

EXTENDED TO AUGUST 15, 2024
Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

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

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **OCT 1, 2022** and ending **SEP 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.		D Employer identification number 13-5562362
	Doing business as		E Telephone number 3145763993
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 11,225,473. H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions H(c) Group exemption number
	66 PROGRESS PARKWAY		
	City or town, state or province, country, and ZIP or foreign postal code MARYLAND HEIGHTS, MO 63043-3706		
F Name and address of principal officer: DAVID BARRINGER SAME AS C ABOVE			
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: HTTPS://SSVPUSA.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1845
			M State of legal domicile: DE

Part I Summary

1 Briefly describe the organization's mission or most significant activities: SEE SCHEDULE O																																																										
2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.																																																										
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a) 20																																																									
	4 Number of independent voting members of the governing body (Part VI, line 1b) 20																																																									
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 26																																																									
	6 Total number of volunteers (estimate if necessary) 250																																																									
	7a Total unrelated business revenue from Part VIII, column (C), line 12 70.																																																									
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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 4-11-2024
	Type or print name and title DAVID BARRINGER, CEO	
Paid Preparer Use Only	Print/Type preparer's name JEANNE DEE	Date 4.10.24
	Firm's name ANDERS MINKLER HUBER & HELM LLP	Firm's EIN 43-0831507
	Firm's address 800 MARKET STREET, SUITE 500 ST. LOUIS, MO 63101-2501	Phone no. (314) 655-5500

May the IRS discuss this return with the preparer shown above? See instructions Yes No

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Form 990 (2022)

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Part 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:
**A NETWORK OF FRIENDS, INSPIRED BY GOSPEL VALUES, GROWING IN HOLINESS
AND BUILDING A MORE JUST WORLD THROUGH PERSONAL RELATIONSHIPS WITH AND
SERVICE TO PEOPLE IN NEED.**

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 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 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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 5,215,920. including grants of \$ 2,208,552.) (Revenue \$ 263,689.)
SEE SCHEDULE O

4b (Code:) (Expenses \$ 923,726. including grants of \$ 917,248.) (Revenue \$)
SEE SCHEDULE O

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe on Schedule O.)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 6,139,646.

Form 990 (2022)

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	<input checked="" type="checkbox"/>	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule C, Part II</i>	<input checked="" type="checkbox"/>	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part I</i>		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part IV</i>	<input checked="" type="checkbox"/>	
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	<input checked="" type="checkbox"/>	
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.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	<input checked="" type="checkbox"/>	
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? <i>If "Yes," complete Schedule D, Part VII</i>		<input checked="" type="checkbox"/>
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? <i>If "Yes," complete Schedule D, Part VIII</i>		<input checked="" type="checkbox"/>
d 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? <i>If "Yes," complete Schedule D, Part IX</i>		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	<input checked="" type="checkbox"/>	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	<input checked="" type="checkbox"/>	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>	
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>	<input checked="" type="checkbox"/>	
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		<input checked="" type="checkbox"/>
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. See instructions</i>	<input checked="" type="checkbox"/>	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		<input checked="" type="checkbox"/>
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	<input checked="" type="checkbox"/>	

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

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Part IV Checklist of Required Schedules *(continued)*

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b		
c 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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		X
25b		X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>		X
26		X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
27		X
28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>		X
28a		X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>		X
28b		X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
29	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
30		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
31		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		X
32		X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>		X
33		X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
34	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	X	
35a	X	
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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
35b	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		X
36		X
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? <i>If "Yes," complete Schedule R, Part VI</i>		X
37		X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?	X	
38	X	

Note: All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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	31	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable		
1b	0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	X	
1c	X	

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Form 990 (2022)

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Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a 26		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
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)?		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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	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?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	X	
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d 1		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	X	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
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:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
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.		
a	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	13b	
c	Enter the amount of reserves on hand	13c	
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 on Schedule O	14b	
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
	If "Yes," see the instructions and file Form 4720, Schedule N.		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
	If "Yes," complete Form 4720, Schedule O.		
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17	
	If "Yes," complete Form 6069.		

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

Check if Schedule O contains a response or note to any line in this Part VI

Section 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 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	20		
b	Enter the number of voting members included on line 1a, above, who are independent		
	20		
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?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
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?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed CO, DC, HI, NC, PA, SC, TN, VA, WI

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.
 Own website Another's website Upon request Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 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 - (314) 576-3993
66 PROGRESS PARKWAY, MARYLAND HEIGHTS, MO 63043

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DAVID BARRINGER CHIEF EXECUTIVE OFFICER	50.00 10.00			X				244,958.	0.	32,446.
(2) NANCY PINO CHIEF FINANCIAL OFFICER & CHIEF OPER	43.00 5.00			X				171,180.	0.	33,183.
(3) RYAN CARNEY CHIEF ADVANCEMENT OFFICER	43.00 2.00				X			130,612.	0.	30,180.
(4) LAURA KAMPER SENIOR DIRECTOR OF FINANCE, HR & FAC	40.00				X			107,063.	0.	24,357.
(5) RALPH MIDDLECAMP PRESIDENT	15.00 4.00	X	X					0.	0.	0.
(6) BRIAN BURGESS VICE PRESIDENT	7.00 16.00	X	X					0.	0.	0.
(7) GUADALUPE SOSA SECRETARY	14.00	X	X					0.	0.	0.
(8) JAMES DODD TREASURER	15.00 4.00	X	X					0.	0.	0.
(9) IRENE FRECHETTE VICE PRESIDENT-NORTHEAST REGION	25.00	X						0.	0.	0.
(10) JOHN BERRY VICE PRESIDENT -SOUTHEAST REGION	20.00	X						0.	0.	0.
(11) LYNNE BETTS VICE PRESIDENT-EASTERN REGION	17.00	X						0.	0.	0.
(12) WILLIAM BRAZIER VICE PRESIDENT-MIDEAST REGION	15.00	X						0.	0.	0.
(13) DON KANY VICE PRESIDENT-MIDWEST REGION	8.00	X						0.	0.	0.
(14) THOMAS PELGER VICE PRESIDENT-NORTH CENTRAL REGION	20.00	X						0.	0.	0.
(15) RAYMOND DUPONT VICE PRESIDENT-SOUTH CENTRAL REGION	3.00	X						0.	0.	0.
(16) JOHN HALLISSY VICE PRESIDENT-WESTERN REGION	10.00	X						0.	0.	0.
(17) STEVE HAVEMANN NATIONAL COUNCIL BOARD (START 10/1/2	5.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MICHAEL SYSLO NATIONAL COUNCIL BOARD (START 10/1/2	7.00	X					0.	0.	0.	
(19) KATHLEEN BRISSETTE NATIONAL COUNCIL BOARD	12.00	X					0.	0.	0.	
(20) RAYMOND SICKINGER NATIONAL COUNCIL BOARD	15.00	X					0.	0.	0.	
(21) BARBARA SLAVEN NATIONAL COUNCIL BOARD	2.00						0.	0.	0.	
(22) DIANE SMITH-MELLOY NATIONAL COUNCIL BOARD	1.50	X					0.	0.	0.	
(23) PAMELA MATAMBANADZO NATIONAL COUNCIL BOARD	25.00	X					0.	0.	0.	
(24) CLAUDIA RAMIREZ NATIONAL COUNCIL BOARD	2.00	X					0.	0.	0.	
1b Subtotal							653,813.	0.	120,166.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							653,813.	0.	120,166.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **4**

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	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? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
WORDS, DATA AND IMAGES LLC DBA GABRIEL GROU 3190 RIDER TRAIL SOUTH, EARTH CITY, MO 6304	DIRECT MAIL PRODUCTION AND DISTR	550,553.

