Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2018

Depart	ment of th	he Treasury	Do not en	ter social security numbers on this	form as it may be m	ade public.		Open to Public
•		e Service	Go to w	ww.irs.gov/Form990 for instructions	s and the latest info	rmation.		Inspection
A F	or the	2018 calenda	r year, or tax year begin	ining	, 2018, and e	nding		, 20
В с	heck if ap	oplicable: C	Name of organization Nati	onal Council of Catholic	Women		DE	Employer identification no.
Δ Α	ddress ch	nange	Doing business as				52	-1738369
🗌 и	ame char	nge	Number and street (or P.O. bo	x if mail is not delivered to street address)		Room/suite	ΕT	Telephone number
🗌 In	itial returi	n	200 North Glebe	e Road		725	(7	03)224-0990
E F	inal returr	n/terminated	City or town, state or province,	country, and ZIP or foreign postal code			G	Gross receipts
Δ Α	mended r	return	Arlington, VA 2	22203			\$	690,396
Δ Α	pplication	n pending F	Name and address of principal	lofficer: Rose Martinet		H(a) Is this a group	return for sub	ordinates? Yes X No
			Same as C above	2		H(b) Are all subor	dinates inc	luded? Yes No
I Ta	ax-exemp	ot status: 🛛 🗴 5	501(c)(3) 501(c) () ◀ (insert no.)	527	lf "No," a	ittach a list.	(see instructions)
JW	/ebsite:	► www.	nccw.org			H(c) Group exer	nption num	ber 🕨
K F	orm of ore	ganization: 🔀 C	Corporation 🗌 Trust 🗌 Ass	ociation 🔲 Other 🕨	L Year of formation: 1	.920 M State	of legal dor	nicile: DC
Par	tl	Summary	,					
	1	Briefly describ	e the organization's missi	ion or most significant activities: <u>NC</u>	CW represents	and serves	all C	atholic
۵		women. N	CCW acts through	its membership to suppor	rt, empower, a	and educate	all Ca	atholic
ũ	.	women in	spirituality, le	adership, and service. No	CCW programs r	espond with	gospe	el values to
Activities & Governance				nd society in the modern				
ove	2	Check this box	x 🕨 🗌 if the organization	discontinued its operations or dispose	ed of more than 25%	of its net assets.		
Ŭ	3	Number of vot	ing members of the gove	rning body (Part VI, line 1a) • • • •			3	29
ŝ				s of the governing body (Part VI, line 1			4	29
itie				n calendar year 2018 (Part V, line 2a)			5	9
ctiv				necessary)			6	40
Ă				Part VIII, column (C), line 12 • • • •			7a	0
							7b	0
						Prior Year		Current Year
	8	Contributions	and grants (Part VIII. line	1h)	[,453	337,897
ne							,475	290,775
Revenue		-		A), lines 3, 4, and 7d)		205	277	47
Sev				nes 5, 6d, 8c, 9c, 10c, and 11e) • • •		22	,037	49,315
-				must equal Part VIII, column (A), line 1			,242	678,034
				X, column (A), lines 1-3)	,		,630	5,453
				ζ, column (A), line 4)		-	/030	0
		-		e benefits (Part IX, column (A), lines 5-		222	,748	234,297
Expenses			· · ·	column (A), line 11e)	· · –	666	, , 10	
ens			ng expenses (Part IX, col		15,805			<u> </u>
Хр				nes 11a-11d, 11f-24e) ••••••		453	,525	448,856
				equal Part IX, column (A), line 25)			,903	688,606
		•	· ·	18 from line 12			, 339	(10,572)
20						Beginning of Current		(<u>10,372</u>) End of Year
Net Assets or Fund Balances	20	Total assets (F	Part X line 16)				,414	379,208
Bala		•						
let ⊿ und				line 21 from line 20 • • • • • • • •			,663	100,029
Par		Signatur				209	,751	279,179
				rn, including accompanying schedules and statem	nents, and to the best of my	knowledge and belief.	it is	
				ficer) is based on all information of which preparer		3 ,	-	
		Daga	Nowtinot					
Sigr	า 🗌	Signature	Martinet of officer				Date	
Here			_					
TICI	-		Martinet, Treas	urer				
		,			Date			
Paic		Print/Type prepa		Preparer's signature	Duit	Check	if PTIN	
	a Darer	John K.	•			self-employe	d I	201429307
-	Only	Firm's name	Mullins,			Firm's EIN		
056	Unity	Firm's address		consin Avenue		Phone no.		60.F4
	h . 100			MD 20814			2-770	
				own above? (see instructions)				
For F	aperw	ork Reduction	n Act Notice, see the se	parate instructions.				Form 990 (2018)

Form	990 (2018) National Council of Catholic Women	52-1738369	Page 2
Pai	rt III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		🗌
1	Briefly describe the organization's mission:		
	NCCW represents and serves all Catholic women. NCCW acts through its member	ship to supp	ort,
	empower, and educate all Catholic women in spirituality, leadership, and ser		
	programs respond with gospel values to the needs of the church and society i		
	world.		
2	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	🗌 Yes	x No
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?	· · · · · · · · Yes	x No
	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as measu	red by	
•	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	-	
	the total expenses, and revenue, if any, for each program service reported.	ourioro,	
4a	(Code:) (Expenses \$ 244,157 including grants of \$ 1,000) (Revenue	\$ 290	,775)
τu	NCCW holds an annual convention to provide members with educational programm		
	on important issues of interest to members, and spiritual connection to othe		
	throughout the United States. NCCW also offers a leadership training program		
	are offered at dioceses and parishes throughout the United States to offer of		
	opportunity to improve and enhance their leadership skills both in their loc		
	and in the church as a whole.	ai organizat.	
	and in the church as a whore.		
4b	(Code:) (Expenses \$ 198,437 including grants of \$) (Revenue	\$)
40	Membership dues support the provision of services and benefits to members, i)
	and electronic communication.	.neluaing prin	
	and electronic communication.		<u> </u>
			<u> </u>
4C	(Code:) (Expenses \$49,736 including grants of \$) (Revenue)
	NCCW uses a commission structure to address key issues of interest to member		
	provided through the national commissions to affiliate commissions via mail,		
	and on the website. The council also produces a quarterly magazine, Catholic	: Woman, which	h is
	distributed to all members, subscribers, and others.		
4d	Other program services (Describe in Schedule O.)	,	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses 492,330		
EEA		Form	n 990 (2018)

Forr	n 990 (2018) National Council of Catholic Women 52-173	8369	F	age 3
Pa	rt IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"			
	complete Schedule A · · · · · · · · · · · · · · · · · ·	· 1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	· 2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to			
	candidates for public office? If "Yes," complete Schedule C, Part I	. 3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	. 4		X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	- 5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors			
	have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If			
	"Yes," complete Schedule D, Part I	- 6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	. 7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III · · · · · · · · · · · · · · · · ·	- 8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or			
	debt negotiation services? If "Yes," complete Schedule D, Part IV	. 9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted			
	endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V · · · · · · · · · ·	· 10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,			
	VII, VIII, IX, or X as applicable.			
а	6 I 7 67 II 7			
_	complete Schedule D, Part VI	• 11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	• 11b		X
c	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	· 11c		X
C	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets			
	reported in Part X, line 16? If "Yes," complete Schedule D, Part IX			X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	· 11e	X	
f				37
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X · · · · ·	• 11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	10-	1 37	
	Schedule D, Parts XI and XII	· 12a	X	
b		4.01		37
40	"Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional • • • • • •			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		-	X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	· 14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,			
	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>	. 14b		х
45		. 140		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	. 15		х
16		. 15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other	16		v
17	assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	· 16	+	X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX. column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	. 17		v
10	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	· 1/	-	X
18	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	. 18		v
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	. 10	-	X
19	If "Yes," complete Schedule G, Part III • • • • • • • • • • • • • • • • •	. 19		v
20 a				X X
20 a				
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	. 200	-	<u> </u>
<u> </u>	domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> • • • • • • • • • • • • • • • • •	. 21		х
		- 1	1	1 <u>1</u> 1

