Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2012

Open to Public Inspection

A For the 2012 calendar year, or tax year beginning 01-01-2012 , 2012, and ending 12-31-2012

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

C Name of organization
UNITED WAY OF GREATER ST JOSEPH

Doing Business As

Number and street (or P O box if mail is not delivered to street address) | Room/suite
PO BOX 188

City or town, state or country, and ZIP + 4
ST JOSEPH, MO 64502

D Employer identification number
44-0547802

E Telephone number
(816) 364-2381

G Gross receipts $ 4,040,368

F Name and address of principal officer
KYLEE STROUGH
PO BOX 188
ST JOSEPH, MO 64502

H(a) Is this a group return for affiliates? ☐ Yes ☑ No

H(b) Are all affiliates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J **Website:** ▶ WWW STJOSEPHUNITEDWAY ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1916

M State of legal domicile MO

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
TO IMPROVE LIVES THROUGH THE CARING POWER OF COMMUNITY

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	31
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31
5	Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	10
6	Total number of volunteers (estimate if necessary)	6	601
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	3,467,743	3,263,876
	9	Program service revenue (Part VIII, line 2g)	57,869	52,895
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	119,969	173,251
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	68,287	71,838
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	3,713,868	3,561,860
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	2,472,871	2,425,195
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	416,006	421,109
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶140,562		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	311,985	281,572
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	3,200,862	3,127,876
	19	Revenue less expenses Subtract line 18 from line 12	513,006	433,984

			Beginning of Current Year	End of Year
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	9,156,851	9,793,449
	21	Total liabilities (Part X, line 26)	2,715,947	2,709,179
	22	Net assets or fund balances Subtract line 21 from line 20	6,440,904	7,084,270

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

****** | 2013-05-14
Signature of officer | Date

JASON HORN TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
CARL L BIRDSELL CPA				P00852768

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 2301 VILLAGE DRIVE ST JOSEPH, MO 64506 — Phone no (816) 232-8441

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III . . . . ☑

1 Briefly describe the organization's mission

THE MISSION OF THE UNITED WAY OF GREATER ST JOSEPH IS TO IMPROVE LIVES THROUGH THE CARING POWER OF COMMUNITY

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 $ 2,413,263 including grants of $ 2,413,263) (Revenue $)

ALLOCATED SERVICESUNITED WAY FUNDING PRIMARILY SUPPORTS THE DIRECT CLIENT SERVICES RELATED TO EDUCATION, FINANCIAL STABILITY, AND HEALTH THAT ARE DELIVERED THROUGH UNITED WAY'S LOCAL 19 PARTNER AGENCIES AMONG THE ACHIEVEMENTS IN 2012 WERE EDUCATION -209 CHILDREN AND THEIR FAMILIES RECEIVED EARLY INTERVENTION SERVICES TO HELP THEM LEARN ABOUT A DISABILITY OR SPECIAL NEED AND TO HELP THE CHILDREN WORK TOWARD IMPORTANT DEVELOPMENTAL MILESTONES -556 ADULTS WERE TRAINED ABOUT ISSUES RELATED TO OCCUPATIONAL SAFETY IN THEIR WORKPLACES -78 TEEN MOTHERS REMAINED IN SCHOOL OR ALTERNATIVE PROGRAM THROUGHOUT PREGNANCY AND AFTER DELIVERY FINANCIAL STABILITY -2,352 INDIVIDUALS RECEIVED FREE TAX ASSISTANCE THROUGH UNITED WAY PARTNER AGENCIES OVER $2,100,000 WAS RECEIVED LOCALLY THROUGH TAX REFUNDS AND CREDITS -114 AREA FAMILIES HAD IMMEDIATE EMERGENCY NEEDS MET IN RESPONSE TO A DISASTER -124 PEOPLE FILED PROPER DOCUMENTATION TO SUCCESSFULLY MAINTAIN LEGAL STATUS OR ATTAIN CITIZENSHIP HEALTH -$14,121,943 IN UNCOMPENSATED CARE WAS PROVIDED THROUGH CHILDREN'S MERCY (UNITED WAY PARTNER AGENCY) TO BUCHANAN COUNTY CHILDREN -166 INDIVIDUALS BENEFITTED FROM RAPE CRISIS THERAPY -200 YOUTH PARTICIPATED IN PROGRAMS TO REDUCE BODY FAT PERCENTAGE AND BODY MASS INDEX THROUGH FITNESS PROGRAMS IN ADDITION TO THE PROGRAM SERVICES DESCRIBED ABOVE, UNITED WAY ALSO PROVIDED SUPPORT TO ADDRESS A NUMBER OF IDENTIFIED HEALTH-RELATED NEEDS, INCLUDING DENTAL CARE FOR CHILDREN ON MEDICAID AND FOR LOW-INCOME ADULTS, GLUCOSE TESTING STRIPS FOR LOW-INCOME PATIENTS WITH DIABETES, CASE MANAGEMENT SERVICES FOR FORMERLY HOMELESS WOMEN, MOBILE MEAL DELIVERY TO SENIOR ADULTS, AND EXPANSION OF THE BACKPACK BUDDIES PROGRAM