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 **1**

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NATIONAL COUNCIL OF THE U.S. SOCIETY OF
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Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b	2,178,312.				
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	7,138,021.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 199,319.				
	h Total. Add lines 1a-1f		9,316,333.				
Program Service Revenue	2 a MEETING INCOME	Business Code	812900	487,146.	487,146.		
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f		487,146.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		188,759.			188,759.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	967,481.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	833,802.				
c Gain or (loss)	7c	133,679.					
d Net gain or (loss)		133,679.			133,679.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a		246,958.				
			110,699.				
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory		136,259.			136,259.		
Miscellaneous Revenue	11 a REGIONS AND OTHER INCOME	Business Code	901101	18,796.	18,726.	70.	
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d		18,796.				
12 Total revenue. See instructions		10,280,972.	505,872.	70.	458,697.		

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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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	2,217,399.	2,217,399.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	908,401.	908,401.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	535,284.	124,821.	385,322.	25,141.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	604.	604.		
7 Other salaries and wages	1,659,026.	705,737.	593,960.	359,329.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	84,534.	36,098.	29,637.	18,799.
9 Other employee benefits	430,549.	203,615.	124,829.	102,105.
10 Payroll taxes	149,537.	59,977.	61,556.	28,004.
11 Fees for services (nonemployees):				
a Management				
b Legal	113,854.	31,047.	74,215.	8,592.
c Accounting	48,606.		48,606.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	7,964.		7,964.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	506,318.	52,878.	2,990.	450,450.
12 Advertising and promotion	32,146.	32,146.		
13 Office expenses	313,714.	85,806.	21,545.	206,363.
14 Information technology	112,116.	75,627.	13,285.	23,204.
15 Royalties				
16 Occupancy	69,146.	32,785.	24,804.	11,557.
17 Travel	1,018,437.	982,174.	14,858.	21,405.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	481,613.	479,980.	1,583.	50.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	100,575.	47,238.	45,497.	7,840.
23 Insurance	23,075.	11,675.	7,777.	3,623.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a ADMINISTRATIVE EXPENSES	116,967.	16,185.	24,481.	76,301.
b PROGRAM MATERIALS	57,013.	45,906.	921.	10,186.
c DUES & SUBSCRIPTIONS	20,412.	6,025.	8,159.	6,228.
d MISC TAX	4,782.	4,782.		
e All other expenses	-17,257.	-21,260.	2,064.	1,939.
25 Total functional expenses. Add lines 1 through 24e	8,994,815.	6,139,646.	1,494,053.	1,361,116.
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
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Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash - non-interest-bearing	304,874.	1	885,287.
	2	Savings and temporary cash investments	261,463.	2	389,785.
	3	Pledges and grants receivable, net	35,000.	3	186,000.
	4	Accounts receivable, net	39,933.	4	108,133.
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net	500,158.	7	715,051.
	8	Inventories for sale or use	186,481.	8	193,663.
	9	Prepaid expenses and deferred charges	235,593.	9	242,464.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 2,099,381.		
	b	Less: accumulated depreciation	10b 217,040.		
	11	Investments - publicly traded securities	1,761,540.	10c 11	1,882,341.
	12	Investments - other securities. See Part IV, line 11	7,773,012.	12	8,661,169.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	85,218.	15	101,872.
16	Total assets. Add lines 1 through 15 (must equal line 33)	11,183,272.	16	13,365,765.	
Liabilities	17	Accounts payable and accrued expenses	479,985.	17	830,217.
	18	Grants payable		18	
	19	Deferred revenue	35,514.	19	23,829.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D	545,786.	21	569,447.
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties	0.	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	57,655.	25	68,359.
	26	Total liabilities. Add lines 17 through 25	1,118,940.	26	1,491,852.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	6,959,160.	27	8,952,184.
	28	Net assets with donor restrictions	3,105,172.	28	2,921,729.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
32	Total net assets or fund balances	10,064,332.	32	11,873,913.	
33	Total liabilities and net assets/fund balances	11,183,272.	33	13,365,765.	

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Part 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)	1	10,280,972.
2	Total expenses (must equal Part IX, column (A), line 25)	2	8,994,815.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,286,157.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	10,064,332.
5	Net unrealized gains (losses) on investments	5	523,424.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	11,873,913.

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
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:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c	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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on 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 Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		X
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 on Schedule O and describe any steps taken to undergo such audits		

Form 990 (2022)

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	7592180.	6564005.	8840905.	7105526.	9316333.	39418949.
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	7592180.	6564005.	8840905.	7105526.	9316333.	39418949.
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						39418949.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	7592180.	6564005.	8840905.	7105526.	9316333.	39418949.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	128,472.	110,017.	153,252.	212,917.	188,759.	793,417.
9 Net income from unrelated business activities, whether or not the business is regularly carried on	2,169.	13,884.	70.	70.	70.	16,263.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	427,884.	35,770.	1,865.	8,181.	18,726.	492,426.
11 Total support. Add lines 7 through 10						40721055.
12 Gross receipts from related activities, etc. (see instructions)					12	1,889,735.
13 First 5 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 <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	96.80	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	96.34	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input checked="" type="checkbox"/>			
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization <input type="checkbox"/>			
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>			

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2022.** 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 - 2021.** 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

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

	Yes	No
1		
2		
3a		
3b		
3c		
4a		
4b		
4c		
5a		
5b		
5c		
6		
7		
8		
9a		
9b		
9c		
10a		
10b		

Part IV Supporting Organizations (continued)

	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 on lines 11b and 11c below, the governing body of a supported organization?		
11a		
b A family member of a person described on line 11a above?		
11b		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, 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 officers, 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		
2 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

	Yes	No
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		

Section D. All Type III Supporting Organizations

	Yes	No
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 tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
1		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
2		
3 By reason of the relationship described on line 2, above, 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? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		
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 (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b 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.		
2a		
b Did the activities described on line 2a, above, 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.		
2b		
3 Parent of Supported Organizations. Answer lines 3a and 3b 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? If "Yes" or "No" provide details in Part VI.		
3a		
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.		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Schedule A (Form 990) 2022

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Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions.		
3	Excess distributions carryover, if any, to 2022		
a	From 2017		
b	From 2018		
c	From 2019		
d	From 2020		
e	From 2021		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2022 distributable amount		
i	Carryover from 2017 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2022 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2022 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.		
6	Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.		
7	Excess distributions carryover to 2023. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2018		
b	Excess from 2019		
c	Excess from 2020		
d	Excess from 2021		
e	Excess from 2022		

Schedule A (Form 990) 2022

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Employer identification number 13-5562362
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures \$ _____

3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____

2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a Was a correction made? Yes No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____

4 Did the filing organization file Form 1120-POL for this year? Yes No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

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

LHA

232041 11-08-22

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	90.	90.												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)	90.	90.												
d	Other exempt purpose expenditures	6,211,539.	7,314,522.												
e	Total exempt purpose expenditures (add lines 1c and 1d)	6,211,629.	7,314,612.												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	460,581.	515,731.												
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	115,145.	128,933.												
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.	0.												
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.	0.												
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?	<input type="checkbox"/> Yes <input type="checkbox"/> No													

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total	
2a	Lobbying nontaxable amount		575,314.	517,446.	515,731.	1,608,491.
b	Lobbying ceiling amount (150% of line 2a, column(e))					2,412,737.
c	Total lobbying expenditures		293.	112.	90.	495.
d	Grassroots nontaxable amount		143,829.	129,362.	128,933.	402,124.
e	Grassroots ceiling amount (150% of line 2d, column (e))					603,186.
f	Grassroots lobbying expenditures		293.	112.	90.	495.

