Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

benefit trust or private foundation) The organization may have to use a copy of this return to satisfy state reporting requirements OMB No 1545-0047

Open to Public Inspection

ΑI	or th	e 2006 calenda		year beginning	<u>7/1/2006</u>	, and	ending		/2007
В	Check	ıf applicable	Please C Na	ame of organization			DE	mployer	identification number
ر ا	Addres	s change	use IRS ASS	ociated Catholic Cha	anties, Inc.		52-0	591538	3
	: Name	change	label or Nu	umber and street (or P O t	ox if mail is not delivered to st	reet address)	Room/suite E To	elephone	number
<u> </u>	i Initial r		type.	0 0			200 442	E40 22	92
 	iiiiiiai i	etuiri		6 Greenspring Drive				<u>519-23</u>	
	Final re	eturn	Specific Ci	ty or town	State or co	untry ZI	P+4	ccountin	g method. Cash X Accrual
T	Amend	ed return	tions Time	onium	MD	2	1093 L	_Other (specify) ►
13	Applica	ition pending			4947(a)(1) nonexempt charit			cable to	section 527 organizations
لتب		, , , , , , , , , , , , , , , , , , ,			edule A (Form 990 or 990-EZ		1		for affiliates? Yes X No
G \	<u>.</u> Vebsit	e > www.	cc-md.org				1		er of affiliates
6							H(c) Are all affilia		
Q) Vraani	zation type (chec	t only one)	X 501(c)(3)	◀ (insert no) 4947(a)(1)	or	ľ		See instructions)
- {}			1				,		•
	∯eck I				orting organization and its gros		L .		um filed by an organization
		s are normally not return, be sure to		· ·	l, but if the organization choose	es	covered by		
,	o ilie a	return, be sure to	ille a complete it	xum			I Group Exer	nption Nu	mber ► 0928
	-						M Check	► if	the organization is not required
L	Gross	receipts Add li	nes 6b, 8b, 9b,	, and 10b to line 12	▶ 1	46,289,375	to attach So		m 990, 990-EZ, or 990-PF)
Pai	t i	Revenue.	Expenses.	and Changes in I	Net Assets or Fund			ctions.)
	1			its, and similar amou	•		,		,
	1 '	a Contribution			ins received.	1a		nl l	
-1				it included on line 1a		1b	16,700,61	취	
1				not included on line 1		1c	2,121,06		
				ns (grants) (not includ		1d	2,572,28		
•				igh 1d) (cash \$	21,393,961 noncash		0).	1e	21,393,961
	2				ent fees and contracts ('II. line 93)	2	72,421,060
	3		p dues and a				, , .	3	0
	4			temporary cash inve	stments .			4	277,846
	5		-	om securities	. , .			5	1,856,359
	6 8	Gross rents			•	6a	155,81	4	
	1	L ess rental	l expenses		•	6b]	
	(ss) Subtract line 6b f	from line 6a		•	6c	155,814
Q.	7		tment income	•)	7	0
Revenue	8			s of assets other	(A) Securities	J	(B) Other	_	
Şe	Ι.	than invente	•		. 50,020,332	 	3,32		
				and sales expenses			179,43		
•		Gain or (los			(A) and (B)	/ 8c	-176,10		2 004 820
1	9	_		oine line 8c, columns	any amount is from gamin	a chock bor		8d	2,904,820
		Gross revei			347,913 of	y, check her			
6.08	1_		is reported or	<u></u>		9a	3,91	2	
Ö	111	reguee	expenses of	her than fundraising		9b	153,24		
SCANNED	110	Net-income	or (loss) from	n special events. Su	btract line 9b from line	9a		9c	-149,330
Z	10a	Gross sales	s of inventory	න්ess returns and all	owances	10a		0	
\mathbf{Z}	8	LessEcos	olos 2000 k	위		10b		0 _]	
Щ		Gross profit of	or (loss) from \$	ales of inventory (attac	h schedule) Subtract line	10b from line	e 10a	10c	0
U	1 1	Other-rever	μe (from Par	†γ/II, line 103) .				11	156,765
72	12_	Total lever	nue Add line	<u>s</u> 1e, 2, 3, 4, 5, 6c, 7	, 8d, 9c, 10c, and 11			12	99,017,295
	13			line 44, column (B))				13	80,649,357
MAR ASSERTION SOLUTION	14			al (from line 44, colui	mn (C))			14	9,030,848
36	15					•		15	1,342,369
_ ¥	16			•				16	0
ğ	17			es 16 and 44, colum			<u> </u>	17	91,022,574
≅	18			e year Subtract line				18	7,994,721
455	19				year (from line 73, colui	nn (A))		19	92,055,322
et ,	20				s (attach explanation)			20	2,287,307
	21	Net assets	or fund balan	ces at end of year. (Combine lines 18, 19, a	nd 20		21	102,337,350

Part						
		(1) Hone.	хеттрі спантавіе пі			arucions.)
	Do not include amounts reported on line		(A) Total	(B) Program	(C) Management and general	(D) Fundraising
	6b, 8b, 9b, 10b, or 16 of Part I			services	and general	
22 a	Grants paid from donor advised funds (attach schedule)					
	(cash \$ 187,650 noncash \$ 0)					
	If this amount includes foreign grants, check here ▶	22a	187,650	187,650		
22 b	Other grants and allocations (attach schedule)					
	(cash \$ 34,987 noncash \$ 0)					
	If this amount includes foreign grants, check here ▶	22b	34,987	34,987		
23	Specific assistance to individuals (attach		,			
	schedule)	23	838,409	838,409	*	
24	Benefits paid to or for members (attach					
	schedule)	24	o			
25 a	Compensation of current officers, directors,				An article service service organic organic	and the publishment of the state of the stat
	key employees, etc. listed in Part V-A (attach					
	schedule)	25a	0	0	0	0
þ	Compensation of former officers, directors,					. —
	key employees, etc. listed in Part V-B (attach					
	schedule)	25b	0	0	.0	0
С	Compensation and other distributions, not included above, to					
	disqualified persons (as defined under section 4958(f)(1)) and					
	persons described in section 4958(c)(3)(B) (attach schedule)	25c	0	0	0	0
26	Salaries and wages of employees not included	[[
	on lines 25a, b, and c	26	51,091,691	45,086,030	5,272,866	732,795
27	Pension plan contributions not included on					
00	lines 25a, b, and c	27	3,346,180	2,850,549	436,875	58,756
28	Employee benefits not included on lines		7 000 000	0.000.070	0.0.150	
20	25a – 27 .	28	7,380,839	6,696,973	 	73,707
29	Payroll taxes	29 30	4,038,063	3,621,148	366,999	49,916
30 31	Professional fundraising fees Accounting fees	31	122 505	16.240	440 207	······································
32	Legal fees	32	132,585 176,044	16,218 28,058		
33	Supplies	33	4,588,501	4,464,318		22 421
34	Telephone	34	683,824	586,409		32,431 9,209
35	Postage and shipping	35	202,401	87,303		9,209 84,471
36	Occupancy	36	4,485,062	4,024,261	420,691	40,110
37	Equipment rental and maintenance	37	608,204	465,584	106,729	35,891
38	Printing and publications	38	751.892	279,341		198,261
39	Travel	39	128,749	108,340		5,687
40	Conferences, conventions, and meetings .	40	680,004	433,254		110,889
41	Interest	41	954,910	832,558		,
42	Depreciation, depletion, etc. (attach schedule) .	42	2,599,185	2,377,306		9,233
43	Other expenses not covered above (itemize).		, ,			
i a	Transportation	43a	1,498,228	1,451,993	33,382	12,853
b	Professional fees & services	43b	3,003,112	2,861,336	273,387	-131,611
С	Boarding payments-foster homes	43c	1,731,158	1,731,158	0	0
	Temporary help form agencies	43d	1,013,424	847,091	166,333	0
е	Recruitment costs	43e	381,194	298,447	77,871	4,876
f	Miscellaneous	43f	486,278	440,636	30,747	14,895
g		43g	0	0	0	0
44	Total functional expenses. Add lines 22a					
	through 43g. (Organizations completing					
	columns (B)-(D), carry these totals to lines					
	13–15)	44	91,022,574	80,649,357	9,030,848	1,342,369
Joint (Costs. Check ▶ If you are following SOP 98-2.					
Are any	joint costs from a combined educational campaign and fundraising so	licitation	reported in (B) P	rogram services?	▶[Yes XNo
lf "Yes	" enter (i) the aggregate amount of these joint costs \$	0	, (ii) the amount a	llocated to Progra		_
	amount allocated to Management and general \$		d (iv) the amount			'

