# Copy for Public Inspection EXTENDED TO MAY 15, 2024 Return of Organization Exempt From Income Tax

Form **990** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A	For the	$^{2}$ 2022 calendar year, or tax year beginning $$ JUL $1$ , $$ $2022$ $$ and ending	JUN 30, 2023	•
В	Check if applicable	C Name of organization	D Employer identifi	cation number
	applicable	THE FOUNDATION OF THE ROMAN CATHOLIC		
	Addres change	DIOCESE OF RALEIGH, INC.		
	Name change	Doing business as	83-16094	83
	Initial return	Number and street (or P.O. box if mail is not delivered to street address)  Room/s	uite <b>E</b> Telephone numbe	r
	Final return/	4700 HOMEWOOD COLLDE	919-568-	
	termin ated		G Gross receipts \$	6,490,211.
	Ameno		H(a) Is this a group re	
	Applic	F Name and address of principal officer: MAUREEN O'KEEFFE LINDG	RE for subordinates	
	pendir	SAME AS C ABOVE	<b>H(b)</b> Are all subordinates in	····· — —
T	Tax-exe	empt status: X 501(c)(3) 501(c)( ) (insert no.) 4947(a)(1) or		list. See instructions
	Websit		H(c) Group exemption	
				Λ State of legal domicile: NC
_	art I	Summary		···
_	1	Briefly describe the organization's mission or most significant activities: THE FOUN	DATION WAS FO	RMED TO
Governance		CULTIVATE ENDOWED AND MAJOR GIFTS FOR THE LO	NG-TERM BENEF	IT OF THE
rna	2	Check this box if the organization discontinued its operations or disposed of r		
Ş	3	Number of voting members of the governing body (Part VI, line 1a)		7
		Number of independent voting members of the governing body (Part VI, line 1b)		7
Š		Total number of individuals employed in calendar year 2022 (Part V, line 2a)	·····	5
itie	6	Total number of volunteers (estimate if necessary)		7
Activities	7 a	Total unrelated business revenue from Part VIII, column (C), line 12		0.
⋖	b	Net unrelated business taxable income from Form 990-T, Part I, line 11		0.
_			Prior Year	Current Year
d)	8	Contributions and grants (Part VIII, line 1h)	4,357,593.	1,994,483.
ņ	9	Program service revenue (Part VIII, line 2g)	0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	14,798,691.	1,063,996.
ď	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0.	0.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	19,156,284.	3,058,479.
_	_	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	2,675,617.	2,297,084.
		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
v			301,023.	425,879.
Expenses	16a	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
ē	- b	Total fundraising expenses (Part IX, column (D), line 25) 284,869.		
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	323,409.	439,564.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	3,300,049.	3,162,527.
	19	Revenue less expenses. Subtract line 18 from line 12	15,856,235.	-104,048.
Net Assets or	2		Beginning of Current Year	End of Year
ets	<b>20</b>	Total assets (Part X, line 16)	68,615,625.	72,625,930.
Ass	21	Total liabilities (Part X, line 26)	964,414.	1,004,496.
Net	22	Net assets or fund balances. Subtract line 21 from line 20	67,651,211.	71,621,434.
P	art II	Signature Block		
Un	der pena	lties of perjury, I declare that I have examined this return, including accompanying schedules and sta	tements, and to the best of m	y knowledge and belief, it is
tru	e, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of which prep	arer has any knowledge.	
Sig	gn	Signature of officer	Date	
He		VERY REVEREND MICHAEL J. BURBECK VG, BOARD M	EMBER	
		Type or print name and title		
		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Рa	id	OLGA OGANESOV OLGA OGANESOV	12/19/23 if self-employ	P01279668
Pre	eparer	Firm's name BERNARD ROBINSON & COMPANY, LLP		6-0571159
	e Only	Firm's address 4700 HOMEWOOD COURT, STE 105		
		RALEIGH, NC 27609	Phone no.91	9-862-0004
Ma	av the IF	RS discuss this return with the preparer shown above? See instructions	'	X Yes No

	THE FOUNDATION OF THE ROMAN CATHOLIC		
	990 (2022) DIOCESE OF RALEIGH, INC.	83-160948	3 Page <b>2</b>
Pai	rt 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:		
	THE FOUNDATION WAS FORMED TO CULTIVATE ENDOWED AND		
	LONG-TERM BENEFIT OF THE MINISTRIES OF THE DIOCESE		LE
	PROVIDING EFFECTIVE AND EFFICIENT MANAGEMENT AND D	ISTRIBUTION OF	
	INVESTED FUNDS.		
2	Did the organization undertake any significant program services during the year which were not listed		
	prior Form 990 or 990-EZ?	LY	'es X 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?	'es X No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services.	ervices, as measured by exper	ises.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocation	ons to others, the total expens	es, and
	revenue, if any, for each program service reported.		_
4a	(Code:) (Expenses \$ 2,396,526 • including grants of \$ 2,297,084		)
	THE FOUNDATION, HEADQUARTERED IN RALEIGH, NORTH CA		
	CULTIVATE ENDOWED AND MAJOR GIFTS FOR THE LONG-TER		
	PARISHES, SCHOOLS, PROGRAMS, AND MINISTRIES OF THE		SE OF
	RALEIGH WHILE PROVIDING EFFECTIVE AND EFFICIENT MA	NAGEMENT AND	
	DISTRIBUTION OF INVESTED FUNDS.		
4b	(Code:) (Expenses \$ including grants of \$	) (Revenue \$	)
4c	(Code:) (Expenses \$ including grants of \$	) (Revenue \$	)
4d	Other program services (Describe on Schedule O.)		

including grants of \$
2,396,526.

Total program service expenses

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Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
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		Х
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? If "Yes," complete Schedule C, Part III	5		Х
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? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
Ū	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
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,	10		
••	as applicable.			
2	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
a	5 414	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	Ha		
Б	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		<del></del>
C	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		x
a	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	110		<del></del>
u		11d		x
•	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
4		TIE	- 25	
'	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)? If "Yes," complete Schedule D, Part X	11f	х	
120	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	- ' ''	- 25	
ıza		12a	х	
h	Schedule D, Parts XI and XII  Was the organization included in consolidated, independent audited financial statements for the tax year?	ıza	- 25	
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	10h	Х	
12	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b 13	- 25	Х
13 14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
_		144		
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? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	140		
13	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		<del></del>
17	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-''		<del></del>
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		<del>                                     </del>
ıIJ		19		x
20-	complete Schedule G, Part III  Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<del>  ^</del>
	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	aomostio governinent on rate ix, column (zij, interes ros, complete concoules, rates rand is	<b>~</b> I		ı

## THE FOUNDATION OF THE ROMAN CATHOLIC

DIOCESE OF RALEIGH, INC. Form 990 (2022)