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	
a Current year	2a
b Carryover from last year	2b
c Total	2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4
5 Taxable amount of lobbying and political expenditures. See instructions	5

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

PART I-A, LINE 1:

GRASSROOTS LOBBYING ON ISSUES RELATED TO THE POOR THROUGH OUR VOICE OF THE POOR COMMITTEE

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Schedule C (Form 990 or 990-EZ)

13-5562362 Page 4

Part IV Supplemental Information (continued)

Schedule C

Affiliated Group Lobbying Expenditures
Part II -A

Name of Affiliated Group Member
SOCIETY OF SVDP NATIONAL STORES

Employer ID Number
84-3235787

Affiliated Group Member Address
66 PROGRESS PARKWAY
ST. LOUIS, MO 63043-3706

Electing Member
NO

Limits on Lobbying Expenditures:

		Line
Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.	1a
Total lobbying expenditures to influence a legislative body (direct lobbying)	0.	b
Total lobbying expenditures (add lines 1a and 1b)	0.	c
Other exempt purpose expenditures	1,102,983.	d
Total exempt purpose expenditures (add lines 1c and 1d)	1,102,983.	e

Lobbying nontaxable amount.

Enter the amount from the following table:

If the amount on line e is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e
> 500,000 <= 1,000,000	100,000 + 15% > 500,000
> 1,000,000 <= 1,500,000	175,000 + 10% > 1,000,000
> 1,500,000 <= 17,000,000	225,000 + 5% > 1,500,000
Over \$17,000,000	\$1,000,000

	185,298.	f
Grassroots nontaxable amount (enter 25% of line 1f)	46,325.	g
Subtract line 1g from line 1a (limit to zero)	0.	h
Subtract line 1f from line 1c (limit to zero)	0.	i
Member's share of excess lobbying expenditures	0.	

Part IV Supplemental Information (continued)

Schedule C **Affiliated Group Lobbying Expenditures**
Part II - A

Name of Affiliated Group Member
SOCIETY OF ST. VINCENT DE PAUL NATIONAL FOUNDATION

Employer ID Number
82-2513802

Affiliated Group Member Address
**66 PROGRESS PARKWAY
MARYLAND HEIGHTS, MO 63043-3706**

Electing Member
NO

Limits on Lobbying Expenditures:		Line												
Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.	1a												
Total lobbying expenditures to influence a legislative body (direct lobbying)	0.	b												
Total lobbying expenditures (add lines 1a and 1b)	0.	c												
Other exempt purpose expenditures	0.	d												
Total exempt purpose expenditures (add lines 1c and 1d)	0.	e												
Lobbying nontaxable amount.														
Enter the amount from the following table:														
<table border="1"> <thead> <tr> <th>If the amount on line e is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e</td> </tr> <tr> <td>> 500,000 <= 1,000,000</td> <td>100,000 + 15% > 500,000</td> </tr> <tr> <td>> 1,000,000 <= 1,500,000</td> <td>175,000 + 10% > 1,000,000</td> </tr> <tr> <td>> 1,500,000 <= 17,000,000</td> <td>225,000 + 5% > 1,500,000</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000</td> </tr> </tbody> </table>	If the amount on line e is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	> 500,000 <= 1,000,000	100,000 + 15% > 500,000	> 1,000,000 <= 1,500,000	175,000 + 10% > 1,000,000	> 1,500,000 <= 17,000,000	225,000 + 5% > 1,500,000	Over \$17,000,000	\$1,000,000	0.	f
If the amount on line e is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e													
> 500,000 <= 1,000,000	100,000 + 15% > 500,000													
> 1,000,000 <= 1,500,000	175,000 + 10% > 1,000,000													
> 1,500,000 <= 17,000,000	225,000 + 5% > 1,500,000													
Over \$17,000,000	\$1,000,000													
Grassroots nontaxable amount (enter 25% of line 1f)	0.	g												
Subtract line 1g from line 1a (limit to zero)	0.	h												
Subtract line 1f from line 1c (limit to zero)	0.	i												
Member's share of excess lobbying expenditures	0.													

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.

Employer identification number 13-5562362

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution..., 3 Number of conservation easements modified..., 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement reported on line 2(d) above satisfy the requirements..., 9 In Part XIII, describe how the organization reports conservation easements...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report..., 1b If the organization elected, as permitted under FASB ASC 958, to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

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

Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	2,729,302.	3,056,869.	2,229,738.	1,823,868.	1,606,496.
b Contributions	675,415.	323,215.	578,928.	410,366.	311,365.
c Net investment earnings, gains, and losses	340,500.	-391,479.	452,287.	108,274.	24,350.
d Grants or scholarships					
e Other expenditures for facilities and programs	181,701.	182,897.	142,484.	64,769.	87,889.
f Administrative expenses	93,031.	76,406.	61,600.	48,001.	30,454.
g End of year balance	3,470,485.	2,729,302.	3,056,869.	2,229,738.	1,823,868.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 100 %
 - b Permanent endowment _____ %
 - c Term endowment _____ %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | | X |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		198,400.		198,400.
b Buildings		1,598,922.	145,549.	1,453,373.
c Leasehold improvements				
d Equipment		23,971.	8,216.	15,755.
e Other		278,088.	63,275.	214,813.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				1,882,341.

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Schedule D (Form 990) 2022

13-5562362 Page 3

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 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. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SPLIT-INTEREST AGREEMENT	58,140.
(3) LEASE LIABILITIES	10,219.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	68,359.

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

Schedule D (Form 990) 2022

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Schedule D (Form 990) 2022

13-5562362 Page 4

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per 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
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses 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
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental information.

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

PART IV, LINE 2B:

WE HOLD FUNDS FOR INACTIVE COUNCILS AND CONFERENCES WHERE THERE IS NO OTHER SUPERIOR COUNCIL AVAILABLE TO HOLD THESE FUNDS.

PART V, LINE 4:

BOARD DESIGNATED FUNDS ARE DISTRIBUTED TO SUPPLEMENT BOTH ADMINISTRATIVE AND PROGRAM EXPENSES AS DETERMINED BY A VOTE OF THE BOARD.

PART X, LINE 2:

THE SOCIETY IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE SOCIETY FOLLOWS FASB ACCOUNTING STANDARDS FOR UNCERTAINTY IN INCOME TAXES. THESE STANDARDS REQUIRE THAT UNCERTAIN INCOME

Part XIII Supplemental Information *(continued)*

TAX POSITIONS BE "MORE LIKELY THAN NOT" BEFORE THE AMOUNTS ARE RECOGNIZED
IN THE CONSOLIDATED FINANCIAL STATEMENTS. FURTHER, THE STANDARDS REQUIRE
THE BENEFIT OR EXPENSE BE RECORDED IN THE CONSOLIDATED FINANCIAL
STATEMENTS AS THE A MOUNT MOST LIKELY TO BE REALIZED ASSUMING A REVIEW BY
TAX AUTHORITIES HAVING ALL RELEVANT INFORMATION AND APPLYING CURRENT
CONVENTIONS. THE SOCIETY HAS ASSESSED ITS FEDERAL AND STATE TAX POSITIONS
AND DETERMINED THERE WERE NO UNCERTAINTIES OR POSSIBLE RELATED EFFECTS
THAT NEEDED TO BE RECORDED AS OF AND FOR THE YEARS ENDED SEPTEMBER 30,
2023 AND 2022. THE FEDERAL AND STATE INCOME TAX RETURNS OF THE SOCIETY ARE
SUBJECT TO EXAMINATION BY THE RESPECTIVE TAXING AUTHORITIES GENERALLY FOR
THREE YEARS AFTER THEY WERE FILED. INCOME TAX RETURNS FOR 2019 AND FORWARD
MAY BE AUDITED BY REGULATORY AGENCIES; HOWEVER, THE SOCIETY IS NOT AWARE
OF ANY SUCH ACTIONS AT THIS TIME.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Employer identification number 13-5562362
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Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,			GRANTMAKING		173,808.
EAST ASIA AND THE PACIFIC - AUSTRALIA, BRUNEI, BURMA, CAMBODIA,			GRANTMAKING		28,020.
EUROPE (INCLUDING ICELAND & GREENLAND) - ALBANIA, ANDORRA, AUSTRIA, BELGIUM			GRANTMAKING		455,790.
NORTH AMERICA - CANADA AND MEXICO, BUT NOT THE UNITED STATES			GRANTMAKING		45,807.
SOUTH AMERICA - ARGENTINA, BOLIVIA, BRAZIL, CHILE, COLUMBIA, ECUADOR,			GRANTMAKING		97,426.
SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES,			GRANTMAKING		700.
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,			GRANTMAKING		6,850.
MIDDLE EAST AND NORTH AFRICA - ALGERIA, SAUDI ARABIA, DJIBOUTI, EGYPT,			GRANTMAKING		100,000.
3 a Subtotal	0	0			908,401.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			908,401.