4b (Code) (Expenses $ 285,754 including grants of $ 11,932) (Revenue $ 34,240)

I UNITED WAY FINANCIAL STABILITY- PROVIDING OPPORTUNITIES FOR INDIVIDUALS AND FAMILIES TO BECOME FINANCIALLY SELF-SUFFICIENT THROUGH THE UNITED WAY FINANCIAL STABILITY INITIATIVE, COMMUNITY LEADERS FROM ALL SECTORS COLLABORATE TO FOCUS ON 1) PROVIDING FINANCIAL EDUCATION OPPORTUNITIES, 2) INCREASING THE USE OF FREE TAX PREPARATION SERVICES AND PROMOTING THE EARNED INCOME TAX CREDIT, AND 3) ADVOCATING FOR LOCAL, STATE AND FEDERAL POLICY CHANGE TO HELP PREVENT POVERTY AND TO HELP PEOPLE MOVE OUT OF POVERTY IN 2012, 44 STUDENTS IN 2 ST JOSEPH SCHOOL DISTRICT ELEMENTARY SCHOOLS PARTICIPATED IN UNITED WAY MILLIONAIRES' CLUB, AN AFTER-SCHOOL FINANCIAL EDUCATION PROGRAM CONDUCTED IN PARTNERSHIP WITH US BANK THE GOAL OF UNITED WAY MILLIONAIRES' CLUB IS TO TEACH YOUNG CHILDREN THE IMPORTANCE OF MAKING WISE FINANCIAL DECISIONS AND TO EQUIP THEM WITH THE TOOLS TO DO SO THE FINANCIAL STABILITY INITIATIVE PROMOTED FREE TAX PREPARATION SERVICES OFFERED BY PARTNER AGENCIES BARTLETT CENTER AND INTERSERV DURING THE 2012 TAX SEASON, A TOTAL OF 2,352 INDIVIDUALS RECEIVED TAX ASSISTANCE THROUGH UNITED WAY PARTNER AGENCIES PREPARERS FILED 468 EARNED INCOME TAX CREDIT RETURNS FOR A TOTAL OF $405,546, PLUS OVER $1 72 MILLION WERE RECEIVED LOCALLY THROUGH TAX REFUNDS FREE TAX PREPARATION SERVICES HELP PEOPLE KEEP AND SAVE THEIR OWN MONEY II UNITED WAY LEADERSHIP ST JOSEPH BUILDING THE SKILLS OF INDIVIDUALS TO BE EFFECTIVE LEADERS IN THE COMMUNITY UNITED WAY LEADERSHIP ST JOSEPH IS AN ANNUAL, YEAR-LONG LEADERSHIP DEVELOPMENT PROGRAM FOR ADULTS LIVING OR WORKING IN THE ST JOSEPH AREA THE PROGRAM HELPS CREATE A NETWORK OF TRAINED INDIVIDUALS WILLING TO ENGAGE IN LEADERSHIP AND COMMUNITY SERVICE WITH ENHANCED KNOWLEDGE OF OUR COMMUNITY'S OPPORTUNITIES, REALITIES, AND CHALLENGES IN 2012, 24 COMMUNITY MEMBERS COMPLETED THE PROGRAM, JOINING OVER 700 PAST GRADUATES DURING THE YEAR, PARTICIPANTS LEARNED AND PRACTICED PROJECT DEVELOPMENT RELATED TO ESSENTIAL LEADERSHIP SKILLS THE CLASS WAS DIVIDED INTO FOUR GROUPS AND CHALLENGED TO LEARN THE PROCESS OF DEVELOPING A PROJECT THAT WOULD MEET A COMMUNITY NEED THE CHALLENGE RESULTED IN THE FOLLOWING PROJECTS TINY TOT TOWN COMEBACK, YWCA ECONOMIC EMPOWERMENT POGRAM, DIAPER DEPOT, AND A BIG BROTHERS BIG SISTERS RECRUITMENT VIDEO THE 2012 DISTINGUISHED LEADER AWARD WAS PRESENTED TO CLASS OF 2005 ALUMNUS, KYLEE STROUGH SHE WAS HONORED IN RECOGNITION OF HER EXCEPTIONAL COMMUNITY LEADERSHIP III UNITED WAY PROFIT IN EDUCATION- TO IMPROVE THE EDUCATION LEVEL OF THE POTENTIAL AND CURRENT WORKFORCE UNITED WAY PROFIT IN EDUCATION WORKS TO IMPROVE THE HIGH SCHOOL GRADUATION RATE, INCREASE