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Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	00		х
04-	Schedule J  Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	23		
24a				
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		Х
<b>h</b>	Schedule K. If "No," go to line 25a  Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		21
		240		
	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		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
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? If "Yes," complete Schedule L, Part I	25b		Х
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? If "Yes," complete Schedule L, Part II	26		Х
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? If "Yes," complete Schedule L, Part III	27		Х
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		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
С	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
	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		Х
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? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		,,	
Par	Note: All Form 990 filers are required to complete Schedule 0 rt V Statements Regarding Other IRS Filings and Tax Compliance	38	X	
Pal	Check if Schedule O contains a response or note to any line in this Part V			
	, , , , , , , , , , , , , , , , , , ,		Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

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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 2a 5			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	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		X
b	If "Yes," enter the name of the foreign country			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
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).			
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		_X_
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	3T /	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A
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?  N/A	8		
9	Sponsoring organizations maintaining donor advised funds.  Did the sponsoring organization make any taxable distributions under section 4966?  N/A			
a	/_	9a		
	, , , , , , , , , , , , , , , , , , , ,	9b		
10	Section 501(c)(7) organizations. Enter:  Initiation fees and capital contributions included on Part VIII, line 12 N/A 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders N/A 11a			
h	Gross income from other sources. (Do not net amounts due or paid to other sources against			
D	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		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?  N/A	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
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 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
	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		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
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? N/A	17		
	If "Yes," complete Form 6069.			

232005 12-13-22

### THE FOUNDATION OF THE ROMAN CATHOLIC

DIOCESE OF RALEIGH, INC. Form 990 (2022)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
	action in determing Dealy and management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		100	-110
	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.			
b				
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other	1		
_	officer, director, trustee, or key employee?	2		х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	<u> </u>		
•	of officers, directors, trustees, or key employees to a management company or other person?	3		х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a		Ť		
	more members of the governing body?	7a	Х	
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	Х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а		8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Ĭ	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	,		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
	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	Х	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	and the second s	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13		Х
14	Did the organization have a written document retention and destruction policy?	14		Х
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		Х
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filedNONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only	availa	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	Own website Another's website X 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, ar	ıd finaı	ncial	
	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			
	MAUREEN O'KEEFFE LINDGREN - (919) 568-1066			
	4700 HOMEWOOD COURT, NO. 320, RALEIGH, NC. 27609			

Form **990** (2022)

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DIOCESE OF RALEIGH, INC. Form 990 (2022)

83-1609483

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

Check it Schedule O contains a response of note to any line in this Part VII	Check if Schedule O contains a response or note to any line in this Part VII			
--	--	--	--	--

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See 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-NEĆ) 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.

(A)	(B)			(( Des	C)			(D)	(E)	(F)
Name and title	Average		not c		more	than		Reportable	Reportable	Estimated
	hours per week	offi	, unle cer an	ss pe id a d	rson irecto	is bot or/trus	h an tee)	compensation from	compensation from related	amount of other
	(list any	ctor						the	organizations	compensation
	hours for	or dire	يو			ated		organization	(W-2/1099-MISC/	from the
	related	ustee	truste		e e	suadı		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	dual tr	tional	١.	nploye	st con yee	_	1099-NEC)		and related organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Forme			5. gaa
(1) MAUREEN O'KEEFFE LINDGREN	40.00									
EXECUTIVE DIRECTOR				Х				108,902.	0.	19,859
(2) TIMOTHY A. MANN	3.00									
PRESIDENT	1.00	Х		Х				0.	0.	0.
(3) JOHN W. BYRNE	3.00									
VICE PRESIDENT		Х		Х				0.	0.	0 .
(4) H. DEAN PENNY	3.00	,,		,,					0	_
SECRETARY/TREASURER		Х		Х				0.	0.	0 .
(5) MICHAEL GOODMON	3.00	x						0.	0.	0.
BOARD MEMBER (6) ANNE W. STAHEL	3.00	^						0.	0.	0 .
BOARD MEMBER		X						0.	0.	0.
(7) RICARDO HERRERA	3.00	25						0.	•	0 .
BOARD MEMBER	1.00	x						0.	0.	0.
(8) VERY REVEREND MICHAEL J. BURBECK	3.00							-		
BOARD MEMBER	1.00	Х						0.	0.	0.
		1								
		1								
		$\vdash$								
		1								
		1								
		1	ı			1	1	1	i	

DIOCESE OF RALEIGH, INC. 83-1609483 Form 990 (2022) Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per		not cl		ition more	than		(D)  Reportable	(E) Reportable		(F) Estimate	
	week (list any hours for related organizations below			d a d	irecto	Highest compensated supply so employee		compensation from the organization (W-2/1099-MISC/ 1099-NEC)	compensation from related organizations (W-2/1099-MISC/ 1099-NEC)		amount of other compensation from the organization and related organization control organizat	tion e ion ed
	line)	Indi	Inst	Officer	Key	Higl emp	For					
1b Subtotal								108,902.		•	19,8	59. 0.
c Total from continuation sheets to Part V d Total (add lines 1b and 1c)  Total number of individuals (including but r								108,902.	C	•	19,8	-
compensation from the organization	iot iii iii iiod to ti								,,ooo or reportable		Yes	1 No
3 Did the organization list any <b>former</b> officer, line 1a? If "Yes," complete Schedule J for s											3	Х
4 For any individual listed on line 1a, is the su and related organizations greater than \$15	0,000? If "Yes,	" co	mple	ete S	Sche	edule	J f	for such individual		. 4	4	Х
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com Section B. Independent Contractors					-						5	Х
Complete this table for your five highest countries the organization. Report compensation for	-	-							· · · · · · · · · · · · · · · · · · ·	nsatio	on from	
(A) Name and business			NE					(B) Description of s		Com	(C) npensation	า
2 Total number of independent contractors (	•	ot lir	nite	d to		_	ted	d above) who received n	nore than			
\$100,000 of compensation from the organi	zation					<u>)</u>				_	um 000 (	

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Form **990** (2022)

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Form 990 (2022) DIOCESE
Part VIII Statement of Revenue

DIOCESE OF RALEIGH, INC.

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1 (4)		Check if Schedule O contains a response or note to	any line in this Part VIII			
		Check if Schedule O contains a response or note to a	(A) Total revenue	Related or exempt	(C) Unrelated business revenue	Revenue excluded
Contributions, Gifts, Grants and Other Similar Amounts		a Federated campaigns b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contributions included in lines 1a-1f  1a  1b  1,360, 1e  634, 1g  Noncash contributions included in lines 1a-1f	246. 239.			
a C		h Total. Add lines 1a-1f				
Program Service Revenue		b c	Jode			
-		f All other program service revenue				
	3 4	other similar amounts) Income from investment of tax-exempt bond proceeds	1,636,132.			1,636,132.
	5	Royalties (ii) Perso				
		b Less: rental expenses 6b 6c (ii) Folse (iii) Folse (	114			
		d Net rental income or (loss)  a Gross amount from sales of (i) Securities (ii) Other				
Revenue		assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7a 2,859,596. 7b 3,431,732. 7c -572,136.				
		d Net gain or (loss)	-572,136.	-572,136.		
Other Rev		Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 8a  b Less: direct expenses 8b				
	9	a Gross income from gaming activities. See Part IV, line 19 9a				
		b Less: direct expenses 9b				
	10	c Net income or (loss) from gaming activities a Gross sales of inventory, less returns and allowances b Less: cost of goods sold 10b				
		c Net income or (loss) from sales of inventory				
s		Business (				
e sons	11	a				
Miscellaneous Revenue		b				
Rev		c				
Σ		d All other revenue				
		e Total. Add lines 11a-11d	3,058,479.	-572,136.	0.	1,636,132.
	12	I ULAI I EVEITUE. OEE HISH HÜHUHS	1 3,030,4/9.	-JIZ.IJO.		, <u> </u>

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Form 990 (2022)

DIOCESE OF RALEIGH, INC.

