| Form              | 990-T   | Ex  | empt Organization (<br>and proxy tax)           |                     |                   |                 |                | uri      | 3/,                   | OMB  | No 1545-0687                                |
|-------------------|---|---|---|---------------------|-------------------|-----------------|----------------|----------|-----------------------|--|---|
| 1 01111           | <i>y</i>  | Eas cales   | ndar year 2016 or other tax year begin          |                     |                   |                 |                | <b>√</b> | 77                    | G  | <b>∂</b> @ <b>1</b> €                       |
|                   |   |   | formation about Form 990-T and i                |                     |                   |                 |                |          |                       | 4  |   |
|                   | ment of the Treasury<br>I Revenue Service                   |   | not enter SSN numbers on this form a            |                     |                   |                 |                |          | L                     | Open to  | Public Inspection for<br>Organizations Only |
| A                 | Check box if  |   | Name of organization (                          |                     |                   |                 |                |          | D Emplo               | yer identi                                       | fication number                             |
| <u> </u>          | address changed   |   | CATHOLIC CHARITIES (                            | OF T                | HE ARCHDIC        | CESE            |                |          | (Emplo                | yees' trust, :                                   | see instructions.)                          |
| ВЕхе              | mpt under section   |   | OF WASHINGTON                                   |                     |                   |                 |                |          |                       |  |   |
| X                 | 501( C)(3 )   | Print Number, street, and room or suite no. If a P.O. box, see instructions 5 |   |                     |                   |                 |                |          |                       |  | Į   |
|                   | 408(e) 220(e)   | Or Type   |   |                     |                   |                 |                |          |                       |  | ess activity codes                          |
|                   | 408A 530(a)   | 1,700   | 924 G STREET NW                                 |                     |                   |                 |                |          | (See In               | structions)                                      |   |
|                   | 529(a)  | ]   | City or town, state or province, country        | IP or foreign posta | l code            |                 |                |          |                       |  |   |
|                   | k value of all assets                                       |   |   |                     |                   |                 |                |          |                       | 30   |   |
| al <del>e</del>   | end of year  F Group exemption number (See instructions ) ▶ |   |   |                     |                   |                 |                |          |                       |  |   |
|                   |   |   | ck organization type 🕨   X   501                |                     |                   | 501(c)          |                |          | 401(a) trust Other to |  |   |
| H De              | escribe the organiz   | zation's p  | rimary unrelated business activity              | ► PA                | RKING LOT         | REVENU          | <u> </u>       |          |                       |  | <del></del>                                 |
| I Du              | iring the tax year,   | was the   | corporation a subsidiary in an affili           | ated g              | roup or a parent- | subsidiary c    | ontrolled grou | ıp?.     |                       | ▶↓   | Yes X No                                    |
|                   |   |   | identifying number of the parent cor            | rporati             | on 🕨              |                 |                |          |                       |  |   |
|                   | e books are in care   |   | <del></del>                                     |                     | <del></del>       |                 | e number 🕨     |          |                       | 2-4314   |   |
| Par               |   |   | or Business Income                              | . —                 | (A) Inco          | me              | (B) Ex         | pens     | es                    | <u> </u>   | (C) Net                                     |
| 1 a               | Gross receipts or   | sales   |   | }                   |                   |                 |                |          |                       |  |   |
| p                 | Less returns and allowa                                     |   | c Balance ▶                                     | $\overline{}$       |                   | 5,000.          |                |          |                       | ļ  |   |
| 2                 |   |   | ule A, line 7)                                  | _2_                 |                   |                 |                |          |                       | -9 1   |   |
| 3                 | •   |   | 2 from line 1c                                  | 3                   |                   | 5,000.          | 011-1          | الاست    | 1 1 1                 | <b> </b>   | 6,000.                                      |
| 4a                |   |   | ttach Schedule D)                               | 4a                  |                   |                 |                |          |                       | - 4 A  |   |
| b                 | - ,   |   | Part II, line 17) (attach Form 4797)            | 4b                  |                   |                 | 50             | 0 0      | 7 7                   | <u>, 3</u>                                       | <b></b>                                     |
| С                 | •   |   | rusts   | 4c                  |                   |                 | - 11VI         | 4        | <u> </u>              | رائه ا   | , 11  |
| 5                 |   |   | ps and S corporations (attach statement)        |                     |                   |                 | 2 3            |          | 10.0                  |  | <u> </u>                                    |
| 6                 |   |   |   | 6                   |                   |                 | OG             |          | 3/1/1                 |  |   |
| 7                 | Unrelated debt-fi   | nanced in   | come (Schedule E)                               | 7                   |                   |                 |                |          |                       | -  |   |