8)	National	Council	of	Catholic	Women
Checklist of	Required	Schedule	S (0	continued)	

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the			
	organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			
	through 24d and complete Schedule K. If "No," go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		└───
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior			
	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any			
	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled	07		v
20	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
•	Part IV instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		Х
a b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	200		
b	Schedule L, Part IV · · · · · · · · · · · · · · · · · ·	28b		х
с	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	200		
U	was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	20		
	conservation contributions? If "Yes," complete Schedule M	30		х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	-		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1 · · · · · · · · · · · · · · · · · ·	34		Х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and			
	19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Part				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5			
b	Enter the number of Form W-2G included in line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	Х	1

Form	990 (2018) National Council of Catholic Women 52-17383	69	Р	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 9			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country:			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
_	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	_		
	and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7.		v
4	If "Yes," indicate the number of Forms 8282 filed during the year	7c		X
d	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
e f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7e 7f		X
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of qualined intellectual property, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	711		
U	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.) ••••••••••••••••••••••••••••••••••••			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year •••••• 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year	15		X
	If "Yes," see instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			

Form 9	90 (2	018)
--------	-------	------

	990 (2018) National Council of Catholic Women 52-173836		P	9age 6
Pai	t VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "I	Vo″		
	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.			_
_	Check if Schedule O contains a response or note to any line in this Part VI	• • •		• X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 29			
	If there are material differences in voting rights among members of the governing body, or			
	if the governing body delegated broad authority to an executive committee or similar			
	committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 29			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint			
	one or more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
800	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			<u> </u>
40-		40-	Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	Х	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	106		v
44.0		10b	Х	Х
11a		11a		
b 120	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	120	v	
12a		12a 12b	X X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes,"</i>	120	Δ	
C		12c	v	
13	describe in Schedule O how this was done Did the organization have a written whistleblower policy?	13	X X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by	14	Λ	
15	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
2	The organization's CEO, Executive Director, or top management official	15a		Х
a b	Other officers or key employees of the organization	15a		X
D	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).	150		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
Toa	with a taxable entity during the year?	16a		x
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	104		
D	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		L
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)			
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.			
	Image: Solution of public inspection: indicate new you made these available. One of an indicate public inspection: indicate new you made these available. One of an indicate public indicate public inspection. Indicate new you made these available. One of an indicate public indicate publi			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and			
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records:			
	The Organization (703)224-0990, 200 North Glebe Road, Arlington, VA 22203			
			//	2010)

Form 990 (2018) National Council of	Catholic Women	52-1738369	Page 7
Part VII Compensation of Officers, Direct Independent Contractors	ors, Trustees, Key Em	ployees, Highest Compensated Employees	, and
Check if Schedule O contains a response or	ote to any line in this Part VII		- 🗌
Section A. Officers, Directors, Trustees, Key Employe	es, and Highest Compensat	ed Employees	
1a Complete this table for all persons required to be listed. R organization's tax year.	eport compensation for the ca	endar year ending with or within the	

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

			pens			ly curre			lusiee.	
					(C) sition					
(A)	(B)	(do i	not ch			than one		(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for	offic	er an			is both a r/trustee		Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC) fr organization	from the organization and related organizations
(1) Alma Meyer Director	10.00	x						0	0	0
(2) Barbara Birds	10.00								<u> </u>	0
Director		x						o	o	0
(3) Beth Keele	10.00									
Director		X						o	o	0
(4) Beverly South Director	10.00	x						0	0	0
(5) Carol Brennan	10.00_									
Director	10.00	X						0	0	0
(6) Cindy Perry Director		X						0	0	0
(7) Diann Nance Director	10.00	x						0	0	0
(8) Elizabeth Schiavone	10.00									
Director		X						0	0	0
(9) Geralyn Kogut Director	10.00	x						0	0	0
(10)Irene Schmidt Director	10.00	x						0	0	0
(11)Jean_Kelly	10.00	x		x						
President Elect	10.00							0	0	0
(12)Jean_Bazley Director		X						0	0	0
(13)JoAnn Messing Director		x						0	0	0
(14)Joyce Scott		x								
Director		A						0	0	0 Form 990 (2018)

Form 990 (20	8) National Council of Catholic Women	52-1738369	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Co Independent Contractors	ompensated Employe	es, and
	Check if Schedule O contains a response or note to any line in this Part VII		
Section A.	Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete organization's	his table for all persons required to be listed. Report compensation for the calendar year ending with or v tax year.	within the	

 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee."

 List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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

	u organizatio		pens	sale	u all	y curre				
					(C)					
(A)	(B)				sition			(D)	(E)	(F)
Name and Title	Average hours per week (list any	box,	, unle	ss pei	rson i	han one s both a r/trustee	n	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Kathleen Penno Director	10.00	x						0	0	0
(2) Kerry Whitney	10.00							°	Ű	v
		X						0	0	0
(3) Marla Johnston Director	10.00	X						0	0	0
(4) Mary_Glosson Director	10.00	x						0	0	0
(5) Mary Ann Schmitt Director	10.00	x						0	0	0
(6) Mary Elizabeth Stewart Blogoslawski President	10.00	x		x				0	0	0
(7) Patricia Voorhes Director	10.00	X						0	0	0
(8) Rose_Guerrero Director	10.00	x						0	0	0
(9) Rose Martinet Treasurer	10.00	x		x				0	0	0
(10)Rosie_Castillo Director	10.00	x						0	0	0
(11)Ruth_Warren Director	10.00	X						0	0	0
(12)Sheila Hopkins Past President	10.00	x		X				0	0	0
(13)Teresa Sarzinski Secretary	10.00	x		x				0	0	0
(14)Tracy Janis Director	10.00	x						0	0	0
										Form 990 (2018)

Form 990 (2018)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

52-1738369 Page 8

(A) Name and title	(B) Average hours per week (list any	box,	unless	s pers a dire	ition ore th on is	nan one both an trustee)		(D) Reportable compensation from	(E) Reportable compensation from related		(F) stimated mount of other	
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	or a	npensati from the ganizatic nd relate ganizatio	on d
(15)Veronica Way	10.00	x						0	0			0
	10.00							0	0			
Director		X						0	0			0
(17)Susanne C_NelsonHelms Director	10.00_	x						0	0			0
(18)Angie N Malatzo Director	10.00	x						0				0
(19)Nina Romero- Caron Director	10.00_	x						0	0			0
(20)Margaret_Jackson Director	10.00	x						0				0
(21)Jackie Brandon	10.00	- 23										
Director		X						0	0			0
(22)Susan Johnson	10.00											
Director		X						0	0			0
(23)Marion Smith Reynoso Director	10.00	x						0	0			0
(24)Kathryn Parish- Reese	10.00							-				
		X						0	0			0
(25)Jeannie Salazar Friddell	10.00											
Director		X						0	0			0
1b Sub-total	· · · · · · · ·	• • •	• •	• •	• •	• • •	•			_		
c Total from continuation sheets to Part VII, Sec d Total (add lines 1b and 1c)		• • •	•••	•••	•••	• • •		0		_		
d Total (add lines 1b and 1c)							▶ nore	0 than \$100 000 of	-			0
reportable compensation from the organization	•		,						0		Yes	No
3 Did the organization list any former officer, directed	or, or trustee, k	key em	ploy	ee, d	or hi	ghest a	com	pensated			105	
employee on line 1a? If "Yes," complete Schedule		-				-				3		Х
4 For any individual listed on line 1a, is the sum of r	eportable com	pensa	tion	and	othe	er comp	oens	ation from the				
organization and related organizations greater that												
individual • • • • • • • • • • • • • • • • • • •										4		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>								5		Х		
section B. Independent Contractors										Λ		
1 Complete this table for your five highest compens	ated independ	ent co	ntrad	ctors	tha	t receiv	ved	more than \$100,00)0 of			
compensation from the organization. Report comp	pensation for the	ne cale	enda	r yea	ar er	nding w	vith o	or within the organ	ization's tax			
year.												
(A)								(B)			(C)	
Name and business addres	S							Description of	services	Com	pensatio	n