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular-organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? ► Social services agency serving Balto.City and 9 Md counties	Program Service Expenses
All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	(Required for 501(c)(3) and (4) orgs , and 4947(a)(1) trusts, but optional for others)
a Family & Children's Services-provides a continuum of mental health and special education services to children, their families ranging from counseling to intensive residential treatment. Provided education (285Children) and residential (272 children) services to moderately to severely emotionally disturbed children. Provide Head Start services to 556 children. Served 160 children in 95 therapeutic foster families provided therapeutic foster care services to 20 medically fragile children, and certified 12 new families for placement of foster children. Provide outpatient mental health service to 3,943 individuals/families including 672 children in psychiatric crisis. (Grants and allocations \$ 220,598) If this amount includes foreign grants, check here because of the Services of provide medical adult day services for 103 participants, assisted living services for 80 frail seniors with low to moderate incomes; referral and counseling for over 2000 older adults and caregivers,	49,309,279
and management of a 162 bed comprehensive care nursing home with 116 beds for long-term care, 16 beds for skilled rehabilitative care and 30 beds for Alzheimer's care.	
(Grants and allocations \$) If this amount includes foreign grants, check here ▶ □	3,313,453
c Community Services - provides shelter, transitional housing and/or job readiness or life skills workshops to 2,000 homeless individuals or families. Served over 250,000 meals to families and individuals in need averaging 683 people per day. Provide outreach services to individuals (approximately 30,000). Provided 43 formerly homeless men with job skills training, employment and independent living assistance with a 100% successful job placement record. Assisted 1,100 women and children with day shelter, case management, life skills workshops, resources and referrals, shower and laundry facilities and meals. (Grants and allocations \$ 2,039) If this amount includes foreign grants, check here	9,640,156
d Services to the Disabled-provides an array of services and support for people with developmental disabilities in and 3 day programs. Provided residential services to 233 individuals including 24 hour supervised care, assisted living and specialized care for the frail and elderly. Provided vocational services to 160 individuals through supervised work environments, pre-vocational and vocational training, and supported employment.	9,040,130
Served 82 individuals with habilitation activities including occupational, speech, and physical therapies, counseling, medical care and retirement programs. (Grants and allocations \$) If this amount includes foreign grants, check here	17,131,070
e Other program services (attach schedule) Housing Services-develope/manage 1517 low income housing units for seniors	
(Grants and allocations \$ 0) If this amount includes foreign grants, check here	1,255,399
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	80,649,357
,	Form 990 (2006)

Form **990** (2006)

Pa	rt IV	Balance Sheets (See the instructions.)					
_	Note:	Where required, attached schedules and amounts with column should be for end-of-year amounts only	in the de	escription	(A) Beginning of year		(B) End of year
	45	Cash—non-interest-bearing				45	
	46	Savings and temporary cash investments .		[10,851,592	46	9,387,410
	47 a	Accounts receivable	47a	9,467,918			
	b	Less allowance for doubtful accounts	47b	175,395	8,863,192	47c	9,292,523
	48 a	Pledges receivable	48a	9,448,661			
	1	Less allowance for doubtful accounts .	48b	802,825	11,386,931	48c	8,645,836
	49	Grants receivable			, ,	49	
	50 a	Receivables from current and former officers, dire	ectors,	trustees, and			
		key employees (attach schedule)			0	50a	0
	b	Receivables from other disqualified persons (as defined	d under	section			
w		4958(f)(1)) and persons described in section 4958(c)(3)		50b			
Assets	51 a	Other notes and loans receivable (attach					
As		schedule) .	51a	0		}	,
. ·	b	Less allowance for doubtful accounts	51b	0	. 0	51c	0
	52	Inventories for sale or use			22,392	52	18,874
	53	Prepaid expenses and deferred charges		<u></u> [1,404,655		1,356,973
	54 a	Investments—publicly-traded securities .	. ▶	Cost X FMV	50,490,876	54a	55,655,113
	∖ b	Investments—other securities (attach schedule)	•	Cost FMV	0	54b	- 0
	1	Investments—land, buildings, and	,				
	١.,	equipment basis	55a	0			
	b	Less: accumulated depreciation (attach					. ,
		schedule)	55b	0	0	55c	0
	56	Investments—other (attach schedule)			985,179	56	985,179
	57 a	Land, buildings, and equipment basis	57a	87,937,636			
	b	Less: accumulated depreciation (attach					
	1	schedule)	57b	28,002,610	47,786,268		59,935,026
	58	Other assets, including program-related investme	ents		4,232,973	58	4,303,222
		(describe ► See attached statement					
	59	Total assets (must equal line 74) Add lines 45 to	hrough	58 .	136,024,058		149,580,156
	60	Accounts payable and accrued expenses		• • -	12,817,470		13,984,322
	61	Grants payable		-	0.440.700	61	
	62	Deferred revenue		· ;	6,148,733	62	6,253,987
ĘŠ.	63	Loans from officers, directors, trustees, and key extend to	employ	ees (attach			•
-		schedule)		• •	0	-	0
Liabil		Tax-exempt bond liabilities (attach schedule)		,	16,085,000		15,415,000
_	65	Mortgages and other notes payable (attach sched		· ,	7,392,957		9,098,171
	63	Other liabilities (describe See attached state	eineiir	··	1,524,576	65	2,491,326
	66	Total liabilities. Add lines 60 through 65 .	•		43,968,736	66	47,242,806
	Orga	inizations that follow SFAS 117, check here	X an	d complete lines		.	
		67 through 69 and lines 73 and 74.		·			
ХR	67	Unrestricted			63,661,819	67	72,534,382
ž	68	Temporarily restricted			28,211,503	68	29,620,968
ala	69	Permanently restricted		[182,000	69	182,000
9	Orga	inizations that do not follow SFAS 117, check h	ere	▶ and			
Net Assets or Fund Balances		complete lines 70 through 74.					
r.	70	Capital stock, trust principal, or current funds		70			
tsc	71	Paid-in or capital surplus, or land, building, and e				71	
SSe	72	Retained earnings, endowment, accumulated inc		-		72	
Ą	73	Total net assets or fund balances. Add lines 67		-			
2		70 through 72 (Column (A) must equal line 19 a	nd colu	mn (B) must			100 00= 0==
		equal line 21)			92,055,322		102,337,350
	74	Total liabilities and net assets/fund balances.	Add lin	es oo and /3	136.024.058	/4	149.580.156

Part I		nciliation of Revenue per ctions.)	Audited Financial S	tatements Wi	th Revenue per Re	turn (See the N/A
а		e, gains, and other support pe	r audited financial state	ments		Та	T
ь .	Amounts inc	luded on line a but not on Part	L line 12:				
1		ed gains on investments		. 1	b1		
2		vices and use of facilities			b2	1	
3		of prior year grants		<u> </u>	b3	7	
4	Other (speci			-		7	
					b4 (ol	
	Add lines b1	through b4 .				Б	0
С		b from line a .				C	0
d	Amounts inc	luded on Part I, line 12, but no	t on line a:				-
1		expenses not included on Part		1	d1		
2	Other (speci-			_		1	
_	(d2 (ol	
	Add lines d1					ď	l o
е		ue (Part I, line 12). Add lines c	and d			е	0
Part I		nciliation of Expenses pe		Statements W	ith Expenses per F	Retur	n N/A
а		ses and losses per audited fina			The particular particu	а	T
b b	•	luded on line a but not on Part		•		"	
1		vices and use of facilities	1, 1110 11.	1	b1		
2		ljustments reported on Part I, I	 	-	b2	┥ ・	
3		rted on Part I, line 20		_	b3	┪	
4	Other (specif			<u>}</u>	03	-	
7	Other (speci				b4	ا	
•	Add lines b1			L	D4 \	겍 <u>-</u>	۱ ,
_ /t		b from line a .	•	•		b	0
d			tan lina ai			С	0
-		luded on Part I, line 17, but no expenses not included on Part		1	ا مد		
	Other (specif	• `			d1	┥	,
. ~	Other (specia				d2	\downarrow	
	Add lines d1				uz	4	
•		ses (Part I, line 17). Add lines				d e	0
Dort V				Janaan (Lister)			0
Part V		ent Officers, Directors, Tru		•	•		
C + '-	uustee	e, or key employee at any time	1				ructions)
, ,	(A)	Name and address	(B) Title and average hours per	(C) Compensation (If not paid,	(D) Contributions to emp benefit plans & defen		(E) Expense account
			week devoted to position	enter -0)	compensation plan		and other allowances
Name	Harold A. Sn	nith Str 320 Cathedral Stree	Title Secretary				
	Baltimore	ST MD zip 21201	Hr/WK 40		ol	0	0
	James Gabri						<u> </u>
	Baltimore	ST MD zip 21201	Hr/WK 40		ol ·	0	0
		liam H Str 320 Cathedral Stree	 				
	Baltimore	ST MD zip 21201	Hr/WK 1		0	0	0
		rombε Str 320 Cathedral Stree			<u> </u>		
- -			· .		م	0	
	Baltimore Cluster B. D.	ST MD ZIP 21201	Hr/WK 1		0	0	0
		aly Str 320 Cathedral Stree	1				
	Baltimore	ST MD zip 21201	Hr/WK 1		0 .	0	0
		onahui Sir 320 Cathedral Stree	Title Treasurer				
	Baltimore	ST MD ZIP 21201	Hr/WK 1		0	0	0
		Serndt <u>Str</u> 320 Cathedral Stree	Title Attorney				
City	Baltimore	ST MD ZIP 21201	Hr/WK 1		0	0	0
Name	William J Ba	aird, III sir 320 Cathedral Stree	Title Trustee				
· City	Baltimore	ST MD zip 21201	Hr/WK 1	<u> </u>	0	0	0
Name	James M Ba	annant Str 320 Cathedral Stree	Title Trustee				
	Baltimore	ST MD zip 21201	Hr/WK 1		ol	0	0
		Siscioti Str 320 Cathedral Stree					-
	Baltimore	ST MD _ zip 21201	Hr/WK 1		o	0	n
			1		~1 <u></u>		Form 990 (2006)
							1 Unit 3 3 4 (2000)