| 8                 | -   |   | nts from controlled organizations (Schedule F)  | 8                   |                   |                 |                |          |                       | <u> </u>   |   |
| 9                 |   |   | 1(c)(7), (9), or (17) organization (Schedule G) |                     |                   |                 |                |          |                       | ļ  |   |
| 10                |   |   | ncome (Schedule I)                              | 10                  |                   |                 |                |          |                       | <del> </del> -                                   |   |
| 11                |   |   | lule J)   | 11                  |                   |                 |                |          |                       | <del> </del>                                     |   |
| 12<br>213         | `   |   | tions, attach schedule)                         | 12                  |                   | C 000           |                |          |                       |  | <u> </u>                                    |
|                   |   |   | ough 12   |                     |                   | 6,000.          | aduationa      | \ /E-    | vacati                | ior cont   | 6,000.                                      |
| ş Par             |   |   | •   |                     |                   |                 |                | ) (⊏     | хсергі                | or com   | noutions,                                   |
| =<br>=            |   |   | be directly connected with t                    |                     | ireiated busii    | iess inco       |                |          | 144                   | 1  |   |
| <u></u>           |   |   | directors, and trustees (Schedule K)            |                     |                   |                 | 2. K.          | ٠.       | . 14                  | <del> </del>                                     |   |
| )15<br>~16        | Salaries and wage   | es  |   |                     |                   | 11 1            | D ( )          | ٠.       | 1                     | -  | 1,024.                                      |
| ີ 16<br>-<br>ີ 17 | Repairs and mair  | iteriarice  |   |                     | ن ن               | <i>)</i> + -6 - |                | • •      | . 16                  | <del> </del>                                     | 1,024.                                      |
| 18                |   |   |   |                     |                   |                 |                |          |                       | <del> </del>                                     |   |
| 19                |   |   |   |                     |                   |                 |                |          |                       | 1  | 17.   |
| 20                |   |   | See instructions for limitation rules)          |                     |                   |                 |                |          |                       | <del>                                     </del> |   |
| 21                |   | -   | 4562)   |                     |                   | 1               |                | ٠.       |                       | <del> </del>                                     |   |
| 22                |   |   | on Schedule A and elsewhere on re               |                     |                   |                 |                |          | 22b                   | l  |   |
| 23                | •   |   | · · · · · · · · · · · · · · · · · · ·           |                     | <del>-</del>      |                 |                |          |                       | <del>                                     </del> |   |
| 24                |   |   | compensation plans                              |                     |                   |                 |                |          |                       |  |   |
| 25                |   |   | s   |                     |                   |                 |                |          | 1                     | 1  |   |
| 26                |   |   | Schedule I)                                     |                     |                   |                 |                |          |                       | <del>                                     </del> | ·   |
| 27                |   |   | chedule J)                                      |                     |                   |                 |                |          | _                     |  |   |
| 28                |   |   | schedule)                                       |                     |                   |                 |                |          | _                     | <del>                                     </del> |   |
| 29                |   |   | es 14 through 28                                |                     |                   |                 |                |          |                       | 1  | 1,041.                                      |
| 30                |   |   | ple income before net operating                 |                     |                   |                 |                |          |                       | 1  | 4,959.                                      |
| 31                |   |   | on (limited to the amount on line 30            |                     |                   |                 |                |          |                       | 1  |   |
| 32                |   |   | e income before specific deduction              |                     |                   |                 |                |          | _                     | 1  | 4,959.                                      |
| 33                |   |   | ally \$1,000, but see line 33 instruc           |                     |                   |                 |                |          |                       | <del>                                     </del> | 1,,000.                                     |
| 34                |   |   | ble income. Subtract line 33 fr                 |                     |                   |                 |                |          |                       | 1  | ¥   |
|                   |   |   | line 32   |                     |                   | •               |                |          | ′ J                   | 1  | 3,959.                                      |
| For F             | Paperwork Reduct  | tion Act N  | Notice, see instructions                        |                     |                   |                 |                |          |                       | F  | orm <b>990-T</b> (2016                      |
| bX274             | 01000<br>54L1EY 25  | 02  |   | V 1                 | 6-7.6F            |                 | 43476          | ſ        | Λ                     |  | PAGE  |