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

Form 9		,		Catholic Wom	nen		52-17383	69 Page 9
Part	VIII	Statement of Revenu						_
		Check if Schedule O contair	ns a response or n	ote to any line in th	1			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ងខ	1a	Federated campaigns • • •	••••• 1a					
unt	b	Membership dues	1b	238,148				
Amc G	c	Fundraising events • • • •	••••• 1c					
Gift	d	Related organizations • • •						
Sim,	е	Government grants (contributi						
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, gi						
l Otl		and similar amounts not includ		99,749				
Cor	g	Noncash contributions include						
	h	Total. Add lines 1a-1f • •	<u></u>		337,897			
e	20			Business Code	000 555	000 555		
veni	2a b	<u>Meetings / Seminars</u>		900099	290,775	290,775		
e Re	C C							
ervic	d							
Program Service Revenue	e u							
ograi	f	All other program service rever						
Ъл		Total. Add lines 2a-2f • • •			290,775			
	-	Investment income (including d						
		and other similar amounts)			47			47
	4	Income from investment of tax-	exempt bond proc	ceeds ••• ►				
	5	Royalties • • • • • • • • • • • • • • • • • • •						
			(i) Real	(ii) Personal				
	6a	Gross rents						
		Less: rental expenses · · · ·						
		Rental income or (loss) • • •						
	d	Net rental income or (loss) •		· · · · · · · •				
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b	Less: cost or other basis and sales expenses ••••						
	c	Gain or (loss)						
	d	Net gain or (loss) • • • • •		<u> </u>				
Other Revenue	8a	Gross income from fundraising						
evel		events (not including \$						
r R		of contributions reported on line						
the	Ι.	See Part IV, line 18 • • • •						
õ		Less: direct expenses • • •		L				
		Net income or (loss) from fundr	-	· · · · · · · •				
	98	Gross income from gaming act See Part IV, line 19 • • • • •						
	h	Less: direct expenses						
		Net income or (loss) from gami		└ <u></u>				
		Gross sales of inventory, less						
	Tua	returns and allowances	a	60,592				
	b	Less: cost of goods sold ••		12,362				
		Net income or (loss) from sales			48,230	48,230		
		Miscellaneous Revenue	,	Business Code				
	11a	Other		900099	1,085	1,085		
	b							
	c							
		All other revenue • • • • •						
	e	Total. Add lines 11a-11d •			1,085			
	12	Total revenue. See instruction	s		678,034	340,090	0	47

National Council of Catholic Women Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). Check if Schedule O contains a response or note to any line in this Part IX (D) Do not include amounts reported on lines 6b, 7b, (A) (B) (C) Total expenses Program service Fundraising Management and 8b, 9b, and 10b of Part VIII. expenses general expenses expenses 1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . 5,453 5,453 2 Grants and other assistance to domestic 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 4 Benefits paid to or for members . . . Compensation of current officers, directors, 5 trustees, and key employees 54,096 81,156 23,642 3,418 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 108,586 72,380 31,633 4,573 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 479 . . 7,605 11,410 3,326 9 Other employee benefits 16,222 10,814 4,724 684 Payroll taxes 10 16,923 11,280 4,930 713 11 Fees for services (non-employees): а 199 199 b Accounting С 35,296 35,296 d Professional fundraising services. See Part IV, line 17 . е f Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column a (A) amount, list line 11g expenses on Schedule O.) ... 20,619 6,344 13,957 318 12 Advertising and promotion 333 333 13 Office expenses 107,645 21,961 1,772 83,912 14 Information technology 15 16 64,526 46,382 15,100 3,044 17 21,203 7,781 13,422 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 173,959 173,266 693 20 21 Payments to affiliates 22 Depreciation, depletion, and amortization 11,598 7,866 3,216 516 23 6,530 4,818 1,424 288 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) Other 6,948 6,948 а b С d All other expenses е 25 Total functional expenses. Add lines 1 through 24e 688,606 492,330 180,471 15,805 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► if following SOP 98-2 (ASC 958-720)

Form 990	(2018)	National	Council	of	Catholic	Women
Part X	Balance	Sheet				

Fai		Dalalice Sileet			
		Check if Schedule O contains a response or note to any line in this Part X			
			(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	197,470	1	233,361
	2	Savings and temporary cash investments • • • • • • • • • • • • • • • • • • •		2	
	3	Pledges and grants receivable, net	84,820	3	69,048
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use • • • • • • • • • • • • • • • • • • •	14,799	8	28,680
As	9	Prepaid expenses and deferred charges	7,013	9	6,480
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D • • • • 10a 58,889			
	b	Less: accumulated depreciation · · · · · · · · · · 10b 26,123	27,439	10c	32,766
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11 • • • • • • • • • • • • • • • • • •		13	
	14	Intangible assets • • • • • • • • • • • • • • • • • • •		14	
	15	Other assets. See Part IV, line 11 • • • • • • • • • • • • • • • • • •	8,873	15	8,873
	16	Total assets. Add lines 1 through 15 (must equal line 34)	340,414	16	379,208
	17	Accounts payable and accrued expenses	29,631	17	60,762
	18	Grants payable • • • • • • • • • • • • • • • • • • •		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to current and former officers, directors,			
jiit		trustees, key employees, highest compensated employees, and			
Liabilities		disqualified persons. Complete Part II of Schedule L		22	
-	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	21,032	25	39,267
	26	Total liabilities. Add lines 17 through 25	50,663	26	100,029
ú		Organizations that follow SFAS 117 (ASC 958), check here > X and			
ICe		complete lines 27 through 29, and lines 33 and 34.	-		
alan	27	Unrestricted net assets	190,432	27	189,718
Net Assets or Fund Balances	28	Temporarily restricted net assets	99,319	28	89,461
nnd	29	Permanently restricted net assets		29	
ц г		Organizations that do not follow SFAS 117 (ASC 958), check here			
o s		complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net	32	Retained earnings, endowment, accumulated income, or other funds		32	
-	33	Total net assets or fund balances	289,751	33	279,179
	34	Total liabilities and net assets/fund balances	340,414	34	379,208

EEA

Form	990 (2018) National Council of Catholic Women	52-17383	69	Pa	age 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				. 🗌
1	Total revenue (must equal Part VIII, column (A), line 12)		(578,	034
2	Total expenses (must equal Part IX, column (A), line 25)		(588,	606
3	Revenue less expenses. Subtract line 2 from line 1			10,	572)
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	• 4	:	289,	751
5	Net unrealized gains (losses) on investments	- 5			
6	Donated services and use of facilities	. 6			
7	Investment expenses	. 7			
8	Prior period adjustments	- 8			
9	Other changes in net assets or fund balances (explain in Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B)) ••••••••••••••••••••••••••••••••••	. 10	:	279,	179
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				<u>· 🗌 </u>
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 🛛 🖾 Accrual 🔲 Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		• 2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or				
	reviewed on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		. 2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a				
	separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis Both consolidated and separate basis				
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight				
	of the audit, review, or compilation of its financial statements and selection of an independent accountant?		· 2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in				
	Schedule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in				
	the Single Audit Act and OMB Circular A-133?		- 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		. 3b		
			F	000 /	0040

Form 990 (2018)