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Part IX | Statement of Functional Expenses

	ion 501(c)(3) and 501(c)(4) organizations must comp		ner organizations must co	mplete column (A).	
	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations	0 000 004	0 007 004		
	and domestic governments. See Part IV, line 21	2,297,084.	2,297,084.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	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,	149,845.	22 704	12 205	93 666
_	trustees, and key employees	149,040.	22,794.	43,385.	83,666.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
-	persons described in section 4958(c)(3)(B)	216,647.	32,967.	62,725.	120,955.
7	Other salaries and wages	410,047.	34,307•	04,143.	140,333.
8	Pension plan accruals and contributions (include	7,644.	1,163.	2,213.	4,268.
0	section 401(k) and 403(b) employer contributions)	27,003.	4,109.	7,818.	15,076.
9 10	Other employee benefits	24,740.	3,764.	7,163.	13,813.
10 11	Payroll taxes	24,/40•	5,704.	,,103.	13,013.
	Management				
	Legal				
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
	Investment management fees	158,793.		158,793.	
	Other. (If line 11g amount exceeds 10% of line 25,	,		, , ,	
9	column (A), amount, list line 11g expenses on Sch O.)	130,320.	13,032.	117,288.	
12	Advertising and promotion			•	
13	Office expenses	5,056.	253.	2,025.	2,778.
14	Information technology				
15	Royalties				
16	Occupancy	58,082.	17,425.	29,041.	11,616.
17	Travel	57,259.	2,863.	22,904.	31,492.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,940.	588.	1,470.	882.
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 0.)  BAD DEBT	25,500.		25,500.	
a	MISCELLANEOUS	1,614.	484.	25,500.	323.
b	HISCEPTHWINEOUS	1,014.	404.	007•	343.
C					
d	All other eveness				
	All other expenses	3,162,527.	2,396,526.	481,132.	284,869.
25 26	Joint costs. Complete this line only if the organization	3,102,327•	2,350,3200	401,1320	204,009.
20	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	[ ] II following 501 30-2 (M50 300-720)				

DIOCESE OF RALEIGH, INC.

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Form 990 (2022)

Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to a	ny line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			87,422.	1	279,828
	2	Savings and temporary cash investments			1,933,927.	2	1,154,824
	3	Pledges and grants receivable, net			70,815.	3	16,875
	4	Accounts receivable, net		843.	4	1,234	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of t				5	
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons descri		6			
S	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use				8	
ĕ	9	Prepaid expenses and deferred charges			3,272.	9	0
	10a	Land, buildings, and equipment: cost or othe					
		basis. Complete Part VI of Schedule D		27,225.			
	b				16,167.	10c	13,227
	11	Investments - publicly traded securities			66,271,206.	11	70,856,135
	12	Investments - other securities. See Part IV, lir			12		
	13	Investments - program-related. See Part IV, lii		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	231,973.	15	303,807		
	16	Total assets. Add lines 1 through 15 (must e			68,615,625.	16	72,625,930
	17	Accounts payable and accrued expenses	9,413.	17	26,600		
	18	Grants payable		18			
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
Ş	22	Loans and other payables to any current or for					
Ĕ		trustee, key employee, creator or founder, su	bstantial	contributor, or 35%			
Liabilities		controlled entity or family member of any of t	hese per	sons		22	
3	23	Secured mortgages and notes payable to un	related th	nird parties		23	
	24	Unsecured notes and loans payable to unrela	ated third	l parties		24	
	25	Other liabilities (including federal income tax,	payables	s to related third			
		parties, and other liabilities not included on lin	nes 17-2	4). Complete Part X			
		of Schedule D			955,001.	25	977,896
	26	Total liabilities. Add lines 17 through 25			964,414.	26	1,004,496
"		Organizations that follow FASB ASC 958, o	check he	re X			
ĕ		and complete lines 27, 28, 32, and 33.					
<u>a</u>	27	Net assets without donor restrictions			31,335,043.	27	33,494,938
ñ	28	Net assets with donor restrictions			36,316,168.	28	38,126,496
בב		Organizations that do not follow FASB ASG	C 958, ch	neck here			
Ξ		and complete lines 29 through 33.					
S	29	Capital stock or trust principal, or current fun	ds			29	
Se.	30	Paid-in or capital surplus, or land, building, or				30	
ξ	31	Retained earnings, endowment, accumulated	d income	or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances			67,651,211.	32	71,621,434
	33	Total liabilities and net assets/fund balances			68,615,625.	33	72,625,930

THE FOUNDATION OF THE ROMAN CATHOL:

Form 990 (2022) DIOCESE OF RALEIGH, INC.

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Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			X
			_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1				79.
2	Total expenses (must equal Part IX, column (A), line 25)	2				27. 48.
3						
4						
5	Net unrealized gains (losses) on investments	5	4	,12	6,4	82.
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		-5	2,2	11.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	71	,62	1,4	34.
Pa	rt 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," explain on Schedule	e O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a					
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,				
	consolidated basis, or both:					
	Separate basis Consolidated basis X Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	nedule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			За		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

#### SCHEDULE A (Form 990)

Department of the Treasury

**Public Charity Status and Public Support** 

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.

Open to Public

OMB No. 1545-0047

Internal Revenue Service

Total

Name of the organization

Go to www.irs.gov/Form990 for instructions and the latest information.
THE FOUNDATION OF THE ROMAN CATHOLIC

Employer identification number

DIOCESE OF RALEIGH, INC. 83-1609483 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other (described on lines 1-10 organization support (see instructions) support (see instructions) Yes above (see instructions))

Schedule A (Form 990) 2022

DIOCESE OF RALEIGH, INC.