Form 9	90 (2006) Associated Catholic Charities, Inc	•		52-0591538			Page 6
Part	V-A Current Officers, Directors, Tru	stees, and Key Em	ployees (continue	ed)		Yes	No
75 a	Enter the total number of officers, directors, an	d trustees permitted to	vote on organizatı	on business at board			
	meetings	•		39			
b	Are any officers, directors, trustees, or key em	ployees listed in Form	990, Part V-A, or h	ighest compensated			
	employees listed in Schedule A, Part I, or high	est compensated profe	essional and other i	ndependent			
	contractors listed in Schedule A, Part II-A or II-	B, related to each other	er through family or	business		,	
	relationships? If "Yes," attach a statement that	identifies the individua	als and explains the	relationship(s)	75b		X
С	Do any officers, directors, trustees, or key emp	oloyees listed in Form	990, Part V-A, or hi	ahest			
	compensated employees listed in Schedule A,	Part I, or highest com	pensated professio	nal and other			
	independent contractors listed in Schedule A,						
	organizations, whether tax exempt or taxable,	that are related to the	organization? See	the instructions for			
	the definition of "related organization"				75c	-	X
	If "Yes," attach a statement that includes the ir	formation described in	the instructions.				
d	Does the organization have a written conflict o	f interest policy? .		<u>.</u>	75d	X	
Part	V-B Former Officers, Directors, Trustees,	and Key Employees	That Received Cor	mpensation or Other Bene	fits (If	any for	mer
	officer, director, trustee, or key employed	e received compensati	on or other benefits	(described below) during t	he vear	r. list th	nat
	person below and enter the amount of c						
		<i>.</i>	(C) Compensation	(D) Contributions to employee		Expens	
	(A) Name and address	(B) Loans and Advances	(if not paid,	benefit plans & deferred		nt and o	
			enter -0-)	compensation plans	all	owances	<u> </u>
Name	N/A Str		j .				
City							
	N/A Str		,				
City					-		
	N/A Ştr						
City							
	N/A Str						
City							
	N/A Str						
City	· · · · · · · · · · · · · · · · · · ·						
City	ST ZIP		-	-			
City			•				
Name					-		
City							
	N/A Str						
City							
	N/A Str						
City							
Part '		ions.)	<u> </u>			Yes	No
76	Did the organization make a change in its activ		nducting activities?	If "Yes." attach a			
	detailed statement of each change.				76		X
77	Were any changes made in the organizing or g	overnina documents t	out not reported to t	he IRS?	77		X
	If "Yes," attach a conformed copy of the chang	· ·	at not roported to t				
78 a	Did the organization have unrelated business of		or more during the	e year covered by			
	this return?	, σου πουπο στ φ τ,σον	o or more during an	s year covered by	78a	*****	X
, h	If "Yes," has it filed a tax return on Form 990-1	for this year?	•		78b	N/A	
79	Was there a liquidation, dissolution, termination		ction during the ve	ar2 If "Ves." attach	700	11//	
	a-statement	i, or substantial collic	cuon duning the ye	ai: ii i to, allatii	70		X
80 -	Is the organization related (other than by associated)	iation with a statewist	 a or nationwide e	· · ·	79		
oo a			•				
	common membership, governing bodies, truste	es, onicers, etc., to ar	iy other exempt or	nonexempt			
t.	organization?	Diagon	•	• •	80a	X	
b	If "Yes," enter the name of the organization \blacktriangleright			······			
		and check whethe	ritis 🔀 exempto	or nonexempt			
81 a	Enter direct and indirect political expenditures	(See line 81 instructio	ns).	81a]		j
b	Did the organization file Form 1120-POL for the	ıs year? .			81b		

b 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

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank

If "Yes," enter the name of the foreign country ▶

and Financial Accounts.

91b

No

X

Form 99	00 (2006)	Associated Catho	lic Charities	, Inc.		52-0591538	Page Page
Part \	Other Information (continued)						Yes No
С	At any, time during the calendar year, did the o	rganization mainta	in an office	outside	e of the United	States? 9	1c X
	If "Yes," enter the name of the foreign country						
92	Section 4947(a)(1) nonexempt charitable trust	s filing Form 990 ແ	n lieu of Fo	rm 104	1 —Check he	re.	. ▶
	and enter the amount of tax-exempt interest re	ceived or accrued	during the	tax year	r	▶ 92 N/A	_
Part \	•				<u> </u>		·
	Enter gross amounts unless otherwise	Unrelated busin			Excluded by sector	on 512, 513, or 514	(E)
ındıca:			T :	-		<u> </u>	Related or
	leo	(A)	(B)	, _	(C)	(D)	exempt function
93	Program service revenue	Business code	Amoun	` -	xclusion code	Amount	income
а	Program service revenue						5,763,48
b							
С							
d							
е							<u> </u>
f	Medicare/Medicaid payments						
g	Fees and contracts from government agencies						66,657,57
94	Membership dues and assessments						
95	Interest on savings and temporary cash investments						277,84
96	Dividends and interest from securities						1,856,35
97	Net rental income or (loss) from real estate						
	debt-financed property						141,83
	not debt-financed property	-			 ·	<u> </u>	13,98
.98	Net rental income or (loss) from personal property						
99	Other investment income	-					
100	Gain or (loss) from sales of assets other than inventory						2,904,82
101	Net income or (loss) from special events					ļ	-149,33
102	Gross profit or (loss) from sales of inventory						
103	Other revenue a primarily developer's fees			0		0	
b				0		0	
C				0	· · · · · · · · · · · · · · · · · · ·	0	1
d				0		0	
404	Cubiatel (edd colored (D) (D) and (E))	· · · ·	-	0		0	
104	Subtotal (add columns (B), (D), and (E))	· · · · · · · · · · · · · · · · · · ·		0		0	1
105 Noto:	Total (add line 104, columns (B), (D), and (E)) Line 105 plus line 1e, Part I, should equal the a	mount on line 12	Dord I			P	77,623,33
Part \				4.0			`
Line I	No. Explain how each activity for which income is of the organization's exempt purposes (other	reported in column i	(E) of Part VI	I contribu	uted importantly	to the accomplish	nment
	or the organization's exempt purposes (other	than by providing ful	us ioi sucri j	purposes	9).		
	see attached list						
Part I		ihsidiaries and	Disrenard	ed Ent	ities (See #	a instructions	 }
	(A)	(B)	<u> </u>	Ju Liit	ities (See ti	ic monucions.	
	Name, address, and EIN of corporation,	Percentage	of		C)	(D)	(E) End-of-year
	partnership, or disregarded entity	ownership inte	1 1	Nature of	factivities	Total income	assets
Belair	Senior Housing, Inc. 1966 Greenspring Drive B		0.00% Rent	tal		0	
	Ferry Road Apartments, Inc. 1966 Greenspring		0.00% Rent			0	T
	rk's Housing, Inc 1966 Greenspring Drive Baltin		0.00% Rent			0	
			%			0	
Part)	Information Regarding Transfers	Associated with		Benef	it Contracts	(See the instr	
	id the organization, during the year, receive any funds, dire						
			•	•			Yes XN
	id the organization, during the year, pay premiu If "Yes" to (b), file Form 8870 and Form 4720		rectly, on a	persona	ai benetit con	ract' .	Yes X N
1016.	11 163 to (b), 1116 FOITH 0070 and FOITH 4720	(SEE INSURCIONS)					- 000

Part	Information Regarding is a controlling organization			omplete only if the	organiz	ation
106	Did the reporting organization mal	ke any transfers to a cont	rolled entity as defined in se	ection 512(b)(13) of	Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer	Amount	(D) of trans	sfer
а	See attached schedule				9,54	15,234
b						
С						
	Totals	`			9,54	15,234
107	Did the reporting organization reco				Yes	No
	(A) Name, address, of each controlled entity	(B) Employer Identification Number	(C) Description of transfer		(D)	sfer
а	See attached schedule				9,63	34,229
b						
С			,			
	Totals		,		9,63 Yes	4,229 No
108	Did the organization have a bindin rents, royalties, and annuities desc		_	ing the interest,	res	X
Pleas Sign Here	Under penalties of penury, I declare that I has and belief, it is true, correct, and complete to significant support of officer James Gabriel Associations and complete to the significant support of the significant support sup	ave examined this return, including	ig accompanying schedules and stat n officer) is based on all information			dge
Paid Prepare	Type or print name and title Preparer's signature		Date Check if self-employed	Preparer's SSN o	r PTIN (See G	Gen Inst X)
Use Onl				Phone no		

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n), or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information—(See separate instructions.)

2006

6,870

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Baltimore, MD 21201

Total number of other employees paid over \$50,000 ▶

Supplementary information—(See Separate instructions.)

MUST be completed by the above organizations and attached to their Form 990 or 990-EZ

Employer identification number

Associated Catholic Charities, Inc.