S	CI	Н	Е	D	U	L	Е	Α	

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

(For	m 99	0 or 990-EZ)	Complete if the organiza		r(c)(s) organization of a se		(a)(1) nones	tempt charitable trust.		
Depar	tment	of the Treasury		Atta	ch to Form 990 or Forn	n 990-EZ.			Open to Public	
Intern	al Rev	enue Service	•	Go to www.irs.go	v/Form990 for instructi	ons and t	he latest i	nformation.	Inspection	
Name	of the	e organization						Employer identific	ation number	
Nat	ion	al Council	of Catholic W	omen				52-17383	69	
Pa	rt I	Reason	for Public Charit	y Status (All or	ganizations must c	omplete	this par	t.) See instructior	ıs.	
The	orga	nization is not a	private foundation bec	ause it is: (For line	s 1 through 12, check on	ly one box	.)			
1	ň		•	•	ches described in sectio	•	,			
2	Н				Schedule E (Form 990 or					
3	H				described in section 17		(111)			
	H	•	• •	0			. ,	(A)(III) Enter the		
4			• ·	ated in conjunction	with a hospital described	a in sectio	n 170(a)(1)(A)(III). Enter the		
_			e, city, and state:	<i></i>						
5		-		-	university owned or opera	ated by a g	jovernmen	tal unit described in		
	_	-)(1)(A)(iv). (Complete I	,						
6	Ц	A federal, state	e, or local government	or governmental ur	it described in section 1	70(b)(1)(A	.)(v).			
7		An organizatio	n that normally receive	s a substantial part	t of its support from a gov	vernmenta	l unit or fro	m the general public		
		described in se	ection 170(b)(1)(A)(vi)	. (Complete Part II.)					
8		A community to	rust described in sectio	on 170(b)(1)(A)(vi)	. (Complete Part II.)					
9		An agricultural	research organization	described in section	on 170(b)(1)(A)(ix) opera	ted in con	junction wi	th a land-grant college	е	
		or university or	a non-land-grant colle	ege of agriculture (s	ee instructions). Enter th	e name, c	ity, and sta	te of the college or		
	university:									
10	Х	An organizatio	n that normally receive	s: (1) more than 33	3 1/3% of its support from	n contributi	ons, meml	pership fees, and gros	S	
	_	-	-		subject to certain exception					
		•		•	siness taxable income (le	•	,			
		••••••			ection 509(a)(2). (Compl		,			
11	П		•		est for public safety. See		,			
12	Н	•	•		the benefit of, to perform			o carry out the nurnos	-00	
12		•	•	-	ed in section 509(a)(1) o			• • •		
			-		ne type of supporting orga		•		•	
	а				sed, or controlled by its s		-	.,	y	
			,		appoint or elect a major	ity of the d	irectors or	trustees of the		
		_ ·· •	organization. You mu	-						
	b			•	ntrolled in connection with	• •	-	.,		
		control or	management of the su	pporting organization	on vested in the same pe	rsons that	control or	manage the supporte	d	
		organizatio	on(s). You must comp	lete Part IV, Section	ons A and C.					
	С	U Type III fu	nctionally integrated.	. A supporting orga	nization operated in conn	ection with	n, and func	tionally integrated with	h,	
		its support	ed organization(s) (see	e instructions). You	must complete Part IV	, Sections	A, D, and	Ε.		
	d	Type III no	on-functionally integra	ated. A supporting	organization operated in	connectio	n with its s	upported organizatior	(s)	
		that is not	functionally integrated.	The organization g	generally must satisfy a d	listribution	requireme	nt and an attentivene	SS	
		requireme	nt (see instructions). Ye	ou must complete	Part IV, Sections A and	d D, and P	art V.			
	е	Check this	box if the organization	received a written	determination from the I	RS that it i	s a Type I,	Type II, Type III		
		functional	y integrated, or Type III	non-functionally in	tegrated supporting orga	nization.				
	f									
	g		lowing information abo							
) Name of supported		(ii) EIN	(iii) Type of organization	(iv) Is the o	rganization	(v) Amount of monetary	(vi) Amount of	
	(,	g	((described on lines 1-10		Ir governing	support (see	other support (see	
					above (see instructions))	docum	nent?	instructions)	instructions)	
						Yes	No			
						163				
(A)										
(B)										
(C)										
(D)										
(E)										
()										

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

Total

	lule A (Form 990 or 990-EZ) 2018 Nati	onal Counci	l of Catholi	.c Women		52-173836	3 9 Page 2
Pa	rt II Support Schedule for Or	ganizations E	Described in S	Sections 170(b	o)(1)(A)(iv) and	l 170(b)(1)(A)(vi)
	(Complete only if you chec	ked the box o	n line 5, 7, or 8	3 of Part I or if t	the organizatio	n failed to qual	ify under
	Part III. If the organization	fails to qualify	under the test	ts listed below,	please comple	te Part III.)	
Sec	tion A. Public Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf • • • • •						
3	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge • • • • • •						
4	Total. Add lines 1 through 3 · · · · ·						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
6	Public support. Subtract line 5 from line 4 .						
Sec	tion B. Total Support			•	•		
	ndar year (or fiscal year beginning in) 🕨	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
7	Amounts from line 4						
8	Gross income from interest, dividends,						
	payments received on securities loans,						
	rents, royalties and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the business						
	is regularly carried on ••••••						
10	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.) • • • • • • • • • • •						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activities, etc. (see instructions)	• • • • • • • • •			12	
13	First five years. If the Form 990 is for the c						
<u></u>	organization, check this box and stop here						▶∐
-	tion C. Computation of Public Su			(0)			
14	Public support percentage for 2018 (line 6,						%
15	Public support percentage from 2017 Sche						%
16a	33 1/3% support test - 2018. If the organiz						
	box and stop here. The organization qualifi						· · · · ► 📋
b	33 1/3% support test - 2017. If the organiz						
	this box and stop here. The organization q						▶ []
17a	10%-facts-and-circumstances test - 2018	•					
	10% or more, and if the organization meets				• •		
	Part VI how the organization meets the "fac		-				_
	organization • • • • • • • • • • • • • • • • • • •						· · · · 🕨 🔲
b	10%-facts-and-circumstances test - 2017	. If the organization	on did not check a	box on line 13, 16a	, 16b, or 17a, and I	ine	
	15 is 10% or more, and if the organization r	neets the "facts-ar	nd-circumstances"	test, check this box	x and stop here.		
	Explain in Part VI how the organization mee	ets the "facts-and-	circumstances" tes	st. The organizatior	n qualifies as a pub	licly	
	supported organization • • • • • • • •						· · · · 🕨 🔲
18	Private foundation. If the organization did	not check a box o	n line 13, 16a, 16b	, 17a, or 17b, chec	k this box and see		
	instructions	<u></u> .	<u></u>	<u></u> .	<u></u>	<u></u>	· · · · ▶ 🔲
EEA						Schedule A (F	orm 990 or 990-EZ) 2018