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

Schedule F (Form 990) 2022

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

13-5562362

Schedule F (Form 990) 2022

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA & THE CARRIBBEAN	EDUCATION SUPPLIES - HAITI	6,700.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	EDUCATION SUPPLIES - HAITI	16,219.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	EDUCATION SUPPLIES - HAITI	10,156.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	CHARITABLE ASSISTANCE	35,275.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	CHARITABLE ASSISTANCE	6,966.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	CHARITABLE ASSISTANCE	14,655.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	CHARITABLE ASSISTANCE	20,350.		0.		
			CENTRAL AMERICA & THE CARRIBBEAN	CHARITABLE ASSISTANCE	20,262.		0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 23

3 Enter total number of other organizations or entities 23

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

13-5562362

Page 2

Schedule F (Form 990)

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			CENTRAL AMERICA & THE CARRIBBEAN	CHARITABLE ASSISTANCE	30,650.		0.		
			EAST ASIA AND THE PACIFIC	CHARITABLE ASSISTANCE	28,020.		0.		
			EUROPE	SUPPORT	455,790.		0.		
			NORTH AMERICA	CHARITABLE ASSISTANCE	45,807.		0.		
			SOUTH AMERICA	CHARITABLE ASSISTANCE	5,800.		0.		
			SOUTH AMERICA	CHARITABLE ASSISTANCE	11,563.		0.		
			SOUTH AMERICA	CHARITABLE ASSISTANCE	22,500.		0.		
			SOUTH AMERICA	CHARITABLE ASSISTANCE	9,200.		0.		
			SOUTH AMERICA	CHARITABLE ASSISTANCE	48,363.		0.		

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Schedule F (Form 990)

13-5562362

Page 2

Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)									
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			MIDDLE EAST AND NORTH AFRICA	HOT MEALS PROGRAM	100,000.		0.		
			SUB-SAHARAN AFRICA	CHARITABLE ASSISTANCE	6,850.		0.		

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Schedule F (Form 990) 2022

13-5562362 Page 4

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* Yes No

Schedule F (Form 990) 2022

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

THE INTERNATIONAL GRANTMAKING POLICY OF THE NATIONAL COUNCIL OF THE UNITED STATES SOCIETY OF ST. VINCENT DE PAUL, INC. (NATIONAL SVDP) LIMITS A FOREIGN GRANTEE'S USE OF FUNDS TO SPECIFIC PROJECTS THAT FURTHER NATIONAL SVDP'S CHARITABLE, RELIGIOUS, AND EDUCATIONAL PURPOSES UNDER SECTION 501 (C)(3), EXERCISES CONTROL AND DISCRETION OVER A GRANTEE'S USE OF THE FUNDS, AND PROVIDES FOR RECEIPT AND MAINTENANCE OF PERIODIC ACCOUNTINGS FROM FOREIGN GRANTEES ESTABLISHING THAT THE FUNDS WERE UTILIZED FOR 501 (C)(3) PURPOSES. THE APPLICATION OF THESE GUIDELINES SHALL BE ON A RISK-BASED APPROACH AND WILL DIFFER DEPENDING ON: (A) THE NATURE OF THE FOREIGN ORGANIZATION; (B) THE SIZE, SCOPE, AND DURATION OF THE GRANT RELATIONSHIP; AND (3) THE FOREIGN COUNTRY'S LEGAL STRUCTURE AND POLITICAL CLIMATE OF THE REGION. NATIONAL SVDP REGULARLY REVIEWS AND ASSESSES ITS ONGOING FOREIGN GRANTMAKING ACTIVITIES UTILIZING THE TREASURY RISK MATRIX FOR THE CHARITABLE SECTOR. TO THE GREATEST EXTENT POSSIBLE, NATIONAL SVDP'S GRANTMAKING ACTIVITIES ARE PERFORMED TO COMPLY WITH A LOW RISK TOLERANCE. ALL FOREIGN GRANT RECIPIENTS ARE SCREENED ON THE DEPARTMENT OF TREASURY'S OFFICE OF FOREIGN ASSETS CONTROL SPECIALLY DESIGNATED NATIONALS LIST (SDN LIST) PRIOR TO GRANT DISTRIBUTION. NATIONAL SVDP ALSO ROUTINELY MONITORS COUNTRY-SPECIFIC SANCTIONS PROGRAMS AND INFORMATION AVAILABLE IN REGIONS WHERE NATIONAL SVDP IS GRANTING FUNDS. PRIOR TO DISTRIBUTING GRANT FUNDS TO A SANCTIONED COUNTRY OR REGION WITH A HIGH RISK OF TERRORISM, NATIONAL SVDP CONSULTS LEGAL COUNSEL AND SECURES APPLICABLE LICENSING WITH OFAC TO ENSURE THAT ALL GRANTS COMPLY WITH US LAWS, FOREIGN POLICY AND NATIONAL SECURITY GOALS.

INTERNATIONAL TWINNING PROGRAM NATIONAL SVDP'S INTERNATIONAL TWINNING

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

(COLLABORATIVE FUNDING) PROGRAM CONNECTS INSTITUTED/AGGREGATED US-BASED SVDP CONFERENCES AND COUNCILS TO INSTITUTED/AGGREGATED SVDP COUNCILS AND CONFERENCES IN FOREIGN COUNTRIES LACKING RESOURCES TO CONDUCT THEIR WORKS OF CHARITY. A SYSTEM OF COLLABORATIVE FUNDING BETWEEN ORGANIZATIONS, CHARITABLE FUNDS ARE COLLECTED FROM TWINNED CONFERENCES AND COUNCILS IN THE US AND GRANTED TO PARTICIPATING TWINNED CONFERENCES AND COUNCILS IN FOREIGN COUNTRIES. THESE GRANTEES SHARE THE SAME RELIGIOUS AND CHARITABLE PURPOSES OF NATIONAL SVDP. FOREIGN GRANTEES' USE OF FUNDS ARE GOVERNED BY THE INTERNATIONAL TWINNING COMMISSION POLICIES AND PROCEDURES MANUAL, WHICH REQUIRES THE GRANTEE TO USE THE FUNDS FOR SPECIFIC CHARITABLE PROJECTS; PROVIDE ADEQUATE CONTROL AND OVERSIGHT SAFEGUARDS; AND ESTABLISH REGULAR REPORTING ON THE USE OF THE FUNDS FOR NATIONAL SVDP.

FOREIGN GRANTEES MUST COMPLETE A CERTIFICATION THAT THE GRANTEE WILL UTILIZE THE FUNDS IN ACCORDANCE WITH THE TWINNING MANUAL, COMPLY WITH ADDITIONAL ANTI-TERRORISM AND LEGISLATIVE/POLITICAL CAMPAIGN RESTRICTIONS REQUIRED UNDER US LAW, AND PROVIDE REPORTING IN ACCORDANCE WITH THE SAME. THIS CERTIFICATION MUST BE COMPLETED PRIOR TO THE GRANTING OF ANY TWINNING FUNDS. ALL INTERNATIONAL TWINNING APPLICATIONS APPROVED BY THE INTERNATIONAL TWINNING COMMISSION ARE REVIEWED AND APPROVED BY THE CHIEF EXECUTIVE OFFICER AND ARE SUBJECT TO QUARTERLY REPORTING TO THE FINANCE COMMITTEE OR OTHER COMMITTEE AUTHORIZED BY THE NATIONAL SVDP BOARD OF DIRECTORS.