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

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

<u> </u>	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	59,454,140.	2,432,295.	2,058,963.	4,357,593.	1,994,483.	70,297,474.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	59,454,140.	2,432,295.	2,058,963.	4,357,593.	1,994,483.	70,297,474.
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.						70,297,474.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	59,454,140.	2,432,295.	2,058,963.	4,357,593.	1,994,483.	70,297,474.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	321,224.	1,325,659.	1,415,598.	1,532,158.	1,636,132.	6,230,771.
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.)		3,203.				3,203.
11	<b>Total support.</b> Add lines 7 through 10						76,531,448.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	
13	First 5 years. If the Form 990 is for the	ne organization's fir	st, second, third, t	fourth, or fifth tax y	year as a section 5	601(c)(3)	[==]
	organization, check this box and stop						X
	ction C. Computation of Publ						
	Public support percentage for 2022 (I					14	<u>%</u>
	Public support percentage from 2021					15	%
16a	33 1/3% support test - 2022. If the o						
	<b>stop here.</b> The organization qualifies						
b	33 1/3% support test - 2021. If the o						
	and <b>stop here.</b> The organization qual						
17a	10% -facts-and-circumstances tes						
	and if the organization meets the fact				•	VI how the organiz	ation
	meets the facts-and-circumstances te	-		* * *	-		
b	10% -facts-and-circumstances tes	ū				•	10% or
	more, and if the organization meets the				-		
	organization meets the facts-and-circu		-		• • •		
18	Private foundation. If the organization	n did not check a l	box on line 13, 16a	a, 16b, 1/a, or 17b	, check this box a		
						Schedule A	(Form 990) 2022

Schedule A (Form 990) 2022

DIOCESE OF RALEIGH, INC.

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#### 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

Section A. Public Supp		elow, please com	plete Part II.)				
Calendar year (or fiscal year beg		(a) 2010	(b) 2010	(6) 2020	(4) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributio	• • •	<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
membership fees receive	,						
include any "unusual gra	•						
2 Gross receipts from adm merchandise sold or ser							
formed, or facilities furnis							
any activity that is relate							
organization's tax-exemp							
3 Gross receipts from activ							
are not an unrelated trac							
iness under section 513							
4 Tax revenues levied for t	ŭ						
ization's benefit and eith	•						
or expended on its beha							
5 The value of services or							
furnished by a governme							
the organization without							
6 Total. Add lines 1 through							
7a Amounts included on line							
3 received from disqualif	•						
b Amounts included on lines 2 and from other than disqualified pers							
exceed the greater of \$5,000 or 1	1% of the						
amount on line 13 for the year							
c Add lines 7a and 7b							
8 Public support. (Subtract line							
Section B. Total Suppo				1	_		
Calendar year (or fiscal year be	,	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6							
10a Gross income from interedividends, payments red	,						
securities loans, rents, re	oyalties,						
and income from similar	sources						
<b>b</b> Unrelated business taxable							
(less section 511 taxes) from							
acquired after June 30, 197							
c Add lines 10a and 10b							
11 Net income from unrelate							
activities not included or whether or not the busin							
Other income. Do not incorrect or loss from the sale of correct or loss.							
assets (Explain in Part VI							
13 Total support. (Add lines 9, 10							
14 First 5 years. If the Forn	n 990 is for th	ne organization's f	irst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	ion,
check this box and stop							<u></u>
Section C. Computation	on of Publ	ic Support Pe	ercentage				
15 Public support percenta	ge for 2022 (I	ine 8, column (f),	divided by line 13,	column (f))		15	%
16 Public support percenta	ge from 2021	Schedule A, Part	t III, line 15			16	%
Section D. Computation	on of Inves	stment Incom	e Percentage				
17 Investment income perc	entage for <b>20</b>	22 (line 10c, colu	mn (f), divided by I	ine 13, column (f))		17	%
18 Investment income percent	entage from 2	<b>2021</b> Schedule A,	Part III, line 17			18	%
19a 33 1/3% support tests						33 1/3%, and line 1	17 is not
more than 33 1/3%, che	ck this box a	nd <b>stop here.</b> The	organization qual	fies as a publicly s	supported organiza	ation	
b 33 1/3% support tests							and
line 18 is not more than							
20 Private foundation. If th	ne organizatio	n did not check a	box on line 14, 19	a, or 19b, check t	his box and see in	structions	

232023 12-09-22

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
		.03	
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4b		
	4c		
	5a		
	5b 5c		
	3C		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	33		
	10a		
	,		
dula.	10b	n 000	2022

Schedule A (Form 990) 2022

DIOCESE OF RALEIGH, INC.

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Par	t IV	Supporting Organizations (continued)			
				Yes	No
11	Has th	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described on lines 11b and			
		elow, the governing body of a supported organization?	11a		
b	A fam	ily member of a person described on line 11a above?	11b		
С	A 35%	6 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
		in Part VI.	11c		
Sec	tion E	B. Type I Supporting Organizations			
				Yes	No
1	Did th	e governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
		supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
		ively operated, supervised, or controlled the organization's activities. If the organization had more than one supported ization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	_	orted organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did th	e organization operate for the benefit of any supported organization other than the supported			
	organi	ization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part V	I how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supen	vised, or controlled the supporting organization.	2		
Sec	tion C	C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trus	stees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or mai	nagement of the supporting organization was vested in the same persons that controlled or managed			
	the su	pported organization(s).	1		
Sec	tion [	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	e organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organi	ization'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			
	organi	ization'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			
	organi	ization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the or	ganization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By rea	ason of the relationship described on line 2, above, did the organization's supported organizations have a			
	signifi	cant voice in the organization's investment policies and in directing the use of the organization's			
	incom	e or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		rted organizations played in this regard.	3		
Sec	tion E	E. Type III Functionally Integrated Supporting Organizations			
1	Check	the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instructions)			
а	Ш	The organization satisfied the Activities Test. Complete line 2 below.			
b		The organization is the parent of each of its supported organizations. Complete line 3 below.			
С		The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activit	ties Test. <b>Answer lines 2a and 2b below.</b>		Yes	No
а		obstantially all of the organization's activities during the tax year directly further the exempt purposes of			
		pported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
		supported organizations and explain how these activities directly furthered their exempt purposes,			
		he organization was responsive to those supported organizations, and how the organization determined			
		nese activities constituted substantially all of its activities.	2a		
b		e activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
		r more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
		It the reasons for the organization's position that its supported organization(s) would have engaged in			
_		activities but for the organization's involvement.	2b		
3		t of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
а		e organization have the power to regularly appoint or elect a majority of the officers, directors, or			
		es of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		e organization exercise a substantial degree of direction over the policies, programs, and activities of each	01-		
	OI ITS S	supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Schedule A (Form 990) 2022 DIOCESE OF RALEIGH, INC.

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Fai	T V Type III Non-Functionally integrated 509(a)(3) Support	ing Organ	เzลแบทร	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on I	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	ıst complete	Sections A through E.	
Sect	ion 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		
Sect	ion 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	Discount 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		
	ion 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	Distributable Amount. 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-function	ally integrate	d Type III supporting ord	anization (see

Schedule A (Form 990) 2022

instructions).

Schedule A (Form 990) 2022 DIOCESE OF RALEIGH, INC.

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	t V Type III Non-Functionally Integrated 509		anizations (continu	ued)	3 1003403 Page /
Sect	ion D - Distributions	( ) ( ) ( )	COntini	Jeu)	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	3	
4	Amounts paid to acquire exempt-use assets		·-	4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		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 which the	ne organization is responsive	<del>)</del>		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	•	(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ns	Distributable Amount for 2022
_1_	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
_3_	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
<u>i</u> _	,				
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
_8_	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
С	Excess from 2020				
d	Excess from 2021				
<u>e</u>	Excess from 2022				

Schedule A (Form 990) 2022

chedule A (Form 990) 2022 DIOCESE OF RALEIGH, INC

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Scriedule A	(Form 990) 2022 DIOCHDI OI MINIMULTON, 114C+ 03 1003 403 Fage 6					
Part VI	Supplemental Information. 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.)					
	(See instructions.)					

