basis, consolidated basis, or both.					
	Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for ov	ersigh	nt of			
	the audit, review, or compilation of its financial statements and selection of an independent account	ant?		2c	×	
	If the organization changed either its oversight process or selection process during the tax year, e	xplain	n on 📘			
	Schedule O.					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set for	orth in	the			
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		×
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not une	dergo	the			
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such	audits		3b		
	REV 05/09/24 PRO		I	Forn	1 <b>990</b>	(2023
	REV 05/09/24 PRO			Forn	n <b>9</b> 9	90

Form 990: Return of Organization Exempt from Income Tax					
Form 990, Page 2, Part III, Line 1 (continued)	<b>Continuation Statement</b>				
Description					
electronic media and direct outreach. The organization works col	llaboratively with local,				
regional and national organizations to increase awareness of, and	d eliminate human				
trafficking at its root. We advocate to end human trafficking.					

81-0801552

SCHE	DU	LE	Α
(Form	99	0)	

# **Public Charity Status and Public Support**

OMB No. 1545-0047

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
-------------	--------------

2023
Open to Public
Inspection
on numbor

(D)

(E) Total

Name	lame of the organization Employer identification number							
U.S.	S. Catholic Sisters Against Human Trafficking 81-0801552							
Par	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.							
The c	he 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 (F	orm 990)	.)			
3	A hospital or a cooperative ho			-	-	)(A)(iii).		
4	A medical research organizati		-				iii). Ent	er the
	hospital's name, city, and stat		, ,					
5	An organization operated for section 170(b)(1)(A)(iv). (Com	the benefit of a	college or university	owned o	r operate	ed by a government	al unit	described in
6	A federal, state, or local gover						the e	oporal public
7	An organization that normally described in section 170(b)(1			port from	i a gover	nmental unit or from	r the ge	eneral public
8	A community trust described	in section 170(b)	)(1)(A)(vi). (Complete I	Part II.)				
9	An agricultural research organ or university or a non-land-gra university:							
10	An organization that normally receipts from activities related support from gross investmen acquired by the organization a	I to its exempt fu it income and un	nctions, subject to ce related business taxal	rtain exce ble incom	eptions; a ne (less se	and (2) no more than ection 511 tax) from	33 <sup>1</sup> /3%	5 of its
11	An organization organized and		•		•	,		
	An organization organized and			-			out the	e purposes of
	one or more publicly supporte							
	the box on lines 12a through 1	2d that describes	the type of supporting	g organiza	ation and	complete lines 12e,	12f, and	l 12g.
а	<b>Type I.</b> A supporting organ	nization operated	l, supervised, or contr	olled by i	ts suppo	rted organization(s),	typical	ly by giving
	the supported organization supporting organization.					he directors or trust	ees of t	he
b	Type II. A supporting orga control or management of organization(s). You must	the supporting o	organization vested in	the same				
c	Type III functionally integrits supported organization						ally inte	grated with,
d	Type III non-functionally that is not functionally inter requirement (see instruction	grated. The orga	nization generally mu	st satisfy	a distribu	ution requirement an		
е	Check this box if the organ functionally integrated, or						e II, Typ	e III
£			stionally integrated sup	sporting	Jiganizat	юп.		
f	Enter the number of supported Provide the following informatio		· · · · · · · · ·				·	
g	0		<u> </u>				( ))	
	(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10		organization ur governing	(v) Amount of monetary support (see		Amount of support (see
			above (see instructions))	docu	ment?	instructions)	ins	structions)
				Yes	No			
(8)				103				
(A)								
(B)								
(C)								

Schedule A (Form 990) 2023 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to gualify 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) **(b)** 2020 (d) 2022 (a) 2019 (c) 2021 (e) 2023 (f) Total Gifts, grants, contributions, and 1 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 . . . The value of services or facilities 3 furnished by a governmental unit to the organization without charge . . . . **Total.** Add lines 1 through 3 4 . . . 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) . . . . **Public support.** Subtract line 5 from line 4 6 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2019 (b) 2020 (c) 2021 (d) 2022 (e) 2023 (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.) . . . . . . . **Total support.** Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) 12 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) % 14 15 15 % 331/3% support test-2023. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 16a  $\square$ 331/3% support test-2022. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check b  $\square$ 17a 10%-facts-and-circumstances test-2023. 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

b 10%-facts-and-circumstances test-2022. 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 