NON-TWINNING GRANTS AND CONTRIBUTIONS. FOREIGN GRANTEES THAT DO NOT PARTICIPATE IN THE INTERNATIONAL TWINNING PROGRAM MUST COMPLETE A PRE-GRANT INQUIRY PRIOR TO RECEIVING A GRANT FROM NATIONAL SVDP. NATIONAL

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

SVDP REVIEWS THE PRE-GRANT INQUIRIES TO ENSURE THAT THE PROJECT(S) TO BE FUNDED FURTHER NATIONAL SVDP'S RELIGIOUS AND CHARITABLE PURPOSES AND THE GRANTEE ORGANIZATION IS AN APPROPRIATE RECIPIENT TO EXPEND THE FUNDS FOR THE PROPOSED PROJECT(S). FOREIGN GRANTS MADE OUTSIDE THE SCOPE OF NATIONAL SVDP'S INTERNATIONAL TWINNING PROGRAM ARE GOVERNED BY A WRITTEN GRANT AGREEMENT THAT RESTRICTS GRANTEE'S USE OF THE FUNDS TO SPECIFIC CHARITABLE AND RELIGIOUS PROJECTS AND MANDATES REPORTING PROCEDURES. LONG-TERM GRANT AGREEMENTS ARE REVIEWED ON A TWO TO THREE-YEAR BASIS.

ALL NON-TWINNING GRANTS AND CONTRIBUTIONS ARE REVIEWED AND APPROVED BY THE FINANCE COMMITTEE OR OTHER COMMITTEE AUTHORIZED BY THE NATIONAL SVDP BOARD OF DIRECTORS MONTHLY AND ARE SUBJECT TO A SEMI-ANNUAL REPORTING TO THE NATIONAL SVDP BOARD OF DIRECTORS.

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Schedule G (Form 990) 2022

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Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
	2 Cash prizes				
Direct Expenses	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (d)				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11 Does the organization conduct gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity conducted in:

13a		%
13b		%

 - a The organization's facility
 - b An outside facility
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name _____

Address _____

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization \$ _____ and the amount of gaming revenue retained by the third party \$ _____

c If "Yes," enter name and address of the third party:

Name _____

Address _____

16 Gaming manager information:

Name _____

Gaming manager compensation \$ _____

Description of services provided _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (ii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

Name of the organization **NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Employer identification number
13-5562362

OMB No. 1545-0047
2022

Open to Public
Inspection

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF ST. VINCENT DE PAUL CENTRAL COUNCIL OF PITTSBURGH - 1501 REEDSDALE ST, #3003 - PITTSBURGH, PA 15233	25-1549926	501(C)(3)	37,480.	0.			FOP GRANTS, DIRECT MAIL
ADCC OF PHILADELPHIA W. GERMANTOWN PIKE, SUITE 210 PLYMOUTH MEETING, PA 19462	23-1352549	501(C)(3)	17,115.	0.			FOP GRANTS, FOP WALK
SOCIETY OF ST. VINCENT DE PAUL DIOCESAN COUNCIL OF VENICE - 2628 DEL PRADO BLVD - CAPE CORAL, FL 33904	27-2164241	501(C)(3)	5,701.	0.			DIRECT MAIL
COUNCIL OF ORANGE SOCIETY OF ST. VINCENT DE PAUL - 1505 E. 17TH STREET SUITE 109 - SANTA ANA, CA 92705	95-3033494	501(C)(3)	14,628.	0.			DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF MIAMI, INC. - PO BOX 8307 - CORAL SPRINGS, FL 33075	65-0681310	501(C)(3)	7,690.	0.			DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESE OF CHICAGO - 12731 S WOOD STREET - BLUE ISLAND, IL 60406	36-3195567	501(C)(3)	9,686.	0.			DIRECT MAIL

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **52.**

3 Enter total number of other organizations listed in the line 1 table **0.**

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

Schedule I (Form 990) 2022

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF ST. VINCENT DE PAUL OF JOLIET DIOCESAN COUNCIL INC. - 320 WINDY POINT DRIVE - GLENDALE HEIGHTS, IL 60139	36-2484129	501(C)(3)	19,691.	0.			DIRECT MAIL
DIOCESAN COUNCIL OF ARLINGTON 8021 WOLFTRAP ROAD DUNN LORING, VA 22027	27-0092853	501(C)(3)	12,467.	0.			DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL DISASTER SERVICES CORPORATION - 511 E. JOHN CARPENTER FWY - IRVING, TX 75062	82-0658251	501(C)(3)	917,248.	0.			DISASTER RELIEF
DIOCESE OF COLORADO SPRINGS SOCIETY OF ST. VINCENT DE PAUL - 22 W. KIOWA STREET - COLORADO SPRINGS, CO 80903	85-3546717	501(C)(3)	5,448.	0.			POP GRANT, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL FORT WORTH DIOCESAN COUNCIL - 1102 BUCKNELL DRIVE - ARLINGTON, TX 76012	75-2887696	501(C)(3)	7,415.	0.			POP GRANT, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL GEORGIA INC. - 2050 CHAMBLEE-TUCKER RD, STE C - ATLANTA, GA 30341	58-0967972	501(C)(3)	14,692.	0.			POP GRANT, DIRECT MAIL
DIOCESAN COUNCIL OF ORLANDO 770 A S ORANGE BLOSSOM TRAIL APOPKA, FL 32703	59-2948683	501(C)(3)	42,288.	0.			POP GRANT, DIRECT MAIL, IMMERSION SUBGRANT
SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL - 3500 CANAL STREET - NEW ORLEANS, LA 70119	72-0802053	501(C)(3)	36,226.	0.			POP GRANT, DIRECT MAIL, SYSTEMIC CHANGE GRANT
SOCIETY OF ST. VINCENT DE PAUL SACRED HEART PERRY ST RICHMOND, VA - 1400 PERRY STREET - RICHMOND, VA 23224	83-2458473	501(C)(3)	11,270.	0.			POP GRANT, POP WALK

Schedule I (Form 990)

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF ST. VINCENT DE PAUL COUNCIL OF SEATTLE-KING COUNTY - 5950 4TH AVENUE S - SEATTLE, WA 98108	91-0583891	501(C)(3)	5,100.	0.			FOP GRANT, FOP WALK
SOCIETY OF ST. VINCENT DE PAUL ST. LUKE THE EVANGELIST CONFERENCE - 8 ATKINSON DEPOT RD. - PLAISTOW, NH 03865	26-4071783	501(C)(3)	5,350.	0.			FOP GRANT, FOP WALK
SOCIETY OF ST. VINCENT DE PAUL DIOCESAN COUNCIL OF AUSTIN - PO BOX 81511 - AUSTIN, TX 78708	74-2763690	501(C)(3)	61,498.	0.			FOP GRANT, FOP WALK
DISTRICT COUNCIL OF CONTRA COSTA SOCIETY OF ST. VINCENT DE PAUL - 2210 GLADSTONE DRIVE - PITTSBURG, CA 94565	94-1448577	501(C)(3)	11,780.	0.			FOP GRANT, FOP WALK
SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESE OF GALVESTON-HOUSTON - 2403 HOLCOMBE BLVD - HOUSTON, TX 77021	74-1464210	501(C)(3)	11,825.	0.			FOP GRANT, FOP WALK
SOCIETY OF ST. VINCENT DE PAUL IN THE ARCHDIOCESE OF DETROIT - 3000 GRATIOT AVENUE - DETROIT, MI 48207	38-1359592	501(C)(3)	35,965.	0.			FOP GRANT, FOP WALK, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL TWIN CITIES - 2939 12TH AVENUE S - MINNEAPOLIS, MN 55407	41-0711616	501(C)(3)	13,114.	0.			FOP GRANT, FOP WALK, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL DIOCESAN COUNCIL OF DALLAS, INC. - 3826 GILBERT AVENUE - DALLAS, TX 75219	75-1630370	501(C)(3)	43,747.	0.			FOP GRANT, FOP WALK, DIRECT MAIL
DIOCESAN COUNCIL FOR THE SOCIETY OF ST. VINCENT DE PAUL DIOCESE PHOENIX - PO BOX 13600 - PHOENIX, AZ 85002	86-0096789	501(C)(3)	16,494.	0.			FOP GRANT, FOP WALK, DIRECT MAIL