THE PERCENTAGE OF ADULTS WHO ATTAIN THEIR GEDS, ENCOURAGE LIFE-LONG LEARNING, AND PROVIDE AN EDUCATED WORKFORCE WHO CAN BE SUCCESSFUL AND STABLE IN THEIR CAREERS IN 2012, UNITED WAY BEST (BUSINESS AND EDUCATION SUCCEED TOGETHER) PROGRAM SERVED OVER 50 STUDENTS, GRADES 7-10 BUSINESS PARTNERS WORKED WITH STUDENTS, HELPING THEM LEARN ABOUT LOCAL BUSINESSES, DIFFERENT JOBS AVAILABLE, AND REQUIRED TRAINING AND EDUCATION ALSO, UNITED WAY READING ADVENTURE, A SUMMER READING PROGRAM, WAS HELD AT 5 SITES ON AVERAGE, 70 VOLUNTEERS READ WITH 200 CHILDREN EACH WEEK IV UNITED WAY SUCCESS BY 6- PREPARING CHILDREN TO BE SUCCESSFUL LEARNERS WHEN THEY BEGIN KINDERGARTEN UNITED WAY SUCCESS BY 6 FOSTERS AND PARTICIPATES IN COMMUNITY-WIDE PARTNERSHIPS TO PREPARE YOUNG CHILDREN FOR FUTURE SUCCESS THE INITIATIVE AIMS TO STRENGTHEN THE SYSTEM THAT NURTURES THE COMMUNITY'S YOUNGEST CHILDREN BY WORKING WITH PARENTS, CHILDCARE PROVIDERS, EARLY EDUCATION TEACHERS, AND LOCAL BUSINESSES WHO CAN ALL HELP CHILDREN DEVELOP DURING THE YEAR, 120 INCOMING KINDERGARTENERS GRADUATED FROM UNITED WAY KINDERGARTEN JUMPSTART AND UNITED WAY KINDERCLUB, TWO KINDERGARTEN READINESS PROGRAMS THE INITIATIVE CONTINUES TO FOCUS ON SUPPORTING QUALITY IMPROVEMENT EFFORTS OF AREA CHILDCARE PROVIDERS FACED WITH DRAMATIC STATE FUNDING CUTS, UNITED WAY'S SUCCESS BY 6 CONVENED COMMUNITY LEADERS TO DETERMINE HOW TO EFFECTIVELY ADDRESS NEW GAPS A COMMUNITY-WIDE CHILDCARE PROVIDER TRAINING PLAN WAS CREATED THAT LEVERAGES RESOURCES AND BRINGS ADDITIONAL FUNDERS TO THE TABLE IN RESPONSE TO THE CONTINUING NEED FOR MANAGEMENT AND LEADERSHIP TRAINING OF CHILDCARE DIRECTORS, UNITED WAY'S SUCCESS BY 6 ENHANCED AND EXPANDED DIRECTORS' NETWORKING MEETINGS AND ASSUMED RESPONSIBILITY FOR THE DIRECTORS' SYMPOSIUM V UNITED WAY VOLUNTEER CENTER- CONNECTING THE COMMUNITY THROUGH VOLUNTEERISM THE UNITED WAY VOLUNTEER CENTER IS A CENTRAL RESOURCE FOR VOLUNTEER NEEDS ACROSS THE GREATER ST JOSEPH REGION INDIVIDUALS, GROUPS, AND CORPORATIONS SEEKING VOLUNTEER OPPORTUNITIES CAN FIND A VARIETY OF OPTIONS CALLING FOR VARYING COMMITMENTS AVAILABLE AT MANY DIFFERENT NON-PROFIT ORGANIZATIONS IN 2012, WITH THE ASSISTANCE OF CHICK-FIL-A, OVER 850 PEOPLE REGISTERED TO STAY UP-TO-DATE ABOUT AREA VOLUNTEER OPPORTUNITIES THROUGH THE UNITED WAY VOLUNTEER CENTER VOLUNTEERS WORKING WITH UNITED WAY STUFF THE BUS! SCHOOL SUPPLIES DRIVE COLLECTED OVER 21,200 PACKAGES OF SCHOOL SUPPLY ITEMS FOR STUDENTS WHO NEEDED THEM A HOLIDAY VOLUNTEER GUIDE WAS CREATED AND OFFERED TO CONNECT THOSE WANTING TO VOLUNTEER DURING THE SEASON FIFTY-SIX NEW VOLUNTEER OPPORTUNITIES WERE POSTED, AND SEVEN ADDITIONAL NON-PROFITS WERE REGISTERED WITH UNITED WAY VOLUNTEER CENTER IN 2012