|             | here ▶   |   |   |                              |               |                                  |                     |              |  |  |  |
|-------------|--|---|---|------------------------------|---------------|----------------------------------|---------------------|--------------|--|--|--|
| 52          | During t   | During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?   |   |                              |               |                                  |                     |              |  |  |  |
|             | If YES, see instructions for other forms the organization may have to file |   |   |                              |               |                                  |                     |              |  |  |  |
| 53          | Enter th   | e amount of tax-exempt interest receive   | ed or accrued during the tax ye   | ar <b>▶</b> \$               |               |                                  |                     |              |  |  |  |
| Sigr<br>Her | e Lucia  | nder penalties of penjury, I declare that I have on the correct and complete Declaration of preparer (of the correct and complete Declaration of preparer (of the correct and complete Declaration of the correct and correct | examined this return, including acconther than taxpayer) is based on all inform | nation of which preparer has | any knowledge | May the IRS with the prep        | discuss<br>parer st | this return  |  |  |  |
|             | arer   | Print/Type preparer's name  WHITNEY E. BLAIR  Firm's name ► KPMG LLP  | Preparer's synature &   | Plaw Date 01/09,             | /2018 se      | Check if PTIN self-employed P01: |                     | 26647<br>207 |  |  |  |
| use         | Only   |   |   |                              |               |                                  |                     |              |  |  |  |