Schedule I (Form 990)

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIOCESAN COUNCIL OF SAN DIEGO PO BOX 501184 SAN DIEGO, CA 92154	23-7149789	501(C)(3)	18,555.	0.			FOP GRANT, FOP WALK, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL PARTICULAR COUNCIL OF DENVER - 2830 LAWRENCE ST. - DENVER, CO 80205	84-6032037	501(C)(3)	35,679.	0.			FOP GRANT, FOP WALK, DIRECT MAIL, MULTICULTURAL
SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF INDIANAPOLIS - 2500 CHURCHMAN AVENUE - INDIANAPOLIS, IN 46203	37-1507632	501(C)(3)	10,000.	0.			FOP GRANTS
SOCIETY OF ST. VINCENT DE PAUL ST. MICHAEL THE ARCHANGEL CONFERENCE - 4491 SPRINGFIELD RD. - GLEN ALLEN, VA 23060	81-4678250	501(C)(3)	22,220.	0.			FOP WALK
SOCIETY OF ST. VINCENT DE PAUL ARCHDIOCESAN COUNCIL OF ST. LOUIS - 1310 PAPIN STREET - ST. LOUIS, MO 63103	43-0652684	501(C)(3)	5,660.	0.			FOP WALK
FORT WAYNE SOCIETY OF ST. VINCENT DE PAUL INC. - 1600 S CALHOUN STREET - FORT WAYNE, IN 46802	35-0975940	501(C)(3)	19,851.	0.			FOP WALK
SOCIETY OF ST. VINCENT DE PAUL DISTRICT COUNCIL OF GREEN BAY, INC. - 1529 LEO FRIGO WAY - GREEN BAY, WI 54302	39-1035429	501(C)(3)	6,265.	0.			FOP WALK
SOCIETY OF ST. VINCENT DE PAUL DISTRICT COUNCIL OF ROCHESTER MN - 1600 11TH AVE. SE - ROCHESTER, MN 55904	46-5044559	501(C)(3)	6,475.	0.			FOP WALK
SOCIETY OF ST. VINCENT DE PAUL DISTRICT COUNCIL OF ARKANSAS - 205 SE 3RD STREET - BENTONVILLE, AR 72712	26-4355130	501(C)(3)	7,795.	0.			FOP WALK

Schedule I (Form 990)

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
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Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF ST. VINCENT DE PAUL HOLY TRINITY CONFERENCE - 401 ALDERMAN ROAD - CHARLOTTEVILLE, VA 22903	84-3047407	501(C)(3)	8,404.	0.			FOP WALK
ST. AUGUSTINE DIOCESAN COUNCIL SOCIETY OF ST. VINCENT DE PAUL, INC. - 3512 BEACH BLVD. - JACKSONVILLE, FL 32207	26-0007717	501(C)(3)	9,330.	0.			FOP WALK
SOCIETY OF ST. VINCENT DE PAUL OUR LADY OF GRACE - 5011 WHITE OAK AVE. - ENCINO, CA 91316	27-1098161	501(C)(3)	8,804.	0.			FOP WALK
DIOCESAN COUNCIL SOCIETY OF ST. VINCENT DE PAUL CLEVELAND DIOCESE - 1404 EAST 9TH STREET 3RD FLOOR - CLEVELAND, OH 44114	51-0434414	501(C)(3)	15,443.	0.			FOP WALK, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL OF MEMPHIS INC. - 1306 MONROE AVE - MEMPHIS, TN 38104	90-0262650	501(C)(3)	10,874.	0.			FOP WALK, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL IN THE ARCHDIOCESE OF BOSTON INC - 18 CANTON STREET - STOUGHTON, MA 02072	04-2104826	501(C)(3)	39,506.	0.			FOP WALK, DIRECT MAIL
SOCIETY OF ST. VINCENT DE PAUL RHODE ISLAND - 25 WEBB ST. - CRANSTON, RI 02920	05-6010248	501(C)(3)	16,416.	0.			FOP WALK, DIRECT MAIL, FOP GRANTS
DIOCESAN COUNCIL OF ROCKFORD, IL 227 WHITE OAK STREET HAMPSHIRE, IL 60140	06-1640220	501(C)(3)	54,741.	0.			FOP WALK, DIRECT MAIL, FOP GRANTS
DES MOINES COUNCIL OF SOCIETY OF ST. VINCENT DE PAUL - 1426 6TH AVE - DES MOINES, IA 50314	42-6021808	501(C)(3)	31,016.	0.			FOP WALK, DIRECT MAIL, IMMERSION SUBGRANT

Schedule I (Form 990)

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

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Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LINCOLN COUNCIL, SOCIETY OF ST. VINCENT DE PAUL - P.O. BOX 30145 - LINCOLN, NE 68503	20-8997157	501(C)(3)	5,100.	0.			FOP WALK, FOP GRANT
ST. MARY OF THE LAKE CONFERENCE, SOCIETY OF ST. VINCENT DE PAUL - 43 MADISON AVE. - LAKEWOOD, NJ 08701	11-3819644	501(C)(3)	8,200.	0.			FOP WALK, FOP GRANTS
DIOCESAN CENTRAL COUNCIL OF BUFFALO - 1298 MAIN STREET - BUFFALO, NY 14209	16-0747359	501(C)(3)	26,461.	0.			FOP WALK, FOP GRANTS, SYSTEMIC CHANGE GRANT
SOCIETY OF ST. VINCENT DE PAUL DISTRICT COUNCIL OF ATTLEBORO - 6 TANYA DRIVE - MANSFIELD, MA 02048	83-1207263	501(C)(3)	43,965.	0.			FOP WALK, IMMERSION SUBGRANT
MANHATTEN DISTRICT COUNCIL 1011 FIRST AVENUE 607 NEW YORK, NY 10022	13-5563024	501(C)(3)	5,300.	0.			FOP WALK, MULTICULTURAL
SOCIETY OF ST. VINCENT DE PAUL FOND DU LAC COUNTY - 330 N PETERS AVE - FOND DU LAC, WI 54935	39-0824875	501(C)(3)	20,000.	0.			SYSTEMIC CHANGE GRANT
SOCIETY OF ST. VINCENT DE PAUL PARTICULAR COUNCIL OF CINCINNATI - 1125 BANK STREET - CINCINNATI, OH 45214	31-0537510	501(C)(3)	20,000.	0.			SYSTEMIC CHANGE GRANT
DISTRICT COUNCIL OF KNOXVILLE SOCIETY OF ST. VINCENT DE PAUL - 120 WEST BAXTER AVE - KNOXVILLE, TN 37917	46-4976039	501(C)(3)	20,000.	0.			SYSTEMIC CHANGE GRANT
DIOCESAN COUNCIL OF SACRAMENTO 2275 WATT AVENUE SACRAMENTO, CA 95825	86-2323808	501(C)(3)	20,000.	0.			SYSTEMIC CHANGE GRANT

Schedule I (Form 990)

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

13-5562362 Page 1

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SOCIETY OF ST. VINCENT DE PAUL ST. PHILIP BENIZI CONFERENCE - 235 S. PINE DR. - FULLERTON, CA 92833	27-1975535	501(C)(3)	20,000.	0.			SYSTEMIC CHANGE GRANT

Schedule I (Form 990)

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Schedule I (Form 990) 2022

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ALL DOMESTIC GRANTS ARE BY APPLICATION. THE APPLICATIONS ARE REVIEWED AND SCORED BY A PREDETERMINED TASK FORCE OR COMMITTEE. IF A GRANT IS AWARDED, THE GRANTEE PARTICIPATES IN A CONFERENCE CALL WHERE REPORTING REQUIREMENTS ARE REVIEWED. ASSISTANCE IS PROVIDED THROUGHOUT THE GRANT PERIOD AND GRANTEEES MUST FILE BOTH MID-TERM AND FINAL GRANT REPORTS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.