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 instructions 

### 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.)

Secti	on A. Public Support						
	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and membership fees	(,	(0) = = = = =	(0) = 0 = 0	(0) = 0 = =	(0)	(1) 1 2 2 2 2
	received. (Do not include any "unusual grants.")	272,455.	398,680.	277 894	1 943 494	1 453 021	4,345,544.
2	Gross receipts from admissions, merchandise	272,433.	550,000.	277,094.	1,919,191.	1,455,021.	1,515,511.
	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						
Ŭ	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						
5	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5	272,455.	398,680.	277 894	1 943 494	1 453 021	4,345,544.
7a	Amounts included on lines 1, 2, and 3	272,433.	550,000.	277,054.	1,919,191.	1,455,021.	1,515,511.
, a	received from disqualified persons						
b	Amounts included on lines 2 and 3						
U	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.)						4,345,544.
Secti	on B. Total Support			ļ			, , ,
Calen	dar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6	272,455.	398,680.				4,345,544.
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources	688.	492.	176.	12,482.	71,751.	85,589.
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b	688.	492.	176.	12,482.	71,751.	85,589.
11	Net income from unrelated business						
	activities not included on 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.)	273,143.	399,172.	278,070.	1,955,976.	1,524,772.	4,431,133.
14	First 5 years. If the Form 990 is for the	0	,				( )( )
	organization, check this box and <b>stop he</b>						🗌
	on C. Computation of Public Suppor						
15	Public support percentage for 2023 (line a						98.07 %
16	Public support percentage from 2022 Sch					16	99.54 %
	on D. Computation of Investment In		-		(f)	47	0/
17	Investment income percentage for 2023 (			-			1.93 %
18	Investment income percentage from <b>2022</b>						0.46 %
19a	$33^{1/3}\%$ support tests - 2023. If the organ						
	17 is not more than $33^{1}/_{3}$ %, check this box		-	-		-	
b	<b>33</b> <sup>1</sup> / <sub>3</sub> % <b>support tests</b> – <b>2022.</b> If the organiz line 18 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this						
00		-	•	•			
20	Private foundation. If the organization di		05/09/24 PRO	, 19a, 01 19D, (	UNCOK UNS DOX		A (Form 990) 2023

## Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- **c** Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in **Part VI** what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c 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).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c 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? *If "Yes," provide detail in Part VI.*
- 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? *If "Yes," complete Part I of Schedule L (Form 990).*
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*
- **c** Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*
- **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)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

Yes No

1

2

3a

3b

3c

4a

4b

**4c** 

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

#### Section B. Type I Supporting Organizations

- 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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

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? 1 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). 2 3 By reason of the relationship described on line 2, above, 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. 3

### Section E. Type III Functionally Integrated Supporting Organizations

- Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). 1
- а The organization satisfied the Activities Test. *Complete line 2 below.*
- The organization is the parent of each of its supported organizations. *Complete line 3 below.* b
- С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions).
- 2 Activities Test. Answer lines 2a and 2b below.
- Did substantially all of the organization's activities during the tax year directly further the exempt purposes of а 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 on line 2a, above, 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.
- Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No," provide details in Part VI.
- Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each b of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

2a

2b

3a

3b

Yes No

Yes No

1

2

1

Yes No

Par	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	. 490 •
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sec	tion 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		
Sec	tion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

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Schedule A (Form 990) 2023

Schedu	le A (Form 990) 2023			Page <b>7</b>
Part	V Type III Non-Functionally Integrated 509(a)(3	B) Supporting Organi	zations (continued)	1
Sect	ion D—Distributions			Current Year
1	Amounts paid to supported organizations to accomplish of		1	
2	Amounts paid to perform activity that directly furthers exe organizations, in excess of income from activity	empt purposes of suppo	orted 2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations 3	
4	Amounts paid to acquire exempt-use assets		4	
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in <b>Part</b>	<i>VI</i> ) 5	
6	Other distributions (describe in Part VI). See instructions.		6	
7	Total annual distributions. Add lines 1 through 6.		7	
8	Distributions to attentive supported organizations to whic (provide details in <b>Part VI</b> ). See instructions.	h the organization is res	ponsive 8	
9	Distributable amount for 2023 from Section C, line 6		9	
10	Line 8 amount divided by line 9 amount		10	)
Sect	ion E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2023 (reasonable cause required <i>—explain in Part VI</i> ). See instructions.			
3	Excess distributions carryover, if any, to 2023			
а	From 2018			
b	From 2019			
С	From 2020			
d	From 2021			
е	From 2022			
f	Total of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2023 distributable amount			
i	Carryover from 2018 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2023 from Section D, line 7: \$			
а	Applied to underdistributions of prior years			
b	Applied to 2023 distributable amount			
C	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in <b>Part VI</b></i> . See instructions.			
6	Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7	<b>Excess distributions carryover to 2024.</b> Add lines 3j and 4c.			
8	Breakdown of line 7:			
а	Excess from 2019			
b	Excess from 2020			
С	Excess from 2021			
d	Excess from 2022			
e	Excess from 2023			