52-0591538

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees									
(See page 2 of the instructions. List each one. If there are none, enter "None.")									
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances					
John Rusinko, 320 Cathedral Street	Division Director			_					
Baltimore, MD 21201	40	185,266	12,732	5,793					
Joseph H. O'Leary, 320 Cathedral Street	Physician								
Baltimore, MD 21201	40	<u> 184,3</u> 15							
Mark E. Greenberg (A), 320 Cathedral Street	Administrator		!						
Baltimore, MD 21201	40	176,952		7,392					
Mark J. Schulz, 320 Cathedral Street	Division Director								
Baltimore, MD 21201	40	173,495	12,378	3,449					
Angelo Boer, 320 Cathedral Street	Dir.of Development								

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Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services

(See page 2 of the instructions. List each one (wheth	<u>ner individuals or firms). If there ar</u>	e none, enter "None.")
(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
Ernst & Young LLP, 621 East Pratt Street		
Baltimore, MD 21202	CPA Firm	286,256
Cochran, Stephenson & Donkervoet, 323 West Camden Street Suite 700 Baltimore, MD 21201	OArchitects	239,315
Gallagher, Evelius & Jones, 218 N Charles Street Suite 400 Baltimore, MD 21201	Law Firm	230,759
Dimensional Health Care Services, 100 Owings Court, Suite 12 Reisterstown, MD 21136 Afghanistan	Nursing Services	214,045
Care Resources, Inc, 1026 Cromwell Bridge Road Baltimore, MD 21286	Occupational Therapy	136,805
Total number of others receiving over \$50,000 for professional services	6	

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services

(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
CAM Construction Co, Inc., 108 W Timonium Road, Suite 201		
Timonium, MD 21093	Construction contractor	8,544,182
Harkıns Builders, inc, 2201 Warwick Way		
Marriotsville, MD 21104	Construction contractor	2,384,163
L. H. Cranston, P O Box 1650		
Hunt Valley, MD 21031	Construction contractor	538,556
Securitas Security Services USA Inc., P.O. BOX 403412 Atlanta, GA 30384	Security guards/service	526,450
Overlea Caterers, 6809 Belair Road Baltımore, MD 21206	Caterer-congregate housing meals	275,476
Total number of other contractors receiving over \$50,000 for other services	8	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2006

(HTA)

Part	Statements About Activities (See page 2 of the instructions.)		Yes	No
1	During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities * Part III, Line 1 (Scl. (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)	1_1_	X	
	Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.			
2	During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions)			_
а	Sale, exchange, or leasing of property?	2a		x
b	Lending of money or other extension of credit?	2b	-	x
С	Furnishing of goods, services, or facilities?	2c		х
d	Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? See Part V Form 990	2d	X	
е	Transfer of any part of its income or assets?	2e	_	x
3 a	Did the organization make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how the organization determines that recipients qualify to receive payments)	_3a_	Х	
b	Did the organization have a section 403(b) annuity plan for its employees?	3b	х	
С	Did the organization receive or hold an easement for conservation purposes, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," attach a detailed statement	3c		х
d	Did the organization provide credit counseling, debt management, credit repair, or debt negotiation services?	3d		x
4 a	Did the organization maintain any donor advised funds? If "Yes," complete lines 4b through 4g If "No," complete lines 4f and 4g	4a	X	
b		4b		х
С	Did the organization make a distribution to a donor, donor advisor, or related person?	4c		Х
d	Enter the total number of donor advised funds owned at the end of the tax year			1
е	Enter the aggregate value of assets held in all donor advised funds owned at the end of the tax year		1,84 ⁻	1,923
f	Enter the total number of separate funds or accounts owned at the end of the tax year (excluding donor advised funds included on line 4d) where donors have the right to provide advice on the distribution or investment of			
	amounts in such funds or accounts			0
g	Enter the aggregate value of assets held in all funds or accounts included on line 4f at the end of the tax year			0

raitiv	Reason for Non-Private	Foundation	status (See pages 4 th	rough 7 of the	e instructions)
I certify that	at the organization is not a private f	oundation becaus	e it is: (Please check only O	NE applicable be	ox)	
5	A church, convention of churches	, or association of	f churches. Section 170(b)(1))(A)(ı)		
6	A school Section 170(b)(1)(A)(II).	(Also complete P	art V.)			
7	A hospital or a cooperative hospit	al service organiz	ation. Section 170(b)(1)(A)(ii	ıı)		
8	A Federal, state, or local government	nent or governmer	ntal unit Section 170(b)(1)(A)(v)		
9	A medical research organization of name, city, and state	operated in conjur	nction with a hospital Section	n 170(b)(1)(A)(iii). Enter the hos	pital's Country
10	An organization operated for the to (Also complete the Support School)			rated by a gover	nmental unit Se	ction 170(b)(1)(A)(iv).
11 a 🗌	An organization that normally reconstruction (170(b)(1)(A)(vi) (Also complete the			overnmental unit	t or from the gen	eral public Section
11 b	A community trust Section 170(b)(1)(A)(vı) (Also c	complete the Support Sched	iule ın Part IV-A)	
12 X	An organization that normally receipts from activities related to of its support from gross investme acquired by the organization after	ts charitable, etc., ent income and un	, functions—subject to certail irelated business taxable inc	n exceptions, ar ome (less sectio	nd (2) no more to on 511 tax) from	han 33 1/3% businesses
13	An organization that is not control requirements of section 509(a)(3)					e meets the
	Type I Ty	pe II	Type III-Functionally Integra	ated1	Гуре III-Other	
·	Provide the following infe	ormation about	t the supported organiza	ations. (See p	age 7 of the in	structions.)
	(a)	(b)	(c)		d)	(e)
Name(s)	of supported organization(s)		Type of	Is the su	•	Amount
		identification	organization		on listed in	of support
		number (EIN)	(described in lines	the sup		
		` ′	5 through 12		zation's	
			above or IRC		documents?	
			section)	90009		
				Yes	No	
	- · · · · · · · · · · · · · · · · · · ·		-		140	
					<u> </u>	
	<u> </u>				-	
Total				L	▶	
. 0.141	· · · · · · · · · · · · · · · · · · ·	• •	• • •	<u>· · · · · · · · · · · · · · · · · · · </u>		0
14	An organization organized and op	erated to test for p	oublic safety Section 509(a)	(4) (See page 7	of the instructio	ns)

	e: You may use the worksheet in the instructions	•	•	•			•
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2004	(c) 2003	(d) 20		(e) Total
15	Gifts, grants, and contributions received (Do	(4) = 000	(4, 200)	(0) 2000	(-,	-	(0) (0.0.
	not include unusual grants. See line 28.)	99,639,587	87,188,393	98,946,014	84.75	50,098	370,524,092
16	Membership fees received						0
17	Gross receipts from admissions, merchandise						
	sold or services performed, or furnishing of						
	facilities in any activity that is related to the						
	organization's charitable, etc , purpose						0
18	Gross income from interest, dividends,						
	amounts received from payments on securities						
	loans (section 512(a)(5)), rents, royalties, and						
	unrelated business taxable income (less						
	section 511 taxes) from businesses acquired	ŀ					
	by the organization after June 30, 1975	1,527,427	1,330,919	922,479	87	9,698	4,660,523
19	Net income from unrelated business						
	activities not included in line 18						0
20	Tax revenues levied for the organization's						
	benefit and either paid to it or expended on						
	its behalf						0
21	The value of services or facilities furnished to						
	the organization by a governmental unit						
	without charge. Do not include the value of	1					
	services or facilities generally furnished to the			i			
	public without charge						0
22	Other income Attach a schedule Do not						
	include gain or (loss) from sale of capital assets	1,726,930	1,693,009	2,009,262	2,06	31,911	7,491,112
23	Total of lines 15 through 22	102,893,944	90,212,321	101,877,755	87,69	1,707	382,675,727
24	Line 23 minus line 17	102,893,944	90,212,321	101,877,755	87,69	1,707	382,675,727
25	Enter 1% of line 23	1,028,939	902,123	1,018,778	87	6,917	
26	Organizations described on lines 10 or 11:	a Enter 2% of a	mount in column	(e), line 24	>	26a	0
t	Prepare a list for your records to show the name of ar	nd amount contribu	ted by each perso	n (other than a			
	governmental unit or publicly supported organization)	whose total gifts for	or 2002 through 20	005 exceeded the		* *************************************	
	amount shown in line 26a Do not file this list with y	our return. Enter t	he total of all thes	e excess amounts	>	26b	
(Total support for section 509(a)(1) test Enter line 24,	column (e)				26c	0
(Add: Amounts from column (e) for lines 18	19		<u> </u>			
	22	26b	·		•	26d	0
6	Public support (line 26c minus line 26d total)					26e	0
f	Public support percentage (line 26e (numerator) d	livided by line 26c	(denominator))			26f	0 00%
27	<u> </u>	nounts included in I	· · ·			•	
	prepare a list for your records to show the name of, a		•	ar from, each "dis	qualified	person."	Do not
	file this list with your return. Enter the sum of such	•	•				
	(2005) (2004)		(2003)		(2002)		
k	For any amount included in line 17 that was received						
	to show the name of, and amount received for each y	•	-	` '			, ,
	\$5,000 (Include in the list organizations described in						
	After computing the difference between the amount re differences (the excess amounts) for each year	eceived and the larg	ger amount descri	bea in (1) or (2), e	nter the s	sum of th	iese
	•						
	(2005) (2004)		(2003)		(2002)		
,	Add Amounts from column (e) for lines 15	370,524,09 <u>2</u> 16	•				
•	17 20	21			•	27c	370,524,092
,		l line 27b total	-			27d	<u> </u>
•		i mic Zi V (V(a)		_		27e	370,524,092
f	Total support for section 509(a)(2) test. Enter amount	from line 23, colun	nn (e)	► 27f 382,6	675,727		J. 0,02 1,002
· 9					<u> </u>	27g	96.82%
t t		=		denominator))	•	27h	1.22%
28	Unusual Grants: For an organization described in lin				2002 thr		

Schedule A (Form 990 or 990-EZ) 2006 Associated Catholic Charities, Inc.