Firm's address ▶ 1676 INTERNATIONAL DRIVE, STE. 1200, MCLEAN, VA 22102

Form 990-T (2016)

703-286-8000

JSA

Phone no

| orm 990-1 (2016)  |  |                                       | ··· - '       |   |  |   |                   |                                   |        | age 3 |
|---|--|---------------------------------------|---------------|---|--|---|-------------------|-----------------------------------|--------|-------|
| Schedule A - Cost of Go   | ods Sold. En   | ter method                            | d of inventor | y valuation                                       | <b>&gt;</b>                                      |   |                   |                                   |        |       |
| 1 Inventory at beginning of ye  |  | 6                                     | Inventory     | at end of yea                                     | r  | 6   |                   |                                   |        |       |
| 2 Purchases   | 2  |                                       | 7             | 7 Cost of   | goods sol  | d. Subtract line  |                   |                                   |        |       |
| 3 Cost of labor   |  |                                       |               | 6 from  | line 5 En  | ter here and in   |                   |                                   |        |       |
| la Additional section 263A costs  |  |                                       |               | Part I, line                                      | 2  |   | 7                 |                                   |        |       |
| (attach schedule)   | 4a   |                                       | 8             |   |  | section 263A (w   |                   |                                   |        | No    |
| <b>b</b> Other costs (attach schedul  |  | property                              | produced      | or acquired for                                   | resale) apply                                    |   |                   | $\top$                            |        |       |
| 5 Total. Add lines 1 through  |  |                                       |               | to the org  | anization?.                                      | <u> </u>  | <u></u>           | <u> </u>                          |        | X     |
| Schedule C - Rent Income  | (From Real P   | roperty a                             | nd Persona    | al Property                                       | Leased V   | ith Real Proper   | ty)               |                                   |        |       |
| (see instructions)  |  |                                       |               |   |  |   |                   |                                   |        |       |
| . Description of property   |  |                                       |               |   |  |   |                   |                                   |        |       |
|   |  |                                       |               |   |  |   |                   |                                   |        |       |
| 1)  |  |                                       |               |   | ·-·  |   |                   | <del></del>                       |        |       |
| 2)<br>3)  |  |                                       |               |   |  |   |                   |                                   |        |       |
| 4)  |  |                                       |               |   |  | <del></del>   |                   |                                   |        |       |
| 4)  | 2 Pant reserv  | and or opposit                        |               |   |  |   |                   |                                   |        |       |
|   | 2. Rent receiv   |                                       |               |   |  |   |                   |                                   |        |       |
| (a) From personal property (if the<br>for personal property is more the<br>more than 50%) |  |                                       |               |   |  | tions directly connected with the income<br>mns 2(a) and 2(b) (attach schedule) |                   |                                   |        |       |
|   |  |                                       |               |   |  |   |                   |                                   |        |       |
| 2)  |  |                                       |               |   |  |   |                   |                                   |        |       |
| 3)  |  |                                       |               | • •   |  |   |                   |                                   | _      |       |
| 4)  |  |                                       |               |   | •  |   | _                 |                                   |        |       |
| - <i>'</i><br>Fotal   |  | Total                                 |               |   |  |   |                   |                                   |        |       |
| c) Total income. Add totals of co   | olumns 2(a) and 2(   |                                       |               |   |  | (b) Total deduction   |                   |                                   |        |       |
| nere and on page 1, Part I, line 6,   | , , ,  | •                                     |               |   |  | Enter here and on<br>Part I, line 6, colun                                      |                   |                                   |        |       |
| Schedule E - Unrelated De   |  |                                       | e instruction | ns)   |  | <del>''</del>   | `                 |                                   |        |       |
|   |  | · · · · · · · · · · · · · · · · · · · |               |   | 3 [  | eductions directly con  |                   |                                   | le to  |       |
| 1 Description of deb  | t-financed property  |                                       |               | 2 Gross income from or allocable to debt-financed |  |   |                   | ced property (b) Other deductions |        |       |
|   |  |                                       | property      |   | (a) Straight line depreciation (attach schedule) |   | (attach schedule) |                                   |        |       |
| 1)  |  |                                       |               |   |  |   |                   |                                   |        |       |
| 2)  |  |                                       |               | •   |  |   |                   |                                   |        |       |
| 3)  |  |                                       |               |   |  |   |                   | <del></del>                       |        |       |
| 4)  |  |                                       |               |   |  |   |                   |                                   |        |       |
| 4 Amount of average   | 5 Average adju   | sted basis                            |               |   |  |   |                   |                                   |        |       |
| acquisition debt on or  | of or alloca   |                                       |               | olumn<br>vided                                    |  | income reportable   |                   | Allocable ded<br>nn 6 x total (   |        |       |
| property (attach schedule)  | allocable to debt-financed debt-financed property property (attach schedule) (attach schedule) |                                       |               |   | (column  | 12 x column o)  |                   | 3(a) and 3(                       | b))    |       |
| 1)  |  |                                       |               | %   |  |   |                   |                                   |        |       |
| 2)  |  |                                       |               | %   |  |   |                   |                                   |        |       |
| 3)  |  |                                       |               | %   |  |   |                   |                                   |        |       |
| 4)  |  | · · · · · ·                           |               | %   | -  |   |                   |                                   |        |       |
|   |  |                                       |               |   |  | e and on page 1,  | Enter             | here and                          | on pag | je 1, |
|   |  |                                       |               |   |  | e 7, column (A).  |                   | , line 7, co                      |        |       |
| Totals  |  |                                       |               | _   |  |   |                   |                                   |        |       |
| Total dividends-received deduct   |  |                                       |               |   |  |   |                   |                                   |        |       |
| J.S. GITIGOTICO TOURING GEGUCT  |  |                                       |               | · · · · · · ·                                     | <u></u>  | · · · · · · · · · · · · · · · · · · ·   |                   |                                   | 00 T   |       |