Schedule A (Form 990) 2022

#### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service **Supplemental Financial Statements** 

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

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public

Open to Public Inspection

Name of the organization THE FOUNDATION OF THE ROMAN CATHOLIC DIOCESE OF RALEIGH, INC.

Employer identification number 83-1609483

Pai	t I Organizations Maintaining Donor Advised		s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	_	
6	Did the organization inform all grantees, donors, and donor ac		
	for charitable purposes and not for the benefit of the donor or		
	impermissible private benefit?		Yes No
Pai			
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	ion or education) Preservation of	a historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualification	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic stru	ıcture included in (a)	2c
d	Number of conservation easements included in (c) acquired a	fter July 25,2006, and not on a	
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by th	e organization during the tax
	year		
4	Number of states where property subject to conservation eas	ement is located	
5	Does the organization have a written policy regarding the peri	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	nandling of violations, and enforcing con	servation easements during the year
_	<del></del>		
7	Amount of expenses incurred in monitoring, inspecting, handle	ling of violations, and enforcing conserva	ation easements during the year
•			M-1/4//D/2)
8	Does each conservation easement reported on line 2(d) above		
•	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservation	· · · · · · · · · · · · · · · · · · ·	
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's financial statem	ents that describes the
Pai	organization's accounting for conservation easements.  † III   Organizations Maintaining Collections of	Art. Historical Treasures, or C	ther Similar Assets
. a.	Complete if the organization answered "Yes" on Form		Allor Olimiai 7.000tol
	If the organization elected, as permitted under FASB ASC 958		and halance sheet works
	of art, historical treasures, or other similar assets held for pub	, ,	
	service, provide in Part XIII the text of the footnote to its finan	· · · · · · · · · · · · · · · · · · ·	•
h	If the organization elected, as permitted under FASB ASC 958		
	art, historical treasures, or other similar assets held for public		
	provide the following amounts relating to these items:	oxinistion, caddation, or research in fact	Totalice of public service,
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		·
2	If the organization received or held works of art, historical trea		· · · · · · · · · · · · · · · · · · ·
_	the following amounts required to be reported under FASB AS	·	
а	Revenue included on Form 990, Part VIII, line 1	_	\$
	Assets included in Form 990, Part X		· · · · · · · · · · · · · · · · · · ·

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Schedule D (Form 990) 2022

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

DIOCESE OF RALEIGH, INC. Schedule D (Form 990) 2022

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Pai	t III   Organizations Maintaining C	collections of Ar	t, Historical Tr	easures, or Oth	ner Simila	ar Assets(continued)
3	Using the organization's acquisition, accessi	on, and other record	s, check any of the	following that make	significant ι	use of its
	collection items (check all that apply):					
а	Public exhibition	d	Loan or exc	hange program		
b	Scholarly research	е	Other			
С	Preservation for future generations					
4	Provide a description of the organization's co	ollections and explain	n how they further t	ne organization's ex	empt purpo	se in Part XIII.
5	During the year, did the organization solicit of	r receive donations o	of art, historical trea	sures, or other simil	ar assets	
	to be sold to raise funds rather than to be ma	aintained as part of t	he organization's co	ollection?		Yes No
Pai	t IV Escrow and Custodial Arran	gements. Comple	ete if the organizatio	n answered "Yes" o	n Form 990	, Part IV, line 9, or
	reported an amount on Form 990, Pa	rt X, line 21.				
1a	Is the organization an agent, trustee, custod	ian or other intermed	liary for contribution	s or other assets no	ot included	
	on Form 990, Part X?					Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:			
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1e	
f	Ending balance				1f	
2a	Did the organization include an amount on F	orm 990, Part X, line	21, for escrow or cu	ustodial account lial	oility?	Yes   No
_	If "Yes," explain the arrangement in Part XIII.					Ц
Pai	t V Endowment Funds. Complete i					
		(a) Current year	(b) Prior year	(c) Two years back	1	ears back (e) Four years back
1a	Beginning of year balance	66,764,569.	74,741,578.	60,612,451		00,951.
b	Contributions	1,583,599.	3,727,449.	895,931	2,19	93,730. 59,444,140.
С	Net investment earnings, gains, and losses	4,955,107.	-8,790,931.		<del>                                     </del>	54,384. 2,637,105.
d	Grants or scholarships	1,896,416.	2,284,627.	2,561,566	1,39	92,045. 258,473.
е	Other expenditures for facilities					
	and programs					
f	Administrative expenses	676,209.	628,900.	589,697		35,801. 421,821.
g	End of year balance	70,730,650.	66,764,569.	74,741,578	. 60,61	12,451. 61,400,951.
2	Provide the estimated percentage of the cur		e (line 1g, column (a	i)) held as:		
	Board designated or quasi-endowment	45.9100	_%			
	Permanent endowment 21.4900	%				
С	Term endowment 32.6000	, -				
	The percentages on lines 2a, 2b, and 2c sho	•				
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are held a	nd administered for	the	[v. ] N
	organization by:					Yes No
	(i) Unrelated organizations					
	(ii) Related organizations					
b	If "Yes" on line 3a(ii), are the related organization					3b
4	Describe in Part XIII the intended uses of the		wment funds.			
Pai	t VI Land, Buildings, and Equipm		) David IV (Bara 44 - 6	) F 000 Dt	V 15 40	
	Complete if the organization answere					. 1
	Description of property	(a) Cost or of	' '	' '	Accumulated	d (d) Book value
		basis (investn	nent) basis	(otrier) d	epreciation	
	Land					
	Buildings					
	Leasehold improvements			3 700	2 70	70
	Equipment			3,709.	3,70	
	Other (2.4 cm)			3,516.	10,28	
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part	X, column (B), line 1	Uc.)		13,227.

Schedule D (Form 990) 2022

DIOGEGE OF 1	ON OF THE RORALEIGH, INC.	MAN CATHOLIC	-1609483 Page 3
Schedule D (Form 990) 2022 DIOCESE OF F	RALEIGH, INC.	. 63	-1009463 Page 3
Complete if the organization answered "Yes" of	on Form 990. Part IV. line	e 11b. See Form 990. Part X. line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1) Financial derivatives	. ,		,
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11d. See Form 990, Part X, line 15.	
	Description	,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	15.)		
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) CHARITABLE GIFT ANNUITY	
(3) OBLIGATIONS	938,164.
(4) OPERATING LEASE LIABILITIES	39,732.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	977,896.