Part V Private School Questionnaire (See page 9 of the instructions.) (To be completed ONLY by schools that checked the box on line 6 in Part IV)

29	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	Yes	No
30	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30		
31	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves?	31	-	
	If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement.)			
32	Does the organization maintain the following.			
а	Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	ļ	
b	Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b		
С	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c		
d	Copies of all material used by the organization or on its behalf to solicit contributions?	32d		
	If you answered "No" to any of the above, please explain (if you need more space, attach a separate statement.)			
33	Does the organization discriminate by race in any way with respect to			
а	Students' rights or privileges?	33a		
b	Admissions policies?	33b		-
С	Employment of faculty or administrative staff?	33c		
d	Scholarships or other financial assistance?	33d		
e	Educational policies?	33e		
f	Use of facilities?	33f		
g	Athletic programs?	33g		
h	Other extracurricular activities?	33h		
	If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.)			
34 a	Does the organization receive any financial aid or assistance from a governmental agency?	34a		
b	Has the organization's right to such aid ever been revoked or suspended?	34b		
	If you answered "Yes" to either 34a or b, please explain using an attached statement			
35	Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35		

	t VI-A Lobbying Expenditures by Electing . (To be completed ONLY by an eligible	_	ties (See page		e instru			Fage U
Chec	k , a if the organization belongs to an affiliated gr	oup Check ▶	b lf you che	cked "a" a	and "limit	ted control	" provi	sions apply
	Limits on Lobbying (The term "expenditures" means	-	urred.)			(a) Affiliated o totals		(b) To be completed for all electing organizations
36	Total lobbying expenditures to influence public opinion (g				36			
37	Total lobbying expenditures to influence a legislative bod	y (direct lobbying)			37			
38	Total lobbying expenditures (add lines 36 and 37)				38		0	0
39	Other exempt purpose expenditures				39			
40	Total exempt purpose expenditures (add lines 38 and 39				40		0	0
41	Lobbying nontaxable amount Enter the amount from the							
		bying nontaxable		١		*		
	•	the amount on line						
		00 plus 15% of the						
		00 plus 10% of the			41			
		00 plus 5% of the ex	cess over \$1,500,0	000				
42	Over \$17,000,000 \$1,000, Grassroots nontaxable amount (enter 25% of line 41)	000		1	42		O	
43	Subtract line 42 from line 36 Enter -0- if line 42 is more	than line 36			43		0	
44	Subtract line 41 from line 38 Enter -0- if line 41 is more				44	_	0	0
								<u>_</u>
	Caution: If there is an amount on either line 43 or line 4			24 (5.)				
	(Some organizations that made a section		not have to complet	e all of the		lumns belo	w	
	See the instructions for							
		Lobb	ying Expenditur	es Durin	g 4-Yea	ar Averag	ging P	eriod
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2005	(c) 200	1	(d) 2003	<u> </u>	(e) Total
45	Lobbying nontaxable amount							0
46	Lobbying ceiling amount (150% of line 45(e))		,,					0
47	Total lobbying expenditures			·				0
48	Grassroots nontaxable amount							0
49	Grassroots ceiling amount (150% of line 48(e))							0
50	Grassroots lobbying expenditures							0
Pa	t VI-B Lobbying Activity by Nonelecting							
	(For reporting only by organizations	that did not com	plete Part VI-A	(See pa	age 13	of the in	struct	ions.)
Durir	g the year, did the organization attempt to influence nation	nal, state or local le	gislation, including	any		Yes	No	Amount
atten	pt to influence public opinion on a legislative matter or ref	erendum, through t	ne use of					Amount
а	Volunteers					X		
b	Paid staff or management (Include compensation in expense	enses reported on li	nes c through h.)			X		
C	Media advertisements					\vdash	X	
d	Mailings to members, legislators, or the public						X	
e •	Publications, or published or broadcast statements						X	
f	Grants to other organizations for lobbying purposes	fficials or a larget-s	vo body		•		X	65.000
g h	Direct contact with legislators, their staffs, government of Rallies, demonstrations, seminars, conventions, speech	• •	•		•	X	Х	65,020
- 1	Total lobbying expenditures (Add lines c through h .)	so, icciuico, ui any	onici ilicalis					Part III, Line 1
	If "Yes" to any of the above, also attach a statement giving	ng a detailed descri	ption of the lobbyin	g activities	3			

Schedule A (Form 990 or 990-EZ) 2006 Associated Catholic Charities, Inc. 52-0591538 Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 13 of the instructions.)

51					ing with any other organization described in s 27, relating to political organizations?	ection		
а		•		noncharitable exempt organizat			Yes	No
a		ers nom me reporting Cash	organization to a	monchamable exempt organizat	don or.	51a(i)	163	X
	• • •							Î
L	• •	Other assets				a(ii)		 ^-
b		transactions				l		,,
		•		ncharitable exempt organization		b(ı)		<u> </u>
				ole exempt organization		b(ii)	 	X
		Rental of facilities, eq		assets		b(iii)		X
	(IV)	Reimbursement arran	gements			b(iv)		X
	(v)	Loans or loan guarant	tees			b(v)		X
	(vi)	Performance of service	es or membership	p or fundraising solicitations		b(vi)		X
c	Sharın	g of facilities, equipm	ent, mailing lists,	other assets, or paid employees		С		X
d	of the	goods, other assets, transaction or sharing	or services given l	by the reporting organization If to ow in column (d) the value of the	column (b) should always show the fair marke the organization received less than fair marke e goods, other assets, or services received:			
Lı	(a) ne no	(b) Amount involved	Name of non-	(c) charitable exempt organization	(d) Description of transfers, transactions, and sha	rıng arranç	gement	s
		·						
	-							
	•							
			-					
								—
				····				
								—
								—
	descri	organization directly oped in section 501(c) "," complete the follow	of the Code (othe	ed with, or related to, one or mo r than section 501(c)(3)) or in se	re tax-exempt organizations ction 527?	Yes	X	
		(a)		(b)	(c)			
		Name of organization) 	Type of organization	Description of relationship			
			 					
					·-, -, ·-			
_				.,				
			_					

· 8822

(Rev December 2006)
Department of the Treasury
Internal Revenue Service

Change of Address

▶ Please type or print.

on back Do not attach this form to your return

OMB No 1545-1163

Part I Complete This Part To Change Your Home Mailing Address	return.	
Check all boxes this change affects:		
1 Individual income tax returns (Forms 1040, 1040A, 1040EZ, 1040NR, etc.)		
▶ If your last return was a joint return and you are now establishing a residence separa	te	
from the spouse with whom you filed that return, check here	▶	
<u> </u>		
2 Gift, estate, or generation-skipping transfer tax returns (Forms 706, 709, etc.)		
► For Forms 706 and 706-NA, enter the decedent's name and social security number b	elow.	
▶ Decedent's name ▶ Social security no	umber	
3 a Your name (first name, initial, and last name)	3b Your social securit	y number
4 a Spouse's name (first name, initial, and last name)	4b Spouse's social se	curity number
5 Prior name(s) See instructions		
6 a Old address (no , street, city or town, state, and ZIP code) If a P O box or foreign address, see instructions		
6 a Old address (no , street, city or town, state, and ZIP code) If a P O box or foreign address, see instructions		Apt no
6 b Spouse's old address, if different from line 6a (no , street, city or town, state, and ZIP code) If a P O box or foreign address.	drace can instructions	Ant no
Specific of a data obs, it different files of the , street, only of town, state, and 211 code) it a 1 0 box of foreign and	dress, see instructions	Apt no
7 New address (no , street, city or town, state, and ZIP code) If a P O box or foreign address, see instructions		Apt no
		7.00
Part II Complete This Part To Change Your Business Mailing Address or Busines	ess Location	
Check all boxes this change affects:		
8 X Employment, excise, income, and other business returns (Forms 720, 940, 940-EZ, 941	I, 990, 1041, 1065, 112	0, etc.)
9 Employee plan returns (Forms 5500, 5500-EZ, etc.)		•
10 Business location		
11 a Business name	AAb Forelesses idea 45	
11 & Dusiness name	11b Employer identific	ation number
Associated Catholic Charities, Inc.	E2 0E04E20	
12 Old mailing address (no , street, city or town, state, and ZIP code) If a P O box or foreign address, see instructions	52-0591538	oom or suite no
The manifest of the forest, and a family state, and an except that the box of foreign address, see instructions	l N	DOIN OF SUITE NO
New mailing address (no , street, city or town, state, and ZIP code) If a P O box or foreign address, see instructions	R	oom or suite no
1966 Greenspring Drive		
Timonium, MD 21093		
14 New business location (no , street, city or town, state, and ZIP code) If a foreign address, see instructions	R	oom or suite no
	į	
Part III Signature		
		•
Daytime telephone number of person to contact (optional) 443-519-2383		
a lucks		
Sign 2/14/08		
Here Your signature Date If Part II completed, signature	re of owner, officer, or representative	Date
If joint return, spouse's signature Date Title		_

Line 1 (990) - Public Support and Contributions

Line 1a - Contributions to Donor Advised Funds	Cash 0	Non Cash
Line 1b - Direct public support 1 Contributions	16,700,616 1 2 3 0 4 5	
6 7	6	
8	8	
10 Total	<u>16,700,616</u> 10	0
Line 1c - Indirect public support	2,121,061	
Line 1d - Government contributions (grants)	2,572,284	

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Cost, other .	Se	46,939,405	0.	179,433		or sale and cost of	-avordui	ments Depreciation																																	
Gross		,020,332	0	3,326	-	Cost or otner basis (Enter one field only)	es		46	3,326 179,433																															
Totals		Public Securities	Non-Public Securities	Other sales			n Date	+	+	varions																															
							Date	Purchaser acquired																																	
						gain/loss is Check if from sale of Durchaser		securities business																																	
					Check if	gain/loss is from sale	of public	ption	X																																
				_				×e	T	Z fixed assets	8	4	0 4	2	. 8	6	10	11	12	13	14	15	16	17	18	19	20	21	23	62	25	26	27	28	29	30	31	32	33	34	

