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Form **990** (Rev. January 2020)

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2019

Open to Public Inspection

A For the 2019 calendar year, or tax year beginning , and ending

B Check if applicable: Address change; Name change; Initial return; Terminated; Amended return; Application pending

C Name of organization: CATHOLIC CHARITIES SERVING PORTAGE AND STARK COUNTIES

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 326 W MAIN STREET

City or town, state or province, country, and ZIP or foreign postal code: RAVENNA, OH 44266

F Name and address of principal officer: GEORGE GRAHAM
SAME AS C ABOVE

D Employer identification number: 34-1921868

E Telephone number: 330-297-7341

G Gross receipts $ 1,832,453.

H(a) Is this a group return for subordinates? Yes ☒ No

H(b) Are all subordinates included? Yes No

If "No," attach a list. (see instructions)

H(c) Group exemption number ▶ 0520

I Website: ▶ N/A

J Tax-exempt status: ☒ 501(c)(3) 501(c) ( ) ◀ (insert no.) 4947(a)(1) or 527

K Form of organization: ☒ Corporation Trust Association Other ▶

L Year of formation: 1996 M State of legal domicile: OH

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities: TO ASSIST THE CATHOLIC COMMUNITY IN PROVIDING SOCIAL MINISTRY SERVICES TO EVERYONE FOR THE KINGDOM OF GOD.

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a) 3

4 Number of independent voting members of the governing body (Part VI, line 1b) 3

5 Total number of individuals employed in calendar year 2019 (Part V, line 2a) 5

6 Total number of volunteers (estimate if necessary) 15

7a Total unrelated business revenue from Part VIII, column (C), line 12 0.

b Net unrelated business taxable income from Form 990-T, line 38 0.

	Prior Year	Current Year
Revenue		
8 Contributions and grants (Part VIII, line 1h)	2,154,135.	353,341.
9 Program service revenue (Part VIII, line 2g)	313,318.	314,313.
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,534.	24,532.
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	14,466.	14,267.
12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,483,453.	1,446,453.
Expenses		
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	317,850.	345,835.
14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	752,635.	758,35[illegible].
16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 25,703.		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	355,7[illegible].	815,[illegible].
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	1,426,[illegible].	1,[illegible].
19 Revenue less expenses. Subtract line 18 from line 12	1,057,[illegible].	-[illegible].
Net Assets or Fund Balances	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	3,[illegible]	2,[illegible]
21 Total liabilities (Part X, line 26)	3[illegible]	[illegible]
22 Net assets or fund balances. Subtract line 21 from line 20	2,[illegible]	2,[illegible]

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer Date Title

▶ [illegible] EXECUTIVE DIRECTOR

Paid Preparer Use Only

Print/Type preparer's name: DANA PATTERSON

Preparer's signature

Date

Check ☐ if self-employed

PTIN P01278328

Firm's name ▶ RAUCHNY + ROCHNY LLC

Firm's EIN ▶ 34-0471108

Firm's address ▶ 4714 MUNSON STREET NW, SUITE 402
CANTON, OH 44718-3616

Phone no. (330) 966-8400

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No