Form **990-T** (2016)

| Schedule F - Interest, Annu               | ities, royalties   | <del>`</del>  |  | trolled Org   |  |  | Olis (see  | ilisti detions)   |   |  |
|---|--|---|--|---|--|--|--|---|---|--|
| 1' Name of controlled organization        | 2 Employer Identification numb                                       | ei i  | 3 Net unrelated inc<br>(loss) (see instruction |   | l  | of specified<br>nts made                         | ıncluded   | column 4 that is<br>in the controlling<br>on's gross income | 6 Deductions directly connected with income in column 5                         |  |
| (1)                                       |  |   |  |   |  |  |  |   | <del> </del>  |  |
| (2)                                       |  |   |  |   |  |  | ļ <u>.</u>   |   | +   |  |
| (3)                                       |  |   |  |   | <del> </del>   |  |  |   | <del> </del>  |  |
| (4) Nonexempt Controlled Organization     | ations   |   |  |   | <u></u>  |  | L  | <del></del>   | <del></del>   |  |
| Nonexempt Controlled Organiza             | 8. Net unrelated in  | come  | 9 To   | otal of specific  | ad   | 10 Pa  | t of column  |   | 11 Deductions directly  |  |
| 7 Taxable Income                          | (loss) (see instruct   |   |  | yments made   |  |  | ed in the cor<br>ation's gross   | ntrolling co  | onnected with income in column 10   |  |
| (1)                                       |  |   |  |   |  |  |  |   |   |  |
| (2)                                       |  |   |  |   |  |  |  |   |   |  |
| (4)                                       |  | <del></del>   |  |   |  |  |  |   |   |  |
| Totals                                    | come of a Sec  | tion 501/c  | · · · · · · · · · · · · · · · · · · ·          | 9) or (17   | ▶  | Enter  <br>Part I                                | columns 5 a<br>nere and on<br>line 8, colum  | page 1, E   | Add columns 6 and 11<br>nter here and on page 1,<br>art I, line 8, column (B)   |  |
| Schedule O - Investment in                | come or a occ  | 11011 30 1(0  | 7(1), (  | 3 Deduc   |  | <u> </u>   |  | asides  | 5. Total deductions   |  |
| 1 Description of income                   | 2 Amount of  | ıncome  | ļ  | directly connected<br>(attach schedule)                                 |  |  |  | schedule)   | and set-asides (col 3 plus col 4)   |  |
| <u>(1)</u><br>(2)                         |  |   | <del> </del>                                   |   |  |  | <del></del>  |   | <del> </del>  |  |
| (3)                                       | <del></del>  |   | <del> </del>                                   |   |  |  |  |   |   |  |
| (4)                                       | <del></del>  |   | 1  |   |  |  |  |   |   |  |
| Totals ▶ Schedule I - Exploited Exe       | Enter here and Part I, line 9, or                                    | olumn (A)   | er Tha   | n Advert  | ising In   | come (s  | see instru   | ctions)   | Enter here and on page 1<br>Part I, line 9, column (B)                          |  |
| Description of exploited activity         | 2 Gross<br>unrelated<br>business income<br>from trade or<br>business | 3 Expens<br>directly<br>connected<br>production<br>unrelate<br>business ind | es<br>with                                     | 4 Net incor<br>from unrela<br>or business<br>2 minus co<br>If a gain, c | t income (loss) unrelated trade siness (column tus column 3) gain, compute 5 through 7  5 Gross income from activity that is not unrelated business income  6. Expenses attributable to column 5 |  | 7. Excess exempt<br>expenses<br>(column 6 minus<br>column 5, but not<br>more than<br>column 4) |   |   |  |
| (1)                                       |  |   |  |   |  |  |  |   |   |  |
| (2)                                       |  |   |  |   |  | <del></del>                                      |  |   |   |  |
| (3)                                       |  |   |  |   |  |  |  |   |   |  |
| (4)                                       |  |   |  |   |  |  |  |   |   |  |
| ·   | Enter here and on page 1, Part I, line 10, col (A)                   | Enter here a page 1, Pa line 10, col  | arti,  |   |  | Enter here and<br>on page 1,<br>Part II, line 26 |  |   |   |  |
| Schedule J - Advertising Income From Peri |  |   |  | deted Be  |  |  |  |   |   |  |
| Part I Income From Peri                   | odicais Report   | eu on a Co  | orisoni  | ualeu ba  | 515  |  |  | T   |   |  |
| 1 Name of periodical                      | 2 Gross<br>advertising<br>income                                     | 3 Directions advertising  | - 1  | 4. Adver<br>gain or (lo<br>2 minus c<br>a gain, co<br>cols 5 thr        | oss) (col 5 (col 3) If compute   |  | Circulation income 6. Readers costs  |   | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |  |
| (1)                                       |  |   |  |   |  |  |  |   |   |  |
| (2)                                       |  |   |  |   |  |  |  |   |   |  |
| (3)                                       |  |   |  |   |  |  |  |   |   |  |
| (4)                                       |  |   |  |   |  |  |  |   |   |  |
| Totals (carry to Part II, line (5))       |  | <br>  |  |   |  |  |  |   | Form <b>990-T</b> (2016   |  |