Line 9 (990) - Special Events and Activities

	Line 3 (330) - Special Events and Activities										
		Event A	Event B	Event C	All others		Totals				
1	Special event name	Young Profess-	Charities	Charities							
		ionals Golf	Golf Classic	Ryder Cup							
1:	a Number of special events										
2	Gross receipts	61,000	274,825	16,000		2 _	351,825				
3	Less contributions	51,680	116,050	11,500	168,683	3	347,913				
4	Gross revenue	9,320	158,775	4,500	-168,683	4	3,912				
5	Less direct expenses	28,170	118,022	7,050	0	5 _	153,242				
6	Net income or (loss)	-18,850	40,753	-2,550	-168,683	6	-149,330				

Line 20 (990) - Other Changes in Net Assets or Fund Balances

2,287,307

Line 20 (550) - Other Onlinges in Net Assets of Fund Balances	2,201,301
Description	Total
1 unrealized gain on investments held at market	2,287,307
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
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16	
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•	
	Contract Chatter Charter

		Relationship																				
222,637	,	Amount given	100,000	800	1,000	000'09	3,750	100	10,000	10,000	2,000	10,000	26,187	4,000	3,100	1,700					•	
	Foreign	Country											Korea, Republic		Vietnam						:	
		Zip code	21201	21227	34184	21287	21117	21228	21228	21093	20723	21723		21224		21204						
		State	Φ	MD	F	MD	MD	MD	MD	MD	QΜ	MD		MD		MD						
		City	Baltimore	Baltimore	Venice	Baltimore	Owings Mills	Catonsville	Catonsville	Timonium	Laurel	Cooksville	Seoul	Baltimore		Towson						
		Address	320 Cathedral Street	5517 Selma Avenue	P O Box 1958	300 North Wolfe Street	10711 Red Run Blvd	2501 Frederick Road	4403 Frederick Road	2300 Dulaney Vallley Road	7750 Montpelier Road	2000 Woodmont Drive	CPO Box 2536	201 S Conkling Street	40/5 Bui Vien Street District 1	7505 Osler Drive Ste 208	i					
edule		Grantee's name	Archdiocese of Baltimore	Casey Cares Foundation	Catholic Faith Appeal	Johns Hopkins Medicine Res 600	Junior Achievement	Maryland Council	Mt St Joseph Hgh School		Tai Sophia Institute	У	Holt Children's Services	Archbsp Borders Scholarship 201 S Conkling Street	Knowing Children Intl	Community Outreach Srvs						
Line 22 (990) - Cash Grants Paid Schedule		Class of activity																				
- Cash	Other grants and	allocations											×	×	X	X	_	_	_			
22 (990	Check box if grantee is		×	×	×	×	×	×	×	×	×	×	×	×	×	×						
Line	<u> </u>	. 0	-	7	3	4	2	9	7	80	6	10	11	12	13	14	15	16	17	18	19	70

Line 23 (990) - Specific Assistance to Individuals

Class of Activity 838,409 Amount 1 client rent
2 other client assistance
3 402,270 436,139 13 14 15

Line 42 (990) - Depreciation, Depletion, etc.	2,599,185	2,377,306	212,646	9,233
	(A) Total	(B) Program	(C) Management	(D) Fundraising
· Description	Total	services	and general	i dildialsing
1 Land, building & equipment - dereciation	2,599,185	2,377,306	212,646	9,233
2	0			
3	0			
4	0			
5	0			
6	0			
7	0			
8	0			
9	0			
10	0			
11	0			
12	0			
13	0			
14	0			
15	0			
16	0		,,	
17	0			
18	0			
19	0			
20	0			

Line 47 (990) - Accounts Receivable

	Accounts	s receivable	Allowance for do	oubtful accounts
	Beginning	End	Beginning	End
1	1 9,047,902	9,467,918	184,710	175,395
2	2			
3	3			
4	4			
5	5			
6	6			
7	7			
8	8			
9	9			
101	0			
11 Total accounts receivable	9,047,902	9,467,918	184,710	175,395

Line 48 (990) - Pledges Receivable

		Pledges re	eceivable	Allowance for doub	tful accounts
		Beginning	End	Beginning	End
1	1	13,057,722	9,448,661	1,670,791	802,825
2	2				
3	3				<u> </u>
4	4				
5	5				
6	6				
7	7				
8	8				
9	9	-			
10	10				
11 Total pledges receivable	<u> 11 </u>	13,057,722	9,448,661	1,670,791	802,825

l ing 5/1a	/QQA\ _	Investments -	- Dublicky	-Traded	Securities
Line 54a	(990) -	mvesiments	- Publicly	- i raueu	Securities

Check one box below to indicate how securities are reported:
Cost
X End of year market value (FMV)

Z_Cha or year market value (1 MV)		0	50,490,876	55,655,113
	Number	Value	Beginning	Ending
	of shares/	at time of	balance	balance
	face value	donation	book value	book value
Securities at end of year			FMV	FMV
1 Certificates of Deposit			2,135,760	3,517,553
2 Mutual Funds			4,296,375	
3 United States Government obligations			11,318,324	8,383,761
4 Corporate bonds			3,577,294	
5 Common stocks			29,163,123	35,168,086
6			0	0
7			0	0
8			0	0
9			0	0
10	_		0	0
11			0	0
12			0	0
13			0	0
14			0	0
15			0	0
16			0	0
17			0	0
18		-	0	0
19			0	0
20			0	0

Line 56 (990) - Other Investments

17 Total buildings and equipment

19 Total land, buildings and equipment

18 Buildings and equipment (less accumulated depreciation) .

neck one box to indicate how investments are listed:	Book value	Beginning	End
	Dook taids	Dogming	
X End of year market value (FMV)			
	FMV_	FMV	FMV
Investment in subsidiaries 1		985,179	985,179
2		0	0
3		0	0
4		0	0
5		0	0
6		0	0
7		0	0
8		0	0
9		0	0
10		0	0
Total other investments 11	0	985,179	985,179

Line 57 (990) - Land, Buildings, and Equipment Land (net of any amortization) Land (net of any amortization) Beginning End Land 1,376,900 1,376,900 4 5 Total land (net of any amortization) 6 1,376,900 1,376,900 Buildings and equipment **Buildings and equipment** Accumulated depreciation Beginning Beginning End End 7 Land improvements 1,702,696 1,740,101 835,862 785,752 Buildings 72,932,616 51,929,115 18,646,646 20,519,772 9 Furniture and equipment 9 8,599,161 6,374,684 9,961,524 6,697,086 10 Construction in progress 10 10,035,588 1,926,495 11 _____11 _____12

1	Category or Item	1	Cost/Other Basis	Accumulated Depreciation	Book Value
2		2			
3		3			
4		4			
5		5			
6	•••••	6			
7		7			
8		8			
9		9			
10		10			
11	Total	11	0	0	0

72,266,560

86,560,736

18

19

25,857,192

46,409,368

47,786,268

28,002,610

58,558,126

59,935,026

17

Line 58 (990) - Other Assets

Line 58 (990) - Other Assets	4,232,973	4,303,222
	Beginning	End
1 Due from affiliates	4,309,777	4,397,397
2 Other	-76,804	-94,175
3		
4		
5		
6		
7		
8		
9		
10		

Line 64a (990) - Tax-Exempt Bond Liabilities

	· Issue name & purpose	Beginning balance	End of year amount outstanding	Unexpended proceeds	% of space used by 3rd party, if required
1	Maryland Economic Development Corporation	16,085,000	<u> 15,415,000</u>		
2		· · · · · · · · · · · · · · · · · · ·			
3					
4					
5					
6					-
7					
8			<u> </u>		
9					
10					
11					
					
13					
14					
15					
16					
17					
18					
19	Totals 1	16,085,000	15,415,000	0	
1	Tax-exempt bond or obligation in the form Maturity date of debt Repaym	of a mortgage ent terms	Interest rate	Security	provided
2					
4 5					
6 7					
8 9					
10 11					
12 13					
14 15					
16 17					
18					

ןבי	Line 64b (990) - Mortgages and Other Notes Payable	nd Oth	ler h	Notes	; Payable	9,550,900	7,392,957	9,098,171		,
		Check	Check ıf lender	nder		Original	Balance due beginning E	Balance due	•	
	Lender's name	isal	is a business	ess	Security provided	amonut	of year	end of year	Date of note	Maturity date
-	Community Development Administra		×			4,284,503	3,712,539	3,898,677	•	
7	2 Bank Mortgages		×			571,890	523,482	1		
3	Line of Credit		×			2,643,731	2,643,731	2		
4	City		×			1,500,776		1,500,776		
5	Maryland Afffordable Housing Trust		×			20,000		20,000		
9	FHLB		×			200,000		500,000		
7										
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6			\vdash							
9										
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15			-							
16			L .							:
17			_							
198										

Line 65 (990) - Other Liabilities

Line 65 (990) - Other Liabilities	1,524,576	2,491,326
	Beginning	End
1 Funds held on deposit	707,718	589,823
2. Other liabilities	210,308	1,212,913
3 Annuity payment liability	606,550	688,590
4		
5		_
6		
7_		
8		
9		
10		