7a Amounts included on lines 1, 2, and 3 received from disqualified persons 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 8 Public support. (Subtract line 7c from line 5. 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 Section B. Total Support (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 997, 875 840, 988 784, 941 673, 547 677, 987 3, 975, 338 10a Gross income from interest, dividends, payments received on securities loans, rents, royalies, and noom from similar sources 277 47 324 10a Gross income from interest, dividends, spayments received on securities loans, rents, royalies, and nobe 2777 47 324 10a Gross income from interest, dividends, and 10b 100 100 100 100 100 100 100 100 100 100 1000 100 100 <td< th=""><th></th><th>dule A (Form 990 or 990-EZ) 2018 Natio</th><th>onal Council</th><th>of Catholic</th><th>Women</th><th></th><th>52-1738369</th><th>Page 3</th></td<>		dule A (Form 990 or 990-EZ) 2018 Natio	onal Council	of Catholic	Women		52-1738369	Page 3
If the organization fails to qualify under the tests listed below, please complete Part IL) Section A. Public Support Calendar year (or fiscal year beginning in) * (a) 2016 (a) 2017 (a) 2018	Pa							5 / 11
Section A, Public Support (a) 2014 (b) 2015 (c) 2017 (a) 2018 (c) 2017 (a) 2018 (c) 2017 (c) 2018 (c) 2017 (c) 2018 (c) 2017 (c) 2018 (c)								r Part II.
Calendary year (or fiscal year (or fisc	<u> </u>		luality under the	e tests listed b	elow, please co	omplete Part II.	.)	
1 Cline parts. controlutions, metabalding signet, 1, effect, 064 192, 305 148, 462 362, 739 337, 897 1, 666, 467 2 Core metable form admidsing, metabalding signet, 1, effect, 064 192, 305 148, 462 362, 739 337, 897 1, 666, 467 3 Core metable form admidsing, metabalding signet, 1, effect, 064 192, 305 148, 462 362, 739 337, 897 1, 666, 467 3 Core metable form admides integration administry metabalding signet, 1, effect, 064 192, 305 148, 462 362, 739 337, 897 1, 666, 467 3 Core metable form admides integration of the source of the control of the source			(-) 2014	(1-) 0045	(-) 2040	(4) 0047	(-) 0040	(f) T
Income (be not induke any "unusual parits ") 643,064 192,305 148,462 362,739 337,897 1,686,467 Close requires performed, or facilities for maintering, methodice and or envices performed. In a revices or facilities to the origination originatis originatis origination originatis originatis origination origina	Cale		(a) 2014	(D) 2015	(c) 2016	(a) 2017	(e) 2018	(f) Iotai
2 Grass ancipts from administry, mertanders build a server performe, or facilities turnshad to be performed, or facilities turnshad to be performed, or facilities turnshad to be constrained from administry to the or administry tables that are not an invested to be constraines under section 151 352, 311 648, 683 635, 479 310, 808 340, 090 2, 288, 871 3 Grass medipts from administry that are administry and section to building section 151 352, 311 648, 683 635, 479 310, 808 340, 090 2, 288, 871 4 Tax recruits likely the mail to or administry that be administry that the mail to be organization where the mail section 151 997, 875 840, 988 784, 941 673, 547 677, 987 3, 975, 338 4 Annous in build drug the mail to or the file administry that the mail to be organization where the disquilled an iters 2 and 3 moore the file administry that the specifies of the meral that the mail to organize the specifies of the meral that the specifies of the administry that the specifies administry that the mail to organize the meral that the specifies of the dissue that the specifies or the dissue the mail to organize the meral that the specifies of the specifies of the specifies administry the specifies of the specifies administry that the term of the specifies of the dissue that be administry that the specifies administry the specifies of the specifies admines that the term of the dissue tha	1		645-064	192.305	148,462	362 739	337 897	1.686.467
turnished in any activity mail is related to the organization become projection of the account of the a	2	, , , , , , , , , , , , , , , , , , ,	0107001		110,101			
empirization's face.exempt purpose								
unclease fixed or builtest under section 513 - Tax rownues lowid for the organization's period to organization's period to its behalt of the fixed it organization's period to its behalt of the section of the design of the section of th			352,811	648,683	636,479	310,808	340,090	2,288,871
comparison's benefit and ether paid to or expended on its behalf	3	•						
timesized by a governmental unit to the organization without charge 997, 875 840,988 784,941 673,547 677,987 3,975,338 7a Amounts included on lines 1, 2, and 3 28,671 35,167 32,481 27,794 8,995 133,108 b Amounts included on theme 2, and 3 28,671 35,167 32,481 27,794 8,995 133,108 b Amounts included on theme 2, and 3 28,671 35,167 32,481 27,794 8,995 133,108 b Amounts included on theme 2, and 3 28,671 35,167 32,481 27,794 8,995 133,108 b Weblic support. (b) 2015 (c) 2016 (d) 2017 (o) 2018 (f) Total 9 Amounts from inne 6 97,875 840,988 784,941 673,547 677,987 3,975,338 10a Goas income from inneast, dividends, responses 277 47 324 10a Goas income from inneast, dividends, responses 277 47 324 10a Juspont, foutune for an innula source on tho	4	organization's benefit and either paid to						
7a Amounts included on lines 1, 2, and 3 received from disquilled persons 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 b Amounts included on lines 2, and 3 received from disquilled persons 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 b Amounts included on lines 2, and 3 received from disquilled persons 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 b Amounts included on lines 2, and 3 received from disquilled persons 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 c Add lines 7 and 7b 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 Section B. Total Support 28, 671 35, 167 32, 481 27, 794 8, 995 133, 108 9 Amounts from line 3, and 7b (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 4, didends, persons and records from string reacree 277 47 324 9 Burstein broke incesse toxel income (less sciencin from string reacree 277 47 324 9 Burste	5	furnished by a governmental unit to the						
tensived from disqualified persons 28,671 35,167 32,481 27,794 8,995 133,108 b Amounts included on lines 2 and 3 received from ther than diguinified persons that exceed the greater of \$5.000 or 1% of the amount on line 13 for the year 28,671 35,167 32,481 27,794 8,995 133,108 8 Public support. (Sutratiline 7 from line 0,) 28,671 35,167 32,481 27,794 8,995 133,108 9 Amounts for line 6 28,671 35,167 32,481 27,794 8,995 133,108 8 Public support. (Sutratiline 7 from line 0,) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 997,875 840,988 784,941 673,547 677,987 3,975,338 10a Gross income from interest, dividends, payments received on securities loans, ronts, royatiles, and income from site sources 277 47 324 10 Urrelated business taxable income (less section 511 Laws) from businesse sociation 511 Laws) from 599 Laws 277 47 324 1	6	Total. Add lines 1 through 5	997,875	840,988	784,941	673,547	677 , 987	3,975,338
b Amounts included on lines 2 and 3 received from other than disqualified persons that acceed the greater of \$5.00 or 1% of the amount on line 13 for the year 28,671 35,167 32,481 27,794 8,995 133,108 6 Public support Calina Ra and 7b 28,671 35,167 32,481 27,794 8,995 133,108 7 Calendary year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6	7a		00 555	25 4 4 -	20.40-		0 00-	
reacked from other than disqualified persons that exceed the greater of \$5.000 or 1% of the amount on line 13 for the year 28,671 35,167 32,481 27,794 8,995 133,108 C Add lines 7a and 7b 28,671 35,167 32,481 27,794 8,995 133,108 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6		received from disqualified persons	28,671	35,167	32,481	27,794	8,995	133,108
persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year 28,671 35,167 32,481 27,794 8,995 133,108 8 Public support. (Subtract line 7.6 rom line 6. 3,842,230 Section B. Total Support Calendar year (of fiscal year beginning in) ▶ 9 Amounts from line 6. 997,875 840,988 784,941 673,547 677,987 3,975,338 10 Gross income from interest, dividends, payments received on securities loans, rents, royalies, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 taxes) from businesses acquired lark-June 30, 1975 277 47 324 1 Net income from sequences acquired lark sets regularly carried on 277 47 324 10 Unrelated business taxable income (less section 511 taxes) from businesses acquired lark sets (Explain in Part VI.) 1,099 1,102 723 2,924 11 Net income from unitate 00, whether or on the business is regularly carried on 1,099 1,202 723 2,924 12 Other income. Do not include gain on loss form the seal or carginal assets (Explain in Part VI.) 998,974 842,090	b							
a 1% of the amount on line 13 for the year 28,671 35,167 32,481 27,794 8,995 133,108 B Public support. (Subtract line 7c from line 6.) 28,671 35,167 32,481 27,794 8,995 133,108 Section B. Total Support 28,671 35,167 32,481 27,794 8,995 133,108 Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 997,875 840,988 784,941 673,547 677,987 3,975,338 10a Gross income from interest. dividends, payments received on securities loans, rents, royalites, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 trass) from businesses acquired after June 30, 1975 277 47 324 11 Net income from unrelated business as advitus and to . 2777 47 324 12 Other income. Do not include gain or loss from the sale of capital assets 1,099 1,102 723 2,924 13 Total support, Add lines 9, 100, 11, and 12,) 998,974 842,090 785,664 673,824 678,034 3,978,586 <								
8 Public support. (Subtract line 7c from line 6.) 3,842,230 Section B. Total Support (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 97,875 840,988 784,941 673,547 677,987 3,975,338 10a Gress income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 277 47 324 11 Net income from unrelated business acativities not include gain or loss from the sale of capital assets (Explain in Part V1.) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11. and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section SOI(c)(3) 15 96,657 % 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 96,653 % 16 Public support percentage for 2018 (line 10, co, column (f), divided by li								
Ime 6.1 3,842,230 Section B. Total Support (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6 997,875 840,988 784,941 673,547 677,987 3,975,338 10a Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources 997,875 840,988 784,941 673,547 677,987 3,975,338 10a Gross income from similar sources 977 47 324 b Unrelated business taxable income (less section 61 taxes) from businesses acquired after June 30, 1675 277 47 324 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	С	Add lines 7a and 7b • • • • • • • • • • • • • • • • • •	28,671	35,167	32,481	27,794	8,995	133,108
Section B. Total Support Calendar year (or fiscal year beginning in) > 9 Amounts from line 6	8							
Calendar year (or fiscal year beginning in) (a) 2014 (b) 2015 (c) 2016 (d) 2017 (e) 2018 (f) Total 9 Amounts from line 6	<u> </u>	,						3,842,230
9 Amounts from line 6 997, 875 840,988 784,941 673,547 677,987 3,975,338 10a Gross income from interest, dividends, payments received on securities leans, rents, royatties, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after-June 30, 1975 277 47 324 11 Net income from unrelated business acquired after-June 30, 1975 277 47 324 11 Net income from unrelated business acquired after-June 30, 1975 277 47 324 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI). 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)			(=) 2014	(h) 2015	(a) 2016	(4) 2017	(a) 2018	
10a Gross income from interest, dividends, payments received on securities loans, rents, royatties, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 277 47 324 c Add lines 10a and 10b 277 47 324 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 277 47 324 12 Other income. Do not include gain or loos from the sale of capital assets (Explain in Part VI.) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here			. ,			. ,	. ,	.,
payments received on securities loans, rents, royatiles, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 277 47 324 c Add lines 10a and 10b 2777 47 324 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 277 47 324 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VL) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c(3) organization. check this box and stop here			337,873	040,900	/04,941	0/3,54/	077,907	3,975,336
royalties, and income from similar sources 277 47 324 b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 277 47 324 c Add lines 10a and 10b 277 47 324 11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly caried on 277 47 324 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	10a	, , ,						
section 511 taxes) from businesses acquired after June 30, 1975						277	47	324
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on 1 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here	b	section 511 taxes) from businesses						
activities not included in line 10b, whether or not the business is regularly carried on Image: constraint of the sale of capital assets (Explain in Part VI.) 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of constraint of constraint of constraint of constraint of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Image: constraint of the provent of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Image: constraint of constraint o	с	Add lines 10a and 10b				277	47	324
activities not included in line 10b, whether or not the business is regularly carried on Image: constraint of the sale of capital assets (Explain in Part VI.) 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of constraint of the sale of capital assets (Explain in Part VI.) Image: constraint of constraint of constraint of constraint of constraint of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Image: constraint of the provent of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Image: constraint of constraint o	11	Net income from unrelated business						
loss from the sale of capital assets (Explain in Part VI.) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)	••	activities not included in line 10b, whether						
(Explain in Part VI.) 1,099 1,102 723 2,924 13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Image: Computation of Public Support Percentage 5 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 96.57 % 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 96.63 % Section D. Computation of Investment Income Percentage 17 Investment income percentage from 2017 Schedule A, Part III, line 17 17 0.00 % Investment income percentage from 2017 Schedule A, Part III, line 17 18 0.00 % 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 0.00 % 18 31/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 10 0.00 % 31/3% support tests - 2017. I	12	Other income. Do not include gain or						
13 Total support. (Add lines 9, 10c, 11, and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Image: Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 96.57 % 16 Public support percentage form 2017 Schedule A, Part III, line 15 16 96.63 % Section D. Computation of Investment Income Percentage 17 0.00 % 17 Investment income percentage from 2017 Schedule A, Part III, line 17 18 0.00 % 18 Investment income percentage from 2017 Schedule A, Part III, line 17 18 0.00 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 13 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 13 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10		•						
and 12.) 998,974 842,090 785,664 673,824 678,034 3,978,586 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Image: comparison of the organization of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 15 96.57 % 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 16 96.57 % 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 96.63 % Section D. Computation of Investment Income Percentage 17 0.00 % 18 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17 0.00 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 18 b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 10 </td <td></td> <td>(I)</td> <td>1,099</td> <td>1,102</td> <td>723</td> <td></td> <td></td> <td>2,924</td>		(I)	1,099	1,102	723			2,924
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Image: Constraint of Constrai	13	••	998,974	842,090	785,664	673,824	678,034	3,978,586
organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)) 15 96.57 % 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 96.63 % Section D. Computation of Investment Income Percentage 17 0.00 % 18 Investment income percentage from 2017 Schedule A, Part III, line 17 18 0.00 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization X b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization X	14	First five years. If the Form 990 is for the or						
15 Public support percentage for 2018 (line 8, column (f), divided by line 13, column (f)). 15 96.57 % 16 Public support percentage from 2017 Schedule A, Part III, line 15 16 96.63 % Section D. Computation of Investment Income Percentage 16 96.63 % 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17 0.00 % 18 Investment income percentage for 2017 Schedule A, Part III, line 17 18 0.00 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization X b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization X		organization, check this box and stop here						· · · · ► 🔲
16 Public support percentage from 2017 Schedule A, Part III, line 15 16 96.63 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17 0.00 % 18 Investment income percentage from 2017 Schedule A, Part III, line 17 18 0.00 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Image: State Stat	Sec	-		-				
Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f)) 17 0.00 % 18 Investment income percentage from 2017 Schedule A, Part III, line 17. 18 0.00 % 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Image: State 10 minute			.,	•			-	
 17 Investment income percentage for 2018 (line 10c, column (f), divided by line 13, column (f))							16	96.63 %
 18 Investment income percentage from 2017 Schedule A, Part III, line 17					lumn (f))		17	0.00 %
 19a 33 1/3% support tests - 2018. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization								
b 33 1/3% support tests - 2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization		33 1/3% support tests - 2018. If the organization	ation did not check	the box on line 14,	and line 15 is more	e than 33 1/3%, an	d line	
	b	33 1/3% support tests - 2017. If the organization	ation did not check	a box on line 14 or	line 19a, and line	16 is more than 33	1/3%, and	
	20			-				