JSA

6X2743 1 000 54L1EY 2502

| Part II Income From Per<br>2 through 7 on a l |  |                            | rate Basis (For e  | each periodical                                  | listed in Part II   | , fill in columns   |
|---|--|----------------------------|--|--|---------------------|---|
| Name of periodical                            | 2 Gross<br>advertising<br>income                   | 3 Direct advertising costs | 4 Advertising<br>gain or (loss) (col<br>2 minus col 3) If<br>a gain, compute<br>cols 5 through 7 | 5 Circulation income                             | 6. Readership costs | 7 Excess readership costs (column 6 minus column 5, but not more than column 4) |
| (1)   |  |                            |  |  |                     |   |
| (2)   |  |                            |  |  |                     |   |
| (3)   |  |                            |  |  |                     |   |
| (4)   |  |                            |  | <u> </u>   |                     | <b> </b>  |
| Totals from Part I ▶                          |  |                            |  |  |                     | ļ   |
|   | Enter here and on page 1, Part I, line 11, col (B) |                            |  | Enter here and<br>on page 1,<br>Part II, line 27 |                     |   |
| Totals, Part II (lines 1-5) ▶                 |  |                            | <u> </u>   |  |                     | <u> </u>  |
| Schedule K - Compensatio                      | n of Officers, D                                   | irectors, and Tr           | ustees (see instr  | uctions)   |                     |   |
| 1 Name  | 2  | Title                      | 3 Percent of time devoted to business  | d to 4 Compensation attributable to              |                     |   |
| (1)   |  |                            | %  |  |                     |   |
| (2)   |  |                            | %  |  |                     |   |
| (3)   |  |                            | %  |  | ·- <del>-</del>     |   |
| * **  |  |                            |  | ll   |                     |   |

JSA

6X2744 1 000 54L1EY 2502

Total. Enter here and on page 1, Part II, line 14..........