Part VI, Line 80b (990) - Organization Relations

		Please (Check "X"
	Organization Name	Exempt	Non-Exempt
1	661 Corporation	X	
	Abingdon Senior Housing, Inc	Х	
_ 3	Aberdeen Senior Housing, Inc.	X	
4	Associated Catholic Charities	X	
	Backbone Housing, Inc. (dba Starner Hill)	X	
6	Belair Senior Housing, Inc.		X
7	Cherry Hill Town Center, Inc.	X	
8	Coursey Station Apartments, Inc.	X	
9	DePaul House, Inc.	X	
	Glen Burnie Senior Housing, Inc.	X	
11	Hollins Ferry Road Apartments, Inc	-ļ <u>.</u>	X
	Jenkins Memorial Nursing Home, Inc. (dba St. Elizabeth's Nursing Home)	X	
	My Sister's Place Women's Center Fund, Inc.	X	<u> </u>
	Odenton Senior Housing, Inc	X	
	Odenton Senior Housing II, Inc.	X	
16	Our Daily Bread Employment Center Fund, Inc.	X	
17	Owings Mills Senior Housing, Inc.	X	
	Reisterstown Gardens Senior Housing, Inc.	X	
	Reisterstown Village Senior Housing, Inc., Inc.	Х	
	Sarah's House Fund, Inc.	X	
	St. Charles House, Inc.	X	
	St. Joachim House, Inc.	X	
	St. Luke's Apartments, Inc	X	
	St. Mark's Housing, Inc.		X
25	The Bethany Community, Inc.	Х	
26	The Catholic Charities Housing, Inc. (dba Basilica Place)	X	
	The Children's Fund, Inc	X	
28	Trinity House Apartments, Inc.	X	
29	Woodlawn Senior Housing, Inc.	X	

<u>Pt</u>VIII

-11	<u>/ III</u>	
1	93a	Fees for providing social services to, elderly congregate housing, assited living, adult day care, MR/DDA residential
2		services, family and individual counseling and adoption services
3	93g	Social services under government contracts: Head Statr, residential and educational services to emotionally disturbed
4		children, residential and day activities for MR/DDA, and transitional shelter for homeless
5	95	Earnings from cash received forsocial services invested in savings and temporary investments
6	96	Earnings from cash received for social services invested in stocks and bonds
7	97b	Primarily related to housing services for the homeless; MR/DDA.
8	100	Gain (loss) on sales of investment securities and fixed assets
9	101	net income (loss) from special events
10	103	Support services from affiliated social service organizations and miscellaneous income

	Index	Name	Street Address	City	State	ZIP code	Foreign Country
Harold A Smith	-	Harold A Smith	320 Cathedral Street	Baltimore	MD	21201	
James Gabriel	2	James Gabriel	320 Cathedral Street	Baltimore	<u>M</u>	21201	
Cardinal William H Ke€	3	Cardinal William H Keeler	320 Cathedral Street	Baltimore	<u>M</u>	21201	
William J. Stromberg	4	William J. Stromberg	320 Cathedral Street	Baltimore	<u>R</u>	21201	
Clinton R Daly	5	Clinton R. Daly	320 Cathedral Street	Baltimore	Q	21201	
Jeffrey H Donahue	9	Jeffrey H. Donahue	320 Cathedral Street	Baltimore	Q _M	21201	
Richard O Berndt		Richard O. Berndt	320 Cathedral Street	Baltimore	8	21201	
William J. Baird, III	8	William J. Baird, III	320 Cathedral Street	Baltimore	Q	21201	
James M. Bannantine	6	James M. Bannantine	320 Cathedral Street	Baltimore	9	21201	
Stephen J Bisciotti	9	Stephen J. Bisciotti	320 Cathedral Street	Baltimore	8	21201	
Martha L. Boyd	=	Martha L Boyd	320 Cathedral Street	Baltimore	8	21201	
Marc G Bunting	12	Marc G. Bunting	320 Cathedral Street	Baltimore	S	21201	
Susan C. Butta	13	Susan C. Butta	320 Cathedral Street	Baltimore	S	21201	
Kevin G. Byrnes	14	Kevin G. Byrnes	320 Cathedral Street	Baltimore	5	21201	
Neil I Cashen	5	Neil L Cashen	320 Cathodral Stroot	Baltimore	2	21201	
Francis A Contino	4	Francis A Contino	320 Cathodral Street	Boltimore	2 2	21201	
	2 5		200 Cathedral Others	Datallion	2 2	2120	
Kalph W. Emerson, Jr.	_ ;	Kalph W. Emerson, Jr.	320 Cathedral Street	Baitimore	2 :	21201	
Mark K. Erickson	2	Mark K. Erickson	320 Cathedral Street	Baltimore	Q M	21201	
Michael L Falcone	19	Michael L. Falcone	320 cathedral Street	Baltimore	<u>R</u>	21201	
Richard A Grossi	20	Richard A. Grossi	320 Cathedral Street	Baltimore	Ð	21201	
Dean S. Harrison	21	Dean S. Harrison	320 Cathedral Street	Baltimore	Q.	21201	
Bonnface DS Kim	22	Boniface DS Kim	320 Cathedral Street	Baltimore	MD	21201	
Cathy B. McClain	23	Cathy B. McClain	320 Cathedral Street	Baltimore	QW	21201	
John J. McLaughlin	24	John J. McLaughlin	320 Cathedral Street	Baltimore	QW	21201	
Rev Denis J Madden	25	Rev. Denis J. Madden	320 Cathedral Street	Baltimore	₽	21201	
Rev. W. Francis Maloo	26	Rev. W. Francis Malooly, D.D.	320 Cathedral Street	Baltimore	QW M	21201	
Michael D Mangan	27	Michael D. Mangan	320 Cathedral Street	Baltimore	Q¥	21201	
Louis Maranto	28	Louis Maranto	320 Cathedral Street	Baltimore	Ð	21201	
Joan F. Neal	58	Joan F. Neal	320 Cathedral Street	Baltimore	QW M	21201	
Kevin M. O'Keefe	30	Kevin M. O'Keefe	320 Cathedral Street	Baltimore	₽	21201	
Rev. Mitchell Rozanski	31	Rev. Mitchell Rozanskı	320 Cathedral Street	Baltimore	₽	21201	
Abigail E. Smith	32	Abigail E. Smith	320 Cathedral Street	Baltimore	<u>M</u>	21201	
Joseph A. Sullivan	33	Joseph A. Sullivan	320 Cathedral Street	Baltimore	<u>M</u>	21201	
Michael D. Sullivan	34	Michael D. Sullivan	320 Cathedral Street	Baltimore	ΔM	21201	
Patricia S. Tunstall	35	Patricia S. Tunstall	320 Cathedral Street	Baltimore	Φ	21201	
Christa A. Velasquez	36	Christa A. Velasquez	320 Cathedral Street	Baltimore	ΔM	21201	
Michael J. Wallace	37	Michael J Wallace	320 Cathedral Street	Baltimore	Ð	21201	
Michael W. Walton	38	Michael W. Walton	320 Cathedral Street	Baltimore	₽	21201	
- 14/2:2Pt	8	18/2:2/PA	200 0-41-3-1 041	3		, , , ,	

,	Com		·			:		117	0	0	0	, P
		Type of entity	entity	Officer, Director, Trustee, and Key Employee Status	Officer, Director, Trustee, and Key Employee Status			Hours per	Program	Program Services	Program Services	•
	Index	Business Individual	Individual	Current (Part V-A)	Former (Part V-B)	Disqualified Persons	T T	devoted to	Services	Emp Benefit Plans or Deferred Comp Plans	Expense Account	Mgmt and General
Harold A Smith	-		×	×			Secretary	40.00			0	See attached
James Gabriel	2		×	×			Assoc Dir	40.00	0	0	0	See attached
Cardinal William H Ked	3		×	×			Chair	1.00	0		0	
William J Stromberg	4		×	×			President	1.00	0		0	
Clinton R Daly	2		×	×			Vice Pres	1.00	0		0	
Jeffrey H. Donahue	9		×	×			Treasure	1.00	0		0	
Richard O Berndt	7		×	×			Attorney	1 00	0		0	
William J Baird, III	8		×	×			Trustee	1.00	0		0	
James M. Bannantine	6		×	×			Trustee	1.00	0		0	
Stephen J. Bisciotti	10		×	×			Trustee	1.00	0		0	
Martha L. Boyd	11		×	×			Trustee	1.00	0		0	
Marc G. Bunting	12		×	×			Trustee	1.00	0		0	
Susan C. Butta	13		×	×			Trustee	1 00	0		0	
Kevin G. Byrnes	14		×	×			Trustee	1.00	0		0	
Neil J. Cashen	15		×	×			Trustee	1.00	0		0	
Francis A. Contino	16		×	×			Trustee	1.00	0		0	
Ralph W. Emerson, Jr.	17		×	×			Trustee	1.00	0		0	
Mark R Erickson	18		×	×			Trustee	1.00	0		0	
Michael L. Falcone	19		×	×			Trustee	1.00	0		0	
Richard A Grossi	20		×	×			Trustee	1.00	0		0	
Dean S. Harrison	21		×	×			Trustee	1.00	0		0	
Boniface DS Kim	22		×	×			Trustee	1.00	0	0	0	
Cathy B. McClain	23		×	×			Trustee	1.00	0		0	
John J. McLaughlin	24		×	×			Trustee	1 00	0	0	0	
Rev. Denis J Madden	25		×	×			Trustee	1.00	0		0	
Rev. W Francis Malod	26		×	×			Trustee	1.00	0		0	
Michael D. Mangan	27		×	×			Trustee	1.00	0	0	0	
Louis Maranto	28		×	×			Trustee	1.00	0		0	
Joan F. Neal	29		×	×			Trustee	1.00	0		0	
Kevin M. O'Keefe	30		×	×			Trustee	1.00	0		0	
Rev. Mitchell Rozanski	31		×	×			Trustee	1.00	0		0	
	32		×	×			Trustee	1.00	0	0	0	
	33		×	×			Trustee	1.00	0		0	
Michael D Sullivan	8		×	×			Trustee	1.00	0	0	0	
Patricia S Tunstall	35		×	×			Trustee	1.00	0	0	0	
Christa A. Velasquez	36		×	×			Trustee	1.00	0	0	0	
Michael J. Wallace	37		×	×			Trustee	1 00	0	0	0	
Michael W. Walton	38		×	×			Trustee	1.00	0	0	0	
Carl A.J. Wright	39		×	×			Trustee	1.00	0	0	0	
	770											