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

Schedule D (Form 990) 2022

### FOUNDATION OF THE ROMAN

DIOCESE OF RALEIGH, INC. Schedule D (Form 990) 2022

83-1609483 Page 4

га	rt XI Reconciliation of Revenue per Audited Financial S	Statements Wit	th Revenue per R	eturr	າ.
	Complete if the organization answered "Yes" on Form 990, Part IV	', line 12a.			
1	Total revenue, gains, and other support per audited financial statements			1	6,973,957.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	4,126,482.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	I Other (Describe in Part XIII.)	2d	-52,211.		
е	Add lines 2a through 2d			2e	4,074,271.
3	Subtract line 2e from line 1			3	2,899,686.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	158,793.		
b	Other (Describe in Part XIII.)	4b			
С	Add lines <b>4a</b> and <b>4b</b>			4c	158,793.
5	Total was a Add the a O and A . (This was a small Farms 000 Dart I line				2 050 170
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line			_5_	3,058,479.
	rt XII Reconciliation of Expenses per Audited Financial	Statements W		,	
	Reconciliation of Expenses per Audited Financial Complete if the organization answered "Yes" on Form 990, Part IV	Statements W ', line 12a.	ith Expenses per	Retu	irn.
	Complete if the organization answered "Yes" on Form 990, Part IV  Total expenses and losses per audited financial statements	Statements W ', line 12a.	ith Expenses per	,	
Pa	Complete if the organization answered "Yes" on Form 990, Part IV  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:	Statements W	ith Expenses per	Retu	irn.
Pa	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	Statements W , line 12a.	ith Expenses per	Retu	irn.
1 2	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	Statements Width   Statements Width   Statements   Stat	ith Expenses per	Retu	irn.
Pa 1 2 a	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	2a   2b   2c	ith Expenses per	Retu	irn.
Pa  1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a	ith Expenses per	Retu	3,003,734.
Pa  1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a	ith Expenses per	Retu	3,003,734.
Pa  1 2 a b c d	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a	ith Expenses per	Retu	3,003,734.
Pa  1 2 a b c d e	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a	ith Expenses per	Retu	3,003,734.
Pa  1 2 a b c d e	Complete if the organization answered "Yes" on Form 990, Part IV Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a	ith Expenses per	Retu	3,003,734.
1 2 a b c d e 3 4	Complete if the organization answered "Yes" on Form 990, Part IV  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b	2a	ith Expenses per	Retu	0. 3,003,734.
1 2 a b c d e 3 4 a b b	Complete if the organization answered "Yes" on Form 990, Part IV  Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25:  Donated services and use of facilities  Prior year adjustments  Other losses  Other (Describe in Part XIII.)  Add lines 2a through 2d  Subtract line 2e from line 1  Amounts included on Form 990, Part IX, line 25, but not on line 1:  Investment expenses not included on Form 990, Part VIII, line 7b	2a	158,793.	Retu	3,003,734.

#### | Part XIII| Supplemental Information.

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

#### PART V, LINE 4:

THE FOUNDATION'S ENDOWMENTS CONSIST OF APPROXIMATELY 162 INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES, INCLUDING THE LONG-TERM BENEFIT OF THE MINISTRIES OF THE ROMAN CATHOLIC DIOCESE OF RALEIGH. THE OWNERSHIP OF THESE FUNDS WERE TRANSFERRED TO THE FOUNDATION FOR ADMINISTRATION IN JUNE 2019. THE ENDOWMENTS INCLUDE DONOR-RESTRICTED ENDOWMENT FUNDS AND FUNDS DESIGNATED BY THE DIOCESAN FINANCE COUNCIL AND THE BOARD OF DIRECTORS OF THE FOUNDATION TO FUNCTION AS ENDOWMENTS.

#### PART X, LINE 2:

IT IS THE FOUNDATION'S POLICY TO EVALUATE ALL TAX POSITIONS TO IDENTIFY ANY THAT MAY BE CONSIDERED UNCERTAIN. NO MATERIAL UNCERTAIN TAX POSITIONS 232054 09-01-22

83-1609483 Page 5 DIOCESE OF RALEIGH, INC. Schedule D (Form 990) 2022 Part XIII Supplemental Information (continued) WERE IDENTIFIED FOR 2023 THAT WOULD REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. PART XI, LINE 2D - OTHER ADJUSTMENTS: CHANGE IN ESTIMATED VALUE OF CHARITABLE GIFT ANNUITIES **OBLIGATIONS** -98,284. CHANGE IN ESTIMATED VALUE OF CHARITABLE GIFT ANNUITY RECEIVABLES 46,073. TOTAL TO SCHEDULE D, PART XI, LINE 2D -52,211.

#### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization THE FOUNDATION OF THE ROMAN CATHOLIC

Employer identification number

DIOCESE O	F RALEIGH	I, INC.					83-1609483
Part I General Information on Grants a	nd Assistance						
1 Does the organization maintain records	to substantiate th	e amount of the grants	s or assistance, the	grantees' eligibilit	y for the grants or ass	sistance, and the selec	
criteria used to award the grants or assi	stance?						X Yes No
2 Describe in Part IV the organization's pro	ocedures for moni	toring the use of grant	funds in the United	d States.			
Part II Grants and Other Assistance to	_				anization answered "\	es" on Form 990, Parl	: IV, line 21, for any
recipient that received more than	\$5,000. Part II car	be duplicated if addit	tional space is need	ded.	(8.1.)		
(a) Name and address of organization or government	<b>(b)</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
ROMAN CATHOLIC DIOCESE OF RALEIGH							
AND AFFILIATES(LIST AVAILABLE ON							
REQUEST) - 7200 STONEHENGE DR							
RALEIGH, NC 27613	56-0591293	501(C)(3)	231,312.	0.			ASSISTANCE FOR THE NEEDY
ROMAN CATHOLIC DIOCESE OF RALEIGH							
AND AFFILIATES(LIST AVAILABLE ON							
REQUEST) - 7200 STONEHENGE DR							CATHOLIC SCHOOLS AND
RALEIGH, NE 27613	56-0591293	501(C)(3)	97,170.	0.			EDUCATION INITIATIVES
ROMAN CATHOLIC DIOCESE OF RALEIGH							
AND AFFILIATES(LIST AVAILABLE ON							
REQUEST) - 7200 STONEHENGE DR							
RALEIGH, NC 27613	56-0591293	501(C)(3)	1,800.	0.			CHILD AND FAMILY PROGRAMS
ROMAN CATHOLIC DIOCESE OF RALEIGH							
AND AFFILIATES(LIST AVAILABLE ON							
REQUEST) - 7200 STONEHENGE DR							DIOCESAN SUPPORT AND
RALEIGH, NC 27613	56-0591293	501(C)(3)	135,300.	0.			ASSISTANCE
ROMAN CATHOLIC DIOCESE OF RALEIGH							
AND AFFILIATES(LIST AVAILABLE ON							
REQUEST) - 7200 STONEHENGE DR							LAY FORMATION AND
RALEIGH, NC 27613	56-0591293	501(C)(3)	88,400.	0.			EDUCATION
ROMAN CATHOLIC DIOCESE OF RALEIGH							
AND AFFILIATES(LIST AVAILABLE ON							
REQUEST) - 7200 STONEHENGE DR							
RALEIGH, NC 27613	56-0591293	501(C)(3)	263,643.	0.			OTHER
2 Enter total number of section 501(c)(3) a	and government or	rganizations listed in th	ne line 1 table				1.