	e A (Form 990 or 990-EZ) 2018 National Council of Catholic Women 52-17383	69	P	age 4
Par				
	(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete			
	and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, c	•		
	Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete F	Part V.)		
Sect	ion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No," describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
	(b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the			
	organization made the determination.	3b		
с	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
C	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
10	Was any supported organization not organized in the United States ("foreign supported organization")? If	50		
чa	"Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
h	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign	44		
b	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
•		40		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If</i> "Yes," <i>explain in</i> Part VI what controls the organization used			
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	10		
Fa	purposes.	4c		
58	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN			
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action;			
	(iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action	-		
	was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b		
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited			
	by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
_	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity	_		
_	with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?	_		
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more			
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described			
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit			
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			
	determine whether the organization had excess business holdings.)	10b		
EEA	Schedule A	Form 990	or 990-E	Z) 2018

Schedule A (Form 990 or 990-EZ) 2018 National Council of Catholic Women 52-1738 Part IV Supporting Organizations (continued) 52-1738	369	Pa	age 5
		Yes	No
 11 Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization? b A family member of a person described in (a) above? c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part V 	11a 11b /. 11c		
Section B. Type I Supporting Organizations			
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	Yes	No
 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 	2		
Section C. Type II Supporting Organizations			
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1	Yes	No
Section D. All Type III Supporting Organizations			
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		Yes	No
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI ho the organization maintained a close and continuous working relationship with the supported organization</i> (s).	w 2		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>	3		
Section E. Type III Functionally Integrated Supporting Organizations		·	
 1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (s a The organization satisfied the Activities Test. Complete line 2 below. b The organization is the parent of each of its supported organizations. Complete line 3 below. c The organization supported a governmental entity. Describe in Part VI how you supported a government entity. 2 Activities Test. Answer (a) and (b) below. 			

- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain* how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- **b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer (a) and (b) below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

egard. **3b** Schedule A (Form 990 or 990-EZ) 2018

2a

2b

3a

Schedule A (Form 990 or 990-EZ) 2018 National Council of Catholic Women		52-17	38369 Pa	age 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Or				
1 Check here if the organization satisfied the Integral Part Test as a qualifying			,	;
instructions. All other Type III non-functionally integrated supporting organized	zatio	ns must complete Secti	-	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)	ar
1 Net short-term capital gain	1			
2 Recoveries of prior-year distributions	2			
3 Other gross income (see instructions)	3			
4 Add lines 1 through 3.	4			
5 Depreciation and depletion	5			
6 Portion of operating expenses paid or incurred for production or				
collection of gross income or for management, conservation, or				
maintenance of property held for production of income (see instructions)	6			
7 Other expenses (see instructions)	7			
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8			
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)	ar
1 Aggregate fair market value of all non-exempt-use assets (see				
instructions for short tax year or assets held for part of year):				
a Average monthly value of securities	1a			
b Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	1c			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other				
factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d.	3			
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,				
see instructions).	4			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6 Multiply line 5 by .035.	6			
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C - Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1.	2			
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3.	4			
5 Income tax imposed in prior year	5			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to				
emergency temporary reduction (see instructions).	6			
7 Check here if the current year is the organization's first as a non-functionally	integ	grated Type III supporting	ng organization (see	е
instructions).				

EEA

Schedule A (Form 990 or 990-EZ) 2018

	He A (Form 990 or 990-EZ) 2018 National Council of Catho		52-173	8369 Page 7
Pai	t V Type III Non-Functionally Integrated 509(a)(3	b) Supporting Organi	zations (continued)	
Sec	tion D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exer	npt purposes		
2	Amounts paid to perform activity that directly furthers exempt	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizat	ions	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	e organization is respons	sive	
	(provide details in Part VI). See instructions.	•		
9	Distributable amount for 2018 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1	Distributable amount for 2018 from Section C, line 6			
	Underdistributions, if any, for years prior to 2018			
	(reasonable cause required - explain in Part VI). See			
	instructions.			
3	Excess distributions carryover, if any, to 2018			
а	From 2013			
b	From 2014			
С	From 2015			
	From 2016			
	From 2017			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
_	Applied to 2018 distributable amount			
	Carryover from 2013 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2018 from			
	Section D, line 7: \$			
а	Applied to underdistributions of prior years			
	Applied to 2018 distributable amount			
	Remainder. Subtract lines 4a and 4b from 4.			
	Remaining underdistributions for years prior to 2018, if			
-	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI . See instructions.			
6	Remaining underdistributions for 2018. Subtract lines 3h			
0	and 4b from line 1. For result greater than zero, explain in			
	Part VI . See instructions.			
7	Excess distributions carryover to 2019. Add lines 3j			
'	and 4c.			
8	Breakdown of line 7:			
	Excess from 2014			
	Excess from 2015			
	E (0040			
	E (0047			
	E (0040			
	Excess from 2018			
EEA			Schedu	ile A (Form 990 or 990-EZ) 2018

Cohodul- A/E	
Part VI	^{m 990 or 990-EZ) 2018} Page Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part
	III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section
	B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b,
	3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E,
	lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE D Supplemental Financial Stat		nental Financial Statements		OMB No. 1545-0047	
(Fo	rm 990)		he organization answered "Yes" on Form 990	,	2018
	Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		2b.	2010	
Depar	ment of the Treasury		Attach to Form 990.		Open to Public
	Internal Revenue Service Control Were and Service Control Were and Service Control Were and Service Control Were and Service Control Service 				Inspection
	of the organization	ngil of Cotholig W		Employer identif	
Pa		ncil of Catholic Wo	omen ed Funds or Other Similar Funds or Acc	<u>52-173</u>	8369
ı a		if the organization answered "Ye		ounts.	
	Complete		(a) Donor advised funds	(b) Funds and	other accounts
1	Total number at en	d of year • • • • • • • • • • • • • • • • • • •		(b) Tunus and	
2		f contributions to (during year)			
3		f grants from (during year)			
4		t end of year			
5	Did the organizatio	on inform all donors and donor advisor	s in writing that the assets held in donor advised		
	funds are the orga	nization's property, subject to the orga	nization's exclusive legal control? • • • • • •		Yes No
6	Did the organization	on inform all grantees, donors, and do	nor advisors in writing that grant funds can be use	ed	
	only for charitable	purposes and not for the benefit of the	e donor or donor advisor, or for any other purpose	9	
_	0 1	•			· · · 🔄 Yes 🔄 No
Pa		vation Easements.			
		e if the organization answered "Y			
1		servation easements held by the organ			
		of land for public use (e.g., recreation of			irea
	Protection of n		Preservation of a certifie	d historic structure	
•	Preservation o				
2			qualified conservation contribution in the form of a		the End of the Tax Year
а		ast day of the tax year.		· · 2a	
a b				· · 2b	
c	-	vation easements on a certified histori			
d		vation easements included in (c) acqu			
ŭ			· · · · · · · · · · · · · · · · · · ·	2d	
3			d, released, extinguished, or terminated by the or		9
	tax year 🕨	,	_,	99	
4	·	where property subject to conservation	n easement is located		
5	Does the organization	tion have a written policy regarding th	e periodic monitoring, inspection, handling of		
	violations, and enfo	orcement of the conservation easeme	nts it holds?		Yes No
6	Staff and volunteer	r hours devoted to monitoring, inspect	ing, handling of violations, and enforcing conserv	ation easements dur	ing the year
	<u>۲</u>				
7	Amount of expense	es incurred in monitoring, inspecting,	handling of violations, and enforcing conservation	easements during t	he year
	▶\$				
8	Does each conserve		above satisfy the requirements of section 170(h)		
	and section 170(h)	/(·//=/(·/·			🗌 Yes 🗌 No
9		•	rvation easements in its revenue and expense st		
		7 11 7	ootnote to the organization's financial statements	that describes the	
Da	organization's acco	ounting for conservation easements.	ions of Art, Historical Treasures, or	Other Similar A	scote
Fa		-	Yes" on Form 990, Part IV, line 8.		
	•	•	6 (ASC 958), not to report in its revenue statement	t and balance shoet	
Ia	-	•	held for public exhibition, education, or research i		
			te to its financial statements that describes these		
b	•		6 (ASC 958), to report in its revenue statement ar		
	-		held for public exhibition, education, or research i		
		vide the following amounts relating to			
	•	• •		> \$	
2			al treasures, or other similar assets for financial g		
	-		16 (ASC 958) relating to these items:	· •	
а					
b					
-		on Act Notice, see the Instructions		· · · · · ·	Schedule D (Form 990) 2018