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

Name of the organization **NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.** Employer identification number **13-5562362**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1a	X	
1b	X	
2	X	
3		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2022

NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

TRAVEL AND MEETING EXPENSES OF THE SPOUSE OF THE NATIONAL PRESIDENT ARE TO
BE PAID BY THE NATIONAL COUNCIL OF THE US. TRAVEL AND MEETING EXPENSES OF
THE SPOUSE OF THE CHIEF EXECUTIVE OFFICER FOR A MAXIMUM OF THREE MEETINGS
PER YEAR ARE TO BE PAID BY THE NATIONAL COUNCIL OF THE US.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

Name of the organization **NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.** Employer identification number **13-5562362**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles	X	118	99,310.	FMV
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	28	100,009.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	X	
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990. Schedule M (Form 990) 2022

NATIONAL COUNCIL OF THE U.S. SOCIETY OF

Schedule M (Form 990) 2022

ST. VINCENT DE PAUL, INC.

13-5562362

Page 2

Part II

Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

CHARITABLE ADULT RIDES & SERVICES SOLICITS DONATIONS THROUGH THEIR
WEBSITE AND IMMEDIATELY SELLS THEM AT A CAR AUCTIONS AND SEND NET FUNDS
AFTER EXPENSES AND THEIR FEES.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

Employer identification number
13-5562362

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

**A NETWORK OF FRIENDS, INSPIRED BY GOSPEL VALUES, GROWING IN HOLINESS
AND BUILDING A MORE JUST WORLD THROUGH PERSONAL RELATIONSHIPS WITH AND
SERVICE TO PEOPLE IN NEED.**

FORM 990, PART III, LINE 4A

**THE NATIONAL COUNCIL OF THE UNITED STATES, SOCIETY OF ST. VINCENT DE
PAUL, INC. PROVIDES RESOURCES TO ITS MEMBER LOCAL CHAPTERS
(CONFERENCES/COUNCILS) TO HELP INCREASE THEIR SERVICE CAPACITY.**

**THE FRIENDS OF THE POOR GRANT PROGRAM PROVIDES GRANTS TO LOCAL
CONFERENCES TO BE USED FOR EMERGENCY ASSISTANCE IN PREVENTING EVICTION
AND UTILITY SHUT-OFFS, PROVIDING FOOD AND CLOTHING AND OTHER BASIC NEED
SERVICES. THESE GRANTS HELP EXTEND THE OUTREACH OF LOCAL CONFERENCES BY
AIDING THOSE WHO WOULD NOT HAVE BEEN SERVED WITHOUT THIS ASSISTANCE.**

**SYSTEMIC CHANGE PROGRAMS PROVIDE GRANTS TO LOCAL COUNCILS AND
CONFERENCES FOR PROJECTS WITH THE SOLE PURPOSE OF HELPING INDIVIDUALS
JOURNEY OUT OF POVERTY AND INTO MIDDLE CLASS.**

**MULTICULTURAL GRANTS HELP DIVERSE LOCAL CONFERENCES GROW THEIR
MEMBERSHIP AND INCREASE OUR NETWORK OF FRIENDS. ENCOURAGING A DIVERSE
VINCENTIAN MEMBERSHIP HELPS US TO REACH OUT TO NEW COMMUNITIES AND GROW
IN OUR ABILITY TO SERVE THOSE IN NEED.**

FUNDRAISING AND GRANT WRITING RESOURCES ARE BEING PROVIDED TO ASSIST

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization	NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Employer identification number	13-5562362
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CONFERENCES AND COUNCILS DEVELOP SOUND FUNDRAISING ACTIVITIES.

COMMUNICATION SERVICES FROM THE NATIONAL COUNCIL INFORMS THE MEMBERS OF THE CURRENT EVENTS, NEW TRAINING MATERIALS, GRANT OPPORTUNITIES AND RESOURCES. LOCAL PRESS RELEASES ARE SUBMITTED TO INCREASE THE AWARENESS OF THE SOCIETY AND ITS IMPACT.

MEMBERSHIP SERVICES PROVIDES TRAINING AND RESOURCES TO LOCAL MEMBERS TO ENHANCE THEIR MEMBERSHIP GROWTH AND UNDERSTANDING OF THE OPERATIONAL PRINCIPLES OF THE SOCIETY. SPIRITUAL FORMATION SERVICES HELP CONFERENCE AND COUNCIL MEMBERS DEEPEN THEIR UNDERSTANDING OF THE BASIC RESOURCES OF THE SOCIETY, AND HOW TO MORE FULLY DEVELOP ONESELF IN THE LIKENESS OF GOD.

INTERNATIONAL TWINNING SERVICES PROVIDES LOCAL SVDPUA CONFERENCES THE ABILITY TO FINANCIALLY PARTNER WITH A CONFERENCE IN A FOREIGN COUNTRY.

FORM 990, PART III, LINE 4B

DISASTER RELIEF FUNDS AID LOCAL SOCIETY OF ST. VINCENT DE PAUL COUNCILS AND CONFERENCES IN RESPONDING QUICKLY AND EFFECTIVELY TO NATURAL AND MAN-MADE DISASTERS. DISASTER SERVICES ALSO TRAINS LOCAL MEMBERS ON BEST PRACTICES FOR DISASTER RESPONSE AND DEPLOYS EMERGENCY RESPONSE TEAMS TO THE IMPACTED AREA.

IN COOPERATION WITH THE SOCIETY OF ST. VINCENT DE PAUL DISASTER SERVICES CORPORATION AND ITS MEMBER COUNCILS AND CONFERENCES, THE NATIONAL COUNCIL OF THE UNITED STATES, SOCIETY OF ST. VINCENT DE PAUL, INC. HAS HELPED THOUSANDS OF FAMILIES REBUILD AFTER A NATURAL OR

Name of the organization	NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Employer identification number	13-5562362
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MAN-MADE DISASTER SUCH AS CATASTROPHIC FLOODING, HURRICANES AND
DEVASTATING FIRES. WHILE THESE DISASTERS ARE TRAUMATIC FOR ALL WHO
EXPERIENCE THEM, OUR MOST VULNERABLE POPULATIONS HAVE THE FEWEST
RESOURCES FOR RECOVERY. FAMILIES THAT WERE ON THE EDGE OF POVERTY
BEFORE THE DISASTER ARE NOW IN POVERTY FACING THE OVERWHELMING TASK OF
REBUILDING THEIR LIVES.