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

3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) 2022

# THE FOUNDATION OF THE ROMAN CATHOLIC Inspection

83-1609483 DIOCESE OF RALEIGH, INC. Schedule I (Form 990)

Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (c) IRC section (a) Name and address of (b) EIN (d) Amount of (e) Amount of (f) Method of (a) Description of (h) Purpose of grant valuation non-cash assistance or assistance organization or government if applicable cash grant noncash (book, FMV. assistance appraisal, other) ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REQUEST) - 7200 STONEHENGE DR. -PARISH SUPPORT AND RALEIGH, NC 27613 56-0591293 501(C)(3) 181,397 0 ASSISTANCE ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REOUEST) - 7200 STONEHENGE DR. -RALEIGH, NC 27613 56-0591293 501(C)(3) 92,369 0 CHURCH EXPANSION ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON SEMINARIAN EDUCATION AND REOUEST) - 7200 STONEHENGE DR. -RALEIGH, NC 27613 56-0591293 501(C)(3) 461,584 0 WELFARE ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REOUEST) - 7200 STONEHENGE DR. -TUITION ASSISTANCE AND RALEIGH, NC 27613 56-0591293 298,224 SCHOLARSHIPS 501(C)(3) 0 ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REOUEST) - 7200 STONEHENGE DR. -RALEIGH, NC 27613 56-0591293 501(C)(3) 122,981 0 SPECIAL MINISTRIES ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REQUEST) - 7200 STONEHENGE DR. -SEMINARIAN PARTNERSHIP PROGRAM RALEIGH, NC 27613 56-0591293 501(C)(3) 208,721 0 ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REQUEST) - 7200 STONEHENGE DR. -RALEIGH NC 27613 56-0591293 501(C)(3) 6 183 0 CEMETERY MAINTENANCE ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES(LIST AVAILABLE ON REQUEST) - 7200 STONEHENGE DR. -RALEIGH, NC 27613 56-0591293 501(C)(3) 108,000 0 CATHOLIC CHARITIES

Schedule I (Form 990)

Page 1

DIOCESE OF RALEIGH, INC. Schedule I (Form 990) 2022

83-1609483

Page 2

(a) Type of grant or assistance	<b>(b)</b> Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information	n required in Part I, line	e 2; Part III, colum	n (b); and any other a	dditional information.	
PART I, LINE 2:					
THE FOUNDATION ONLY MAKES GRANTS	S TO THE DIO	OCESE OF I	RALEIGH AND	AFFILIATES	
OF THE FOUNDATION WHICH INCLUDES	S PARISHES,	SCHOOLS,	AND CATHOL	IC CHARITIES	
(LIST AVAILABLE UPON REQUEST). :	THE CLOSE RI	ELATIONSH:	IP BETWEEN	THE	
ORGANIZATIONS SERVES TO MONITOR					
	THE ODE OF	THE POND.	J FOR THE I	ИТЕЙБЕБ	
PURPOSES.					

#### **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

THE FOUNDATION OF THE ROMAN CATHOLIC

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

Open to Public Inspection

Employer identification number

	DIOCESE OF R	ALEIGH	, INC.			83-1	609	483	
Par	rt I Types of Property					•			
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts report Form 990, Part VII	ted on	(d) Method of de noncash contribu			s
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	9	137	<u>,239.</u> F	AIR MARKET	VA	LUE	
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other ()								
26	Other ()								
27	Other ()								
28 29	Other ( )  Number of Forms 8283 received by the organi	zation durin	a the tax year for a	contributions					
29	for which the organization completed Form 82				29				
	101 Which the organization completed 1 01111 02	.00, Fait V, L	Donee Acknowledg	Jennent [	29			Yes	No
30a	During the year, did the organization receive b	v contributio	on any property re	oorted in Part I line	s 1 through	28 that it		163	140
ooa	must hold for at least 3 years from the date of	•		•	J	•			
	exempt purposes for the entire holding period						30a		Х
h	If "Yes," describe the arrangement in Part II.	•					000		
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandar	d contributi	ons?	31		Х
	Does the organization hire or use third parties								
u	contributions?		-				32a		Х
b	If "Yes," describe in Part II.								
33	If the organization didn't report an amount in o	column (c) fo	or a type of propert	y for which column	(a) is checl	ked,			
-	describe in Part II.	. (-, -	71 [2.2]	,	,	,			
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.		Schedule N	l (Forr	n 990)	2022

232141 09-09-22

### THE FOUNDATION OF THE ROMAN CATHOLIC

DIOCESE OF RALEIGH, 83-1609483 Schedule M (Form 990) 2022 INC. Page 2 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

232142 09-09-22

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE FOUNDATION OF THE ROMAN CATHOLIC DIOCESE OF RALEIGH, INC.

Employer identification number 83-1609483

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

MINISTRIES OF THE DIOCESE OF RALEIGH WHILE PROVIDING EFFECTIVE AND

EFFICIENT MANAGEMENT AND DISTRIBUTION OF INVESTED FUNDS.

FORM 990, PART VI, SECTION A, LINE 6:

THE CORPORATION SHALL HAVE ONE SOLE MEMBER BEING THE BISHOP OF THE ROMAN

CATHOLIC DIOCESE OF RALEIGH, NORTH CAROLINA OR IN THE EVENT OF A VACANCY IN

THE OFFICE OF BISHOP, THE ADMINISTRATOR OF THE ROMAN CATHOLIC DIOCESE OF

RALEIGH, NORTH CAROLINA WHO SHALL EX-OFFICIO BE THE SOLE MEMBER OF THE

CORPORATION.

FORM 990, PART VI, SECTION A, LINE 7A:

THE DIRECTORS OF THE CORPORATION SHALL BE APPOINTED BY THE BISHOP OF THE ROMAN CATHOLIC DIOCESE OF RALEIGH, NORTH CAROLINA, THE SOLE MEMBER OF THE CORPORATION.

FORM 990, PART VI, SECTION A, LINE 7B:

THE FOLLOWING POWERS ARE RESERVED TO THE SOLE MEMBER OF THE FOUNDATION:

(A) APPROVE CHANGES IN THE PURPOSES, PHILOSOPHY, OR MISSION OF THE

FOUNDATION

(B) APPROVE THE AMENDMENT OF, OR ADDITION TO, OR REVOCATION OF, THE

ARTICLES OF INCORPORATION OR THE BY-LAWS OF THE FOUNDATION

- (C) APPOINT OR REMOVE, WITH OR WITHOUT CAUSE, THE MEMBERS OF THE BOARD OF DIRECTORS
- (D) APPROVE THE SALE, CONVEYANCE, ASSIGNMENT, TRANSFER, ALIENATION, PLEDGE,