For	Paperwork	Reduction	Act Notice,	see the in	structions for

	ule D (Form 990) 2018 National Counci						52-173		Page 2
Par	t III Organizations Maintaining C							ssets (d	continued)
3	Using the organization's acquisition, accession,	and other reco	rds, check any o	of the follow	wing that are	a signific	ant use of its		
	collection items (check all that apply):								
а	Public exhibition	d 🗌	Loan or excha	inge progra	ams				
b	Scholarly research	е 🗌	Other						
с	Preservation for future generations	_							
4	Provide a description of the organization's college	ctions and expla	ain how they fur	ther the or	ganization's	exempt p	ourpose in Part		
	XIII.	·	,		0		•		
5	During the year, did the organization solicit or re	ceive donation	s of art historic	al treasure	s or other si	milar			
•	assets to be sold to raise funds rather than to be							г	Yes 🗌 No
Par	t IV Escrow and Custodial Arran		part et alle etgi						
	Complete if the organization ar		s" on Form	990. Par	t IV. line 9	or rep	orted an am	ount on	Form
	990, Part X, line 21.			,	,	,			
1a	Is the organization an agent, trustee, custodian	or other interm	diary for contri	butions or	other assets	not			
ia			-					Г	Yes 🗌 No
h	If "Yes," explain the arrangement in Part XIII and							· · · _	
b	If res, explain the analigement in Part XIII and	a complete the	ollowing table:						
								mount	
C.	2 ogining salarioo								
d	Additions during the year								
е	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Forn					•			=
b	If "Yes," explain the arrangement in Part XIII. Ch	neck here if the	explanation has	s been prov	vided on Par	t XIII -			[]
Par						_			
	Complete if the organization ar	nswered "Ye	s" on Form	990, Par	t IV, line 1	0.			
		(a) Current yea	ır (b) Pri	or year	(c) Two years	s back	(d) Three years bac	ck (e) F	our years back
1a	Beginning of year balance								
b	Contributions								
с	Net investment earnings, gains, and								
	losses								
d	Grants or scholarships								
е	Other expenditures for facilities and								
	programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the current	L t vear end balar	ce (line 1a, col	umn (a)) h	eld as:	I			
	Board designated or quasi-endowment		(0)						
b	Permanent endowment %								
	Temporarily restricted endowment	%							
С									
0-	The percentages on lines 2a, 2b, and 2c should								
3a	Are there endowment funds not in the possession	on or the organi	zalion inat are l	ieiu and a	ummistered t	ortrie			Vee No.
	organization by:								Yes No
	(i) unrelated organizations							· · 3a	
	(ii) related organizations							· · 3a(
b	If "Yes" on line 3a(ii), are the related organization							3k	
4	Describe in Part XIII the intended uses of the or		dowment funds.						
Par	t VI Land, Buildings, and Equipm				4 IV / Page 4	1 . 0 .			
	Complete if the organization ar	nswered "Ye	s" on ⊦orm 9	990, Par	τ IV, line 1	ia. See	e ⊢orm 990, I	Part X, I	ine 10.
	Description of property	(a) Cost	or other basis	(b) Cost o	r other basis		Accumulated	(d) E	ook value
		(in	vestment)	(other)	de	epreciation		
1a	Land	· · ·							
b	Buildings								
с	Leasehold improvements								
d	Equipment				29,963		14,925		15,038
е	Other				28,926		11,198		17,728
_	. Add lines 1a through 1e. (Column (d) must equ		art X, column (E	3), line 10c					32,766
		,	1						,

Schedule D (Form	990) 2018 National Counci	l of Catholic Women	52-1738369	Page 3
Part VII	Investments - Other Securities.			
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11b. See Form 990, Part X, I	ine 12.
	 (a) Description of security or category (including name of security) 	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financial	derivatives			
	eld equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
Total. (Column (b,) must equal Form 990, Part X, col. (B) line 12.) 🕨			
Part VIII	Investments - Program Related.			
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11c. See Form 990, Part X, I	ine 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b,) must equal Form 990, Part X, col. (B) line 13.)			
Part IX	Other Assets.			
	Complete if the organization answere	d "Yes" on Form 990, Pa	art IV, line 11d. See Form 990, Part X, I	ine 15.
	(a) D	escription	(b) Boo	ok value
(1) Secur	ity Deposits			8,873
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	n (b) must equal Form 990, Part X, col. (B) line 15.)		8,873
Part X	Other Liabilities.			
	Complete if the organization answere line 25.	d "Yes" on Form 990, Pa	art IV, line 11e or 11f. See Form 990, Pa	art X,
1.	(a) Description of liability	(b) Book value		
(1) Federal	income taxes		_	
(2) Defer	red Rent	16,748		
(3) Capit	al Lease	22,519		
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Column (b)) must equal Form 990, Part X, col. (B) line 25.) 🕨	39,267		
2. Liability for	uncertain tax positions. In Part XIII, provide the te	xt of the footnote to the organiz	ation's financial statements that reports the	

organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

	ule D (Form 990) 2018 National Council of Catholic Women	52-1738369	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	. 1	678,034
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
с	Recoveries of prior year grants		
d	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
е	Add lines 2a through 2d	- 2e	
3	Subtract line 2e from line 1	. 3	678,034
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · · 4a		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
С	Add lines 4a and 4b	- 4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	-	678,034
Pa	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense	es per Return.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	. 1	688,606
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities • • • • • • • • • • • • • • • • • • •		
b	Prior year adjustments		
С	Other losses		
d	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
е	Add lines 2a through 2d	- 2e	
3	Subtract line 2e from line 1	. 3	688,606
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b · · · · · · · · · 4a		
b	Other (Describe in Part XIII.) ••••••••••••••••••••••••••••••••••		
С	Add lines 4a and 4b	- 4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	. 5	688,606
Pa	rt XIII Supplemental Information.		

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

Department of the Treasury

Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047 2018 Open to Public Inspection

National Council of Catholic Women

52-1738369

Employer identification number

01. Members or stockholder classes and rights (Part VI, line 6)

The Council shall have the following categories of membership- individual members.

Individual membership is open to individual women of the catholic faith who subscribe to

the purposes of NCCW and who are domiciled within the united states, military personnel

stationed abroad, or US citizens living outside the united states. Affiliate organizations

all catholic women's organizations may apply to become affiliated with NCCW.

02. Member election for additional members (Part VI, line 7a)

Individual members and affiliated organizations must be current in their payment of dues

to NCCW in order to exercise their right to vote or for individual members to serve as an

officer or director of NCCW. Individual members shall each have one vote. Affiliate

organizations shall each have two votes.

03. Local chapters, branches, affiliates (Part VI, line 10a)

The affiliates are not governed by NCCW.

04. Form 990 governing body review (Part VI, line 11)

Once the form 990 is prepared, it is reviewed by the NCCW executive committee. The board

of directors reviews the form 990 at its January meeting.

05. Conflict of interest policy compliance (Part VI, line 12c)

Board members are required to answer an annual conflict of interest questionnaire and to

report any potential conflicts of interest involving NCCW as they arise. Staff employees

sign a conflict of interest agreement upon hire and are required to report potential

conflicts of interest involving NCCW as they arise.

Schedule O (Form 990 or 990-EZ) (2018)	Page 2
Name of the organization	Employer identification number
National Council of Catholic Women	52-1738369
06. Governing documents, etc, available to public (Part VI, line 19)	
to. Governing documents, etc, available to public (Part VI, Time 19)	
NCCW posts its bylaws on its website (www.nccw.org). NCCW makes its other	governing
documents, conflict of interest policy, and audited financial statements a	vailable to the
public upon request.	
partie upon request.	

Page 2