Schedule A (Form 990) 2023

Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)


# SCHEDULE I Grant (Form 990) Government

## 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. 2023 Open to Public Inspection

81-0801552

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

U.S. Catholic Sisters Against Human Trafficking

#### 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?

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.

<b>1</b> (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Mary Queen of Heaven Inc.							
909 St Thira CT West Covina CA 91790	26-1247887		15,000.	0.			sub-grant
(2)Lila Mae's House							
P.O. Box 1281 Sioux City IA 51102	81-1017056		30,000.	0.			sub-grant
(3) The Benedict Center Inc.							
1849 N Dr Martin Luther King Dr. Suite 101 Milwaukee WI 53212	39-1226475		30,000.	0.			sub-grant
(4) Bakhita Mountain Home Inc.							
2316 N Wahsatch Ave. Colorado Springs CO 80919	83-1951199		30,000.	0.			sub-grant
<b>(5)</b> Dawn's Place							
75 E Logan Street Philadelphia PA 19144	26-0196507		30,000.	0.			sub-grant
(6) Bethany House of Hospitality							
7430 N Ridge Blvd Chicago IL 60645	82-1895858		15,000.	0.			sub-grant
<b>(7)</b> Vista Maria							
20651 West Warren Ave. Dearborn Heights MI 48127	38-1359262		30,000.	0.			sub-grant
(8)							
(9)							
(10)							
(11)							
(12)							
<ul><li>2 Enter total number of section</li><li>3 Enter total number of other of</li></ul>							

For Paperwork Reduction Act Notice, see the Instructions for Form 990. BAA

REV 05/09/24 PRO Schedule I (Form 990) 2023

#### Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (e) Method of valuation (book, (f) Description of noncash assistance (a) Type of grant or assistance (c) Amount of (d) Amount of (b) Number of recipients cash grant noncash assistance FMV, appraisal, other) 1 Survivor support 2 2,000. 0. book n/a 2 Survivor aid 3 1,967. 0. book n/a 3 Gift cards 1 467. 0. book n/a 4 Cash for survivor 1 50. 0. book n/a 5 Scholarship payment 6 9,800. 0. book n/a 6 7 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Part IV Schedule I (Form 990) 2023

## 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.

2023 Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service
Name of the organization

Name of the organization	Employer identification number
U.S. Catholic Sisters Against Human Trafficking	81-0801552
Pt VI, Line 11b: USCSAHT provides a complete copy of the Form 990 to	o all members
of its Board of Directors prior to filing the 990. After review and	approval
by the Board, the Treasurer files the 990.	
Pt VI, Line 12c: USCSAHT provides a copy of its written conflict of	interest
policy to all officers, directors and personnel. When a new director	r is elected
to the board or a new employee is hired, the director and employee a	are required
to acknowledge the conflict-of-interest policy and disclose any confl	icts. Acknowledgement
and disclosure are required annually thereafter.	
Pt VI, Line 15a: When conducting a search for our Executive Directo:	r, we conduct
a review of like positions across the US using a respected online re	esource. The
review includes a focus on non-profit administrative positions with	like responsibilities
and organizational size. The survey results are presented to the Exe	ecutive, Finance
and Governance Committees prior to a compensation package being pres	sented to
the Board for approval. In subsequent years, annual reviews are cond	ducted by
the Executive Committee and recorded in the minutes. The President (	conducts the
performance review with the Executive Director.	
Pt VI, Line 19: Information is made available upon request.	
Pt XII, Line 1: Changed the basis of accounting from cash to accrua	l in 2023.
For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. BAA	Schedule O (Form 990) 20

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