4c (Code) (Expenses $ 71,577 including grants of $) (Revenue $)

COMMUNICATIONSIT TAKES STRONG COMMUNITY SUPPORT TO PRODUCE THE LEVEL OF PROGRAM ACHIEVEMENTS (LISTED UNDER 4A), AND SUSTAINING THAT SUPPORT REQUIRES AN ACTIVE COMMUNICATIONS EFFORT UNITED WAY LETS DONORS AND THE GENERAL PUBLIC KNOW ABOUT THE ORGANIZATION'S ACCOMPLISHMENTS THROUGH PRINTED MATERIALS INCLUDING, AN ANNUAL REPORT, E-NEWSLETTERS, WEB SITE, VIDEO PRODUCTIONS, MEDIA OUTREACH, AND SPECIAL EVENTS

(Code) (Expenses $ 121,731 including grants of $) (Revenue $ 18,655)

OTHER PROGRAMS CONTRIBUTE TO THE OVERALL EFFECTIVENESS OF UNITED WAY IN ADDRESSING COMMUNITY NEEDS I PLANNING AND ALLOCATIONSTHE COMMUNITY INVESTMENT PROCESS, IN WHICH SOME 90 VOLUNTEERS WORK TO ENSURE THE MOST EFFECTIVE USE OF DONATED DOLLARS, IS AT THE HEART OF ACCOUNTABILITY FOR UNITED WAY IN MAKING ALLOCATIONS RECOMMENDATIONS, THE VOLUNTEERS FOCUS ON SUPPORT FOR PROGRAMS THAT GET RESULTS II COMMUNITY BUILDINGUNITED WAY SERVES AS A CATALYST FOR ADDRESSING PROBLEMS IN THE COMMUNITY, AND STAFF MEMBERS TAKE ACTIVE ROLES IN COMMUNITY NETWORKS, SUCH AS THE ST JOSEPH METRO CHAMBER OF COMMERCE, COMMUNITY ALLIANCE, CONTINUUM OF CARE, HEARTLAND HEALTH ETHICS COMMITTEE, EMPLOYMENT COALITION, KIWANIS, MISSOURI WESTERN STATE UNIVERSITY BOARD OF GOVERNORS, MY SUCCESS EVENT, THE P-20 COUNCIL, ROTARY CLUB #32, AND YOUNG EXECUTIVES NETWORK UNITED WAY'S UNMET NEEDS COMMITTEE BRINGS TOGETHER REPRESENTATIVES OF NOT-FOR-PROFIT, FAITH-BASED, AND GOVERNMENT AGENCIES TO HELP IN CASES OF EXTREME NEED THROUGH A COOPERATIVE APPROACH AND CAREFUL USE OF RESOURCES, THE COMMITTEE RESPONDED TO SUCH NEEDS AS CAR REPAIRS WHICH ALLOWED THE OWNERS TO DRIVE TO WORK AND PRESCRIPTION MEDICINE FOR A NEWLY UNINSURED, LAID OFF WORKER