To add

Harold A Smith James Gabriel Cardinal William H Kee William J. Stromberg Clinton R. Daly Jeffrey H. Donahue Richard O. Berndt William J. Baird, III James M Bannantine Stephen J. Bisciotti Martha L. Boyd Marc G. Butta Kevin G. Butta Kevin G. Byrnes Neil J. Cashen Francis A. Contino Ralph W. Emerson, Jr. Mark R. Erickson Michael L. Falcone 10 Ger Ger 10 Ger 11 12 13 14 15 16 Ralph W. Emerson, Jr. 18	Mgmt and General Contr to Employee Benefit Plans	Mgmt and General Expense Acct Other Allowances	Fundraising Compensation 0 0 0 0 0 0 0 0 0 0	Fundraising Contributions to Employee Benefit Plans 0 0 0 0 0 0 0 0 0 0 0 0 0	Fundraising Expense Acct Other Allowances 0 0 0	Loans and Advances (For Part V-B Only)
H Kee 3 Outi 11 H R 8 H R 8 H R 11 H R 8 H		Agmt and General Expense Acct Other Allowances			_	
H Kee 3 H H H Kee 3 H H K H Kee 3 H H K H Kee 3 H H K H H K H H K H H K H H Kee 3 H H K H H K H H K H H H K H H H H H H		Expense Acct Other Allowances				
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Richard A. Grossi 20			0	0	0	0
Dean S Harrison 21			0	0	0	0
Boniface DS Kim 22			0	0	0	0
Cathy B. McClain 23			0	0	0	0
John J. McLaughlin 24			0	0	0	0
Rev. Denis J. Madden 25			0	0	0	0
Rev. W Francis Matod 26			0	0	0	0
Michael D. Mangan 27			0	0	0	0
			0	0	0	0
Joan F. Neal			0	0	0	0
Kevin M O'Keefe 30			0	0	0	0
Rev. Mitchell Rozanski 31			0	0	0	0
Abigail E Smith 32			0	0	0	0
Joseph A. Sullivan			0	0	0	0
Michael D Sullivan 34			0	0	0	0
Patricia S. Tunstall 35			0	0	0	0
Christa A Velasquez 36			0	0	0	0
Michael J Wallace 37			0	0	0	0
Michael W. Walton 38			0	0	0	0
Carl A.J Wright 39			0	0	0	0

•	(3				
990	V	Compensation B	enefits Allow	ances	
1	Harold A. Smith - Secretary/E:	cecutive Director			
2	compensation	347,414			
3	life insurance		4,736		
4	serp distribution	980,727			
5	automobile allowance			7,884	
6	total	1,328,141	4,736	7,884	
7					
8	Compensation includes a distril	oution from a SERP ago	count in the amount of	\$980,727 that was repo	orted in prior year
9	Form 990s as deferred compen	sation. This amount is re	ported again as com	pensation per Form 990	instructions
10		·			
11					
12	James Gabriel - Associate Dire	ctor/CFO			
13	compensation	193,337			
14	life insurance		5,218		
15	serp contribution		16,911		
16	automobile allowance			3,650	
17	total	193,337	22,129	3,650	

Part VII, Line 103 (990) - Other Revenue

<u> </u>	<u>irt vii, Line 103 (990) - Otii</u>	el ize veliue				
		Unrelated b	ousiness income	E	cluded by section 512, 51	3, or 514
	,	(A)	(B)	(C)	(D)	(E) Related or exempt
	Other Revenue Description	Business code	Amount	Exclusion code	Amount	function income
а	primarily developer's fees					156,765
b						
C		1		 		
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Line 22 (Sch A (990/990-EZ)) - Other Income

Description	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total
1 Support service	1,520,301	1,410,264	1,359,874	1,270,803	5,561,242
2 Other	206,629	282,745	649,388	791,108	1,929,870
3					0
4					0
5					0
6					0
7					0
8					0
9					0
10					0
Total of Other Income	1,726,930	1,693,009	2,009,262	2,061,911	7,491,112

Part III, Line 3a (Sch A (990/990-EZ)) - Fellowships, S Do you make grants for scholarships, fellowships, student loans, etc.?	X Yes	No	ulia
If "Yes," attach an explanation of how you determine that recipients qualify	to receive payme	ents.	
Scholarships are awarded to individuals, including clients, volunteers, and			
staff. Individuals qualify based on a combnation of factors which include commitment to study, commitment to serving and financial need.			
			

Pa	rt VI-B (Sch A (990/990-EZ)) - Lobbying Activity by Nonelecting Public Charities
1	The organization is neither for or against any political candidate, the organization has a social concerns unit whose
2	total lobbying expenditurs for the fiscal year amounted to \$65,020 This amount is .07% of the organizations total expenses.
3	This unit gacve testimony before the Maryland General Assembly in support of some specific social service bills and in
4	opposition to other bills.
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Form 990, Part XI Associat	ed Catholic C	Charitiwes, Inc 52-0	591538	2006
Entity Abingdon Senior Housing, Inc 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	EIN 20-2404048	Description temporary transfers to/ from due primarily to having common paymaster and payables	Transfers To \$244,749 00	Transfers From (\$256,889.00)
Aberdeen Senior Housing, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	42-1569394	temporary transfers to/ from due primarily to having common paymaster and payables	\$422,575 00	(\$272,231 00)
The Bethany Community, Inc. 1966 Greenspring Drive, Ste 200 Timonium, Maryland 21093	52-1359066	temporary transfers to/ from due primarily to having common paymaster and payables	\$731,523.00	(\$847,521 00) * ~
The Catholic Charities Housing, Inc 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	91-1916896	temporary transfers to/ from due primarily to having common paymaster and payables	\$1,158,924 00	(\$1,130,784 00)
St. Charles House, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	, *	temporary transfers to/ from due primarily to having common paymaster and payables	\$118,796 00	(\$125,999 00)
Cherry Hill Town Center, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2013649	temporary transfers to/ from due primarily to having common paymaster and payables	\$247,039 00	(\$289,990 00)
The Children's Fund, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093		temporary transfers to/ from due primarily to having common paymaster and payables	\$321,844 00	(\$309,253 00)
Coursey Station Apartments, Inc 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	91-1916898	temporary transfers to/. from due primarily to having common paymaster and payables	\$210,730 00	(\$215,868 00)
DePaul House, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-0591618	temporary transfers to/ from due primarily to having common paymaster and payables	\$585,464 00	(\$563,302 00)
Belair Senior Housing, inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2156208	temporary transfers to/ from due primarily to having, common paymaster and payables	\$288 00	(\$134 00)
Glen Burnie Senior Housing, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2125710	temporary transfers to/ from due primarily to having common paymaster and payables	\$200,220 00	(\$233,587 00)

Hollins Ferry Road Apartments, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2028747	temporary transfers to/ from due primarily to having common paymaster and payables	\$0 00	\$0 00
Jenkins Memorial Nursing Home, Inc 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-1711371	temporary transfers to/ from due primarily to having common paymaster and payables	\$3,618,697 00	(\$3,584,307 00)
St. Joachim House, Inc 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-1815777	temporary transfers to/ from due primarily to having common paymaster and payables	\$356,494 00	(\$376,393 00)
St. Luke's Apartments, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-1771022	temporary transfers to/ from due primarily, to having common paymaster and payables	\$432,358 00	(\$423,982 00)
Odenton Senior Housing, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-1815777	temporary transfers to/ * from due primarily to having common paymaster and payables	\$290,032 00	(\$302,933 00)
Owings Mills Senior Housing, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2289902	temporary transfers to/ • from due primarily to havings common paymaster ຍnd payables	\$238,428.00	(\$232,022 00)
Reisterstown Gardens Senior Hosuing 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2224808	temporary transfers to/ from due primarily to having common paymaster and payables	\$251,582 00	(\$256,993 00)
Reisterstown Village Senior Housing 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2030205	temporary transfers to/ * from due primarily to having common paymaster and payables	\$246,850.00	(\$241,756 00)
661 Corporation 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-2176978	temporary transfers to/ from due primarily to having common paymaster and payables	\$2,853.00	(\$12,119-00)
Backbone Housing, inc 1966 Greensoring Drive, Ste 200 F Timonium, Maryland 21093	52-1612191	temporary transfers to/ from due primarily to having common paymaster and payables	\$78,851 00	(\$83,576 00)

Trinity House, Inc. 1966 Greensoring Drive, Ste 200 Timonium, Maryland 21093	52-1911953	temporary transfers to/ from due primarily to having common paymaster and payables	\$302,848 00	(\$311,582 00)
Woodlawn Senior Housing, Inc.	47-0937712	temporary transfers to/	\$238,291 00	(\$296,513.00)
1966 Greensoring Drive, Ste 200		from due primarily to having		
Timonium, Maryland 21093		common paymaster and		İ
		payables ^	· · · · · · · · · · · · · · · · · · ·	

\$10,299,436 00 (\$10,367,734 00)