  ENCUMBRANCE, OR LEASE OF ALL OR SUBSTANTIALLY ALL ASSETS OF THE FOUNDATION

  LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022

232211 10-28-22

Schedule O (Form 990) 2022 Page 2 Name of the organization THE FOUNDATION OF THE ROMAN CATHOLIC **Employer identification number** DIOCESE OF RALEIGH, INC. 83-1609483 (E) APPROVE PLANS OF MERGER, CONSOLIDATION, OR AFFILIATION OF THE FOUNDATION WITH ANY LEGAL ENTITY TO DISSOLVE OR TERMINATE THE EXISTENCE OF THE FOUNDATION AND DETERMINE THE DISTRIBUTION OF ASSETS UPON THE TERMINATION OR DISSOLUTION APPOINTMENT OR REMOVAL OF THE EXECUTIVE DIRECTOR, WITH OR WITHOUT CAUSE (H) APPROVAL OF THE FOUNDATION'S ANNUAL OPERATING AND CAPITAL BUDGETS FORM 990, PART VI, SECTION B, LINE 11B: THE BOARD CHAIR WILL BE ASKED TO REVIEW THE 990 UPON COMPLETION EITHER VIA EMAIL TRANSMISSION OR ON-SITE MEETING, AND TO REMIT COMMENTS (IF ANY) TO THE EXECUTIVE DIRECTOR BEFORE FILING. FORM 990, PART VI, SECTION B, LINE 12C: THE EXECUTIVE DIRECTOR REVIEWS THE CONFLICT OF INTEREST POLICY PRIOR TO EACH BOARD MEETING AND IS PREPARED TO DISCUSS THE CONFLICT OF INTEREST POLICY WITH ANY NON-COMPLIANT BOARD MEMBER PRIVATELY ALONG WITH THE BOARD PRESIDENT. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD OF DIRECTORS HAS UTILIZED AN EMPLOYEE SEARCH FIRM THAT CONSULTS LOCAL AND NATIONAL DIOCESAN FOUNDATIONS TO DETERMINE FAIR COMPENSATION OF THE EXECUTIVE DIRECTOR. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS WILL BE MADE AVAILABLE UPON REQUEST. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: CHANGE IN ESTIMATED VALUE OF CHARITABLE GIFT ANNUITY

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization THE FOUNDATION OF THE ROMAN CATHOLIC DIOCESE OF RALEIGH, INC.	Employer identification number 83-1609483
OBLIGATIONS	-98,284.
CHANGE IN ESTIMATED VALUE OF CHARITABLE GIFT ANNUITY	_
RECEIVABLE	46,073.
TOTAL TO FORM 990, PART XI, LINE 9	-52,211.

#### **SCHEDULE R** (Form 990)

Name of the organization

#### **Related Organizations and Unrelated Partnerships**

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

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information. THE FOUNDATION OF THE ROMAN CATHOLIC

Open to Public

Inspection Employer identification number

OMB No. 1545-0047

DIOCESE OF RAI		83-160	9483				
Part I Identification of Disregarded Entities. Comple	te if the organization answered "Yes'	on Form 990, Part IV, line 3	3.				
(a) Name, address, and EIN (if applicable) of disregarded entity	<b>(b)</b> Primary activity	(c) Legal domicile (state of foreign country)	(d) or Total inco	me End-of-yea		(f) et controlling entity	g
	_						
	_						
Part II Identification of Related Tax-Exempt Organizations during the tax year.	ations. Complete if the organization	answered "Yes" on Form 990	0, Part IV, line 34,	because it had one	e or more related tax-	exempt	
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	xempt Code Public charity		contr	g) 512(b)(13) rolled tity?
ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES (LIST AVAILABLE ON REQUEST), 7200	<b>⊣</b> ′						
STONEHENGE DR., RALEIGH, NC 27613	SCHOOLS, AND CHARITIES	NORTH CAROLINA	501(C)(3)	LINE 1	N/A		X

## THE FOUNDATION OF THE ROMAN CATHOLIC Inspection

DIOCESE OF RALEIGH, INC. Schedule R (Form 990) 2022

83-1609483

Page 2

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(I	h)	(i)	(j	(	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disproportionate Code V-UBI		Gener	al or Perce	entage	
or related organization		(state or foreign	entity	excluded from tax under	income	income end-of-year allocations?		amount in box 20 of Schedule K-1 (Form 1065)	partr	er?	iersnip	
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes	No	
										$\Box$	+-	

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

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	i) tion
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income			Sect 512(b contr enti	o)(13) colled ity?
		country)						Yes	No
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DIOCESE OF RALEIGH, INC. Schedule R (Form 990) 2022

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

Not	te: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1	During the tax year, did the organization engage in any of the following transactions with or	ne or more re	elated organizations listed	in Parts II-IV?				
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X	
b	Gift, grant, or capital contribution to related organization(s)				1b	X		
С	c Gift, grant, or capital contribution from related organization(s)							
d	d Loans or loan guarantees to or for related organization(s)							
	Loans or loan guarantees by related organization(s)				1e		X	
f	Dividends from related organization(s)				1f		X	
g	Sale of assets to related organization(s)				1g		X	
h	Purchase of assets from related organization(s)				1h		X	
i	Exchange of assets with related organization(s)				1i		Х	
j	Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
-								
k	Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
ı	Performance of services or membership or fundraising solicitations for related organization(	ı(s)			11	Х		
m	Performance of services or membership or fundraising solicitations by related organization(				1m	Х		
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	( )			1n		Х	
	Sharing of paid employees with related organization(s)				10		Х	
_	3 - F							
р	Reimbursement paid to related organization(s) for expenses				1p	Х		
a					1a		Х	
٦	The state of the s							
r	Other transfer of cash or property to related organization(s)				1r		Х	
	Other transfer of cash or property from related organization(s)				1s		Х	
	If the answer to any of the above is "Yes," see the instructions for information on who must							
	(a) Name of related organization Tran	(b) nsaction pe (a-s)	(c) Amount involved	(d)  Method of determining amount invo	olved			
<u>(1)</u>								
(2)								
(3)								
(4)								
(5)								
(6)								
23216	3 00-14-22	44		Schedule F	(Forr	n 990)	2022	

#### THE FOUNDATION OF THE ROMAN CATHOLIC Schedule R (Form 990) 2022 DIOCESE OF RALEIGH, INC.

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

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

(a)	(b)	(c)	(d)	Are partne 501 ( org	e)	(f)	(g)	(1	h)	(i)	(	j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne	all rs sec.	Share of	Share of	Dispi	ropor-	Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene	eral or	Percentage
of entity		(state or foreign	(related, unrelated,	501(	c)(3)	total	end-of-year	alloca	nate ations?	amount in box 20	mana	aging ner?	ownership
		country)	sections 512-514)	Yes	No	income	assets	Yes	No	(Form 1065)	Yes	NO	
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Provide additional information for responses to questions on Schedule R. See instructions.
PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:
NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:
ROMAN CATHOLIC DIOCESE OF RALEIGH AND AFFILIATES (LIST
AVAILABLE ON REQUEST)
EIN: 56-0591293
7200 STONEHENGE DR.
RALEIGH, NC 27613
PRIMARY ACTIVITY: CATHOLIC ORGANIZATION OF RALEIGH - CATHOLIC CHURCH,
SCHOOLS, AND CHARITIES
DIRECT CONTROLLING ENTITY: N/A

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