4d Other program services (Describe in Schedule O)

(Expenses $ 121,731 including grants of $) (Revenue $ 18,655)

4e Total program service expenses ▶ 2,892,325

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)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? *If "Yes," complete Schedule C, Part III*	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? *If "Yes," complete Schedule D, Part I*	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *If "Yes," complete Schedule D, Part II*	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? *If "Yes," complete Schedule D, Part IV*	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	10	Yes	
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? *If "Yes," complete Schedule D, Part VI.*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
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? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e		No
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)? *If "Yes," complete Schedule D, Part X*	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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? *If "Yes," complete Schedule F, Parts I and IV*	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than $5,000 of grants or assistance to any organization or entity located outside the United States? *If "Yes," complete Schedule F, Parts II and IV*	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or assistance to individuals located outside the United States? *If "Yes," complete Schedule F, Parts III and IV*	16		No
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? *If "Yes," complete Schedule G, Part I (see instructions)*	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21	Yes	
22	Did the organization report more than $5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25*	24a		No
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) and 501(c)(4) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? *If "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	28c		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	33		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	38	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V . . . . ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	**1a**	9		
b	Enter the number of Forms W-2G included in 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?		**1c**	Yes	
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**	10		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No," provide an explanation in Schedule O*		**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		**4a**		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**				
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?		**7a**		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		**7h**		
8	**Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.** Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		**8**		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the organization make any taxable distributions under section 4966?		**9a**		
b	Did the organization make a distribution to a donor, donor advisor, or related person?		**9b**		
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? **Note.** See the instructions for additional information the organization must report on Schedule O		**13a**		
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**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		**14b**		

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

Check if Schedule O contains a response to any question 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 . . .	1a	31		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent . . .	1b	31		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . .		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .		3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . .		4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .		5		No
6	Did the organization have members or stockholders? . . .		6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . .		7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . .		7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body? . . .		8a	Yes	
b	Each committee with authority to act on behalf of the governing body? . . .		8b		No
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 in Schedule O* . . .		9		No

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? . . .	10a		No
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?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? . . .	11a	Yes	
b	Describe in 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* . . .	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? . . .	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done* . . .	12c	Yes	
13	Did the organization have a written whistleblower policy? . . .	13	Yes	
14	Did the organization have a written document retention and destruction policy? . . .	14	Yes	
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 . . .	15a	Yes	
b	Other officers or key employees of the organization . . .	15b		No
	If "Yes" to line 15a or 15b, describe the process in 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? . . .	16a		No
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? . . .	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed ►MO

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (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 in Schedule O)

19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization

►KYLEE STROUGH 118 S 5TH ST JOSEPH, MO (816) 364-2381

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

Check if Schedule O contains a response to any question 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 instructions for definition of "key employee "
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

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 dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
1b Sub-Total . . . . ▶										
c Total from continuation sheets to Part VII, Section A . . . . ▶										
d Total (add lines 1b and 1c) . . . . ▶								74,677	0	14,489

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 ▶0

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		No
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*	4		No
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*	5		No

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

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 ▶0

Part VIII **Statement of Revenue**

Check if Schedule O contains a response to any question 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, 513, or 514
Contributions, Gifts, Grants and Other Similar Amounts	**1a**	Federated campaigns . .	**1a** 33,736				
	b	Membership dues	**1b**				
	c	Fundraising events	**1c** 13,300				
	d	Related organizations . . .	**1d**				
	e	Government grants (contributions)	**1e**				
	f	All other contributions, gifts, grants, and similar amounts not included above	**1f** 3,216,840				
	g	Noncash contributions included in lines 1a-1f $	49,394				
	h	**Total.** Add lines 1a-1f . . . . ▶		3,263,876			
Program Service Revenue			Business Code				
	2a	LEADERSHIP PROGRAMS	611430	28,835	28,835		
	b	REVENUE FROM SERVICES	611710	17,315	17,315		
	c	PROFIT IN EDUCATION	611710	5,405	5,405		
	d	STUFF THE BUS	611710	1,340	1,340		
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		52,895			
Other Revenue	**3**	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		113,701			113,701
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					