GIVEN THE SOCIETY'S FOUNDING PRINCIPLE OF WORKING FACE-TO-FACE WITH
PEOPLE IN POVERTY AND OUR PROVEN ABILITIES TO HELP BEFORE, DURING, AND
AFTER THE DISASTERS, AND IN COLLABORATION WITH THE SOCIETY OF THE ST.
VINCENT DE PAUL DISASTER SERVICES CORPORATION AND SVDP
COUNCILS/CONFERENCES, THE NATIONAL COUNCIL OF THE UNITED STATES,
SOCIETY OF ST. VINCENT DE PAUL, INC. PROVIDES MUCH NEEDED ASSISTANCE
IN: DISASTER CASE MANAGEMENT AND LOCAL SAFETY NET PROVIDERS HELP
DISASTER SURVIVORS DEVELOP INDIVIDUAL RECOVERY PLANS OR ROAD MAPS WITH
RESOURCES TO HELP REBUILD AND SHAPE THEIR FUTURE AND ESSENTIAL ITEMS TO
RE-FURNISH HOMES UTILIZING A HOLISTIC, COMMUNITY-BASED APPROACH TO
HELPING FAMILIES IMMEDIATELY AFTER A DISASTER.

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

THE MEMBER COUNCIL BOARD PRESIDENTS ARE ELECTED BY THEIR MEMBERSHIP AND
SERVE AS NATIONAL COUNCIL MEMBERS. THESE NATIONAL COUNCIL MEMBERS ARE
SEPARATE FROM THE NATIONAL COUNCIL BOARD AND HAVE CERTAIN GOVERNANCE
RESPONSIBILITIES OUTLINED IN THE BYLAWS.

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

THE NATIONAL COUNCIL MEMBERS' RESPONSIBILITIES INCLUDE VOTING TO ELECT THE
NATIONAL COUNCIL BOARD PRESIDENT, APPROVING THE PRESIDENTIAL APPOINTMENTS.

Name of the organization	NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Employer identification number	13-5562362
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FORM 990, PART VI, SECTION A, LINE 7B:

THE NATIONAL COUNCIL MEMBERS' RESPONSIBILITIES INCLUDE BUT ARE NOT LIMITED TO APPROVAL OF THE ANNUAL BUDGET, POLICIES, ADOPTION OF OUR AMENDMENTS TO THE ARTICLES OF INCORPORATION AND BYLAWS AND THE DISSOLUTION AND DISPOSAL OF THE NATIONAL COUNCIL'S ASSETS.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PREPARED BY A CPA FIRM AND REVIEWED BY THE CHIEF FINANCIAL OFFICER AND CHIEF EXECUTIVE OFFICER, AND PRESENTED TO THE FINANCE COMMITTEE AND ALL VOTING BOARD MEMBERS PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

A QUESTIONNAIRE IS DISTRIBUTED TO THE BOARD OF DIRECTORS, NATIONAL COUNCIL MEMBERS, COMMITTEE CHAIRS, AND STAFF. THEN, THE QUESTIONNAIRES ARE COLLECTED AT THE MAIN OFFICE AND REVIEWED FOR ANY POTENTIAL ISSUES.

FORM 990, PART VI, SECTION B, LINE 15:

THE CEO SALARY IS REVIEWED ANNUALLY BY THE ORGANIZATION'S BOARD OF DIRECTORS AND ITS COMPENSATION COMMITTEE, WHICH USES INDUSTRY COMPARATIVES

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION B, LINE 10B

THE NATIONAL COUNCIL AND ALL THE SVDP CONFERENCES AND COUNCILS IN THE UNITED STATES ARE UNITED IN A WORLDWIDE CHRISTIAN COMMUNITY FOUNDED IN PARIS IN 1833, BY A GROUP OF YOUNG CATHOLIC LAY PEOPLE, LED BY BLESSED

Name of the organization NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Employer identification number 13-5562362
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FREDERIC OZANAM. THE SOCIETY'S MEMBERSHIP IS OPEN TO ALL THOSE WHO SEEK TO LIVE THEIR FAITH LOVING AND COMMITTING THEMSELVES TO THEIR NEIGHBORS IN NEED. THE SOCIETY OF ST. VINCENT DE PAUL OF THE UNITED STATES IS A SEPARATE 501(C)(3) ORGANIZATION FROM ITS LOCAL CHAPTERS. LOCAL CHAPTERS ARE ENCOURAGED TO BECOME THEIR OWN 501(C)(3) ORGANIZATIONS. CONFERENCES ARE PARISH-BASED CHAPTERS OPERATING IN 4,200 CATHOLIC PARISHES IN LOCAL NEIGHBORHOODS, HAVING A PRESENCE IN 155 OF THE 194 CATHOLIC DIOCESES (80 PERCENT). THE CONFERENCE IS THE BASE UNIT OF THE SOCIETY AND IS WHERE THE STRENGTH OF THE SOCIETY IS ROOTED. THE MISSION OF THE CONFERENCE IS TO JOIN PEOPLE TOGETHER IN A BOND OF FRIENDSHIP, AND TO GROW SPIRITUALLY BY OFFERING PERSON-TO-PERSON SERVICE TO THOSE WHO ARE NEDDY AND SUFFERING, IN THE TRADITION OF THE FOUNDER, BLESSED FREDERIC OZANAM AND PATRON, ST. VINCENT DE PAUL.

FORM 990, PART XII, LINE 2C:
 THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

**NATIONAL COUNCIL OF THE U.S. SOCIETY OF
ST. VINCENT DE PAUL, INC.**

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity

b Gift, grant, or capital contribution to related organization(s)

c Gift, grant, or capital contribution from related organization(s)

d Loans or loan guarantees to or for related organization(s)

e Loans or loan guarantees by related organization(s)

f Dividends from related organization(s)

g Sale of assets to related organization(s)

h Purchase of assets from related organization(s)

i Exchange of assets with related organization(s)

j Lease of facilities, equipment, or other assets to related organization(s)

k Lease of facilities, equipment, or other assets from related organization(s)

l Performance of services or membership or fundraising solicitations for related organization(s)

m Performance of services or membership or fundraising solicitations by related organization(s)

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

o Sharing of paid employees with related organization(s)

p Reimbursement paid to related organization(s) for expenses

q Reimbursement paid by related organization(s) for expenses

r Other transfer of cash or property to related organization(s)

s Other transfer of cash or property from related organization(s)

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	Yes/No	
					Yes	No
(1) DISASTER SERVICES CORPORATION - SVDP USA		B	917,248.	CASH VALUE		
SOCIETY OF ST. VINCENT DE PAUL NATIONAL STORES		A	6,250.	CASH VALUE		
(2) STORES		D	500,000.	CASH VALUE		
(3) STORES		R	215,051.	CASH VALUE		
(4) FOUNDATION						
(5)						
(6)						

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, COLUMN B - PRIMARY ACTIVITY

ORGANIZATION: DISASTER SERVICES CORPORATION OF THE SOCIETY OF ST.

VINCENT DE PAUL PRIMARY ACTIVITY: SUPPORT AND DISASTER RELIEF TO

SOCIETY OF ST. VINCENT DE PAUL COUNCILS AND CONFERENCES.

ORGANIZATION: SOCIETY OF ST. VINCENT DE PAUL NATIONAL FOUNDATION

PRIMARY ACTIVITY: TO BUILD AN ENDOWMENT FUND.

ORGANIZATION: SOCIETY OF SVDP NATIONAL STORES PRIMARY ACTIVITY: THRIFT

STORE TO SERVE THOSE IN NEED AND TRAINING FACILITY FOR OTHER SVDP

THRIFT STORES.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. NATIONAL COUNCIL OF THE U.S. SOCIETY OF ST. VINCENT DE PAUL, INC.	Taxpayer identification number (TIN) 13-5562362
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 66 PROGRESS PARKWAY	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MARYLAND HEIGHTS, MO 63043-3706	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

THE ORGANIZATION

- The books are in the care of ▶ **66 PROGRESS PARKWAY - MARYLAND HEIGHTS, MO 63043**

Telephone No. ▶ **(314) 576-3993** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **AUGUST 15, 2024**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **OCT 1, 2022**, and ending **SEP 30, 2023**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

OPEN TO PUBLIC INSPECTION