	(i) Real	(ii) Personal
6a Gross rents	71,273	
b Less rental expenses	0	
c Rental income or (loss)	71,273	

	(A)	(B)	(C)	(D)
d Net rental income or (loss) . . . . ▶	71,273			71,273

	(i) Securities	(ii) Other
7a Gross amount from sales of assets other than inventory	525,476	
b Less cost or other basis and sales expenses	462,321	3,605
c Gain or (loss)	63,155	-3,605

			(A)	(B)	(C)	(D)
d	Net gain or (loss) . . . . ▶		59,550			59,550
8a	Gross income from fundraising events (not including $ 13,300 of contributions reported on line 1c) See Part IV, line 18 . . **a**	8,413				
b	Less direct expenses . . . **b**	12,582				
c	Net income or (loss) from fundraising events . . ▶		-4,169			-4,169
9a	Gross income from gaming activities See Part IV, line 19 . . . **a**					
b	Less direct expenses . . . **b**					
c	Net income or (loss) from gaming activities . . ▶					
10a	Gross sales of inventory, less returns and allowances . **a**					
b	Less cost of goods sold . . **b**					
c	Net income or (loss) from sales of inventory . . ▶					
	Miscellaneous Revenue	Business Code				
11a	MISCELLANEOUS	900099	4,734			4,734
b						
c						
d	All other revenue					
e	**Total.** Add lines 11a–11d . . . . . . ▶		4,734			
12	**Total revenue.** See Instructions . . . . . ▶		3,561,860	52,895	0	245,089

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 to any question 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 governments and organizations in the United States See Part IV, line 21	2,413,263	2,413,263		
2 Grants and other assistance to individuals in the United States See Part IV, line 22	11,932	11,932		
3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	89,166	68,658	8,917	11,591
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	267,463	162,455	43,978	61,030
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	9,253	5,644	1,513	2,096
9 Other employee benefits	30,157	16,853	5,563	7,741
10 Payroll taxes	25,070	16,140	3,760	5,170
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	17,055	11,731	2,063	3,261
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees	16,280	11,198	1,969	3,113
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	15,949	10,465	2,125	3,359
12 Advertising and promotion	11,151	4,009	1,486	5,656
13 Office expenses	11,056	6,331	1,630	3,095
14 Information technology				
15 Royalties . .				
16 Occupancy	33,079	19,746	5,420	7,913
17 Travel	4,445	3,337	456	652
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	22,817	20,184	229	2,404
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	38,972	24,163	6,235	8,574
23 Insurance	11,387	7,157	1,781	2,449
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a DUES AND SUBSCRIPTIONS	36,006	22,608	5,757	7,641
b PARENT AWARENESS MATERI	24,935	24,935		
c TRAINING	11,817	11,817		
d EQUIPMENT RENT AND MAIN	9,076	5,680	1,430	1,966
e All other expenses	17,547	14,019	677	2,851
25 **Total functional expenses.** Add lines 1 through 24e	3,127,876	2,892,325	94,989	140,562
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X **Balance Sheet**

Check if Schedule O contains a response to any question in this Part X . . . . ☐

			(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing	1,294,594	1	1,337,281
	2	Savings and temporary cash investments	1,389,470	2	1,186,630
	3	Pledges and grants receivable, net	2,872,078	3	3,081,738
	4	Accounts receivable, net		4	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	6,007	9	7,773
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 876,941			
	b	Less accumulated depreciation — 10b: 362,350	510,258	10c	514,591
	11	Investments—publicly traded securities	3,081,142	11	3,662,772
	12	Investments—other securities See Part IV, line 11		12	
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV, line 11	3,302	15	2,664
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	9,156,851	16	9,793,449
Liabilities	17	Accounts payable and accrued expenses	2,715,947	17	2,709,179
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	2,715,947	26	2,709,179
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	3,535,964	27	4,018,391
	28	Temporarily restricted net assets	995,900	28	1,153,139
	29	Permanently restricted net assets	1,909,040	29	1,912,740
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	6,440,904	33	7,084,270
	34	Total liabilities and net assets/fund balances	9,156,851	34	9,793,449

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,561,860
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,127,876
3	Revenue less expenses Subtract line 2 from line 1	3	433,984
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	6,440,904
5	Net unrealized gains (losses) on investments	5	220,582
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-11,200
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	7,084,270

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII . . . . ☑

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both ☑ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
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?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST JOSEPH

Employer identification number
44-0547802

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ______

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a ☐ Type I **b** ☐ Type II **c** ☐ Type III - Functionally integrated **d** ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box ☐

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

		Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?	**11g(i)**		
(ii) A family member of a person described in (i) above?	**11g(ii)**		
(iii) A 35% controlled entity of a person described in (i) or (ii) above?	**11g(iii)**		

h Provide the following information about the supported organization(s)

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1- 9 above or IRC section **(see instructions)**)	**(iv)** Is the organization in col **(i)** listed in your governing document? Yes	No	**(v)** Did you notify the organization in col **(i)** of your support? Yes	No	**(vi)** Is the organization in col **(i)** organized in the U S ? Yes	No	**(vii)** Amount of monetary support
Total									

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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")	3,839,142	3,488,716	3,352,873	3,467,743	3,263,876	17,412,350
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	3,839,142	3,488,716	3,352,873	3,467,743	3,263,876	17,412,350
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						17,412,350

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4	3,839,142	3,488,716	3,352,873	3,467,743	3,263,876	17,412,350
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	102,393	90,376	179,080	163,661	184,974	720,484
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)			11,081	21,225	13,147	45,453
11 **Total support** (Add lines 7 through 10)						18,178,287

12 Gross receipts from related activities, etc (see instructions) | 12 | 286,379

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** . . . . ▶☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | 95 790 %

15 Public support percentage for 2011 Schedule A, Part II, line 14 | 15 | 96 600 %

16a **33 1/3% support test—2012.** 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 ▶☑

b **33 1/3% support test—2011.** 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 ▶☐

17a **10%-facts-and-circumstances test—2012.** 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

b **10%-facts-and-circumstances test—2011.** 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 IV how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶☐

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 ▶☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(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 in 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 IV)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here** ▶☐

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2012** (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from **2011** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2012.** 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—2011.** 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 **Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME GROSS FUNDRAISING REVENUE MISCELLANEOUS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493134055743

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST JOSEPH

Employer identification number
44-0547802

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)
- ☐ Preservation of land for public use (e g , recreation or education)
- ☐ Preservation of an historically important land area
- ☐ Protection of natural habitat
- ☐ Preservation of a certified historic structure
- ☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶________

4 Number of states where property subject to conservation easement is located ▶________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶________

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ $ ________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

(ii) Assets included in Form 990, Part X ▶ $ ________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenues included in Form 990, Part VIII, line 1 ▶ $ ________

b Assets included in Form 990, Part X ▶ $ ________

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 are a 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 programs
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" to 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? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☐

Part V Endowment Funds. Complete if the organization answered "Yes" to 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	2,686,304	2,677,743	2,168,256	1,789,634	
b Contributions	4,000	14,000	265,370	260,650	
c Net investment earnings, gains, and losses	287,039	-5,439	244,117	117,972	
d Grants or scholarships					
e Other expenditures for facilities and programs	15,224				
f Administrative expenses					
g End of year balance	2,962,119	2,686,304	2,677,743	2,168,256	

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 23 650 %

b Permanent endowment ▶ 64 570 %

c Temporarily restricted endowment ▶ 11 780 %

The percentages in 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	3a(i)		No
(ii) related organizations	3a(ii)		No
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?	3b		

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

Part VI Land, Buildings, and Equipment. 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		33,400		33,400
b Buildings		795,038	337,231	457,807
c Leasehold improvements				
d Equipment		48,503	25,119	23,384
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c).)* ▶				514,591

Part VII Investments—Other Securities. 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		
Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	**(b)** Book value	**(c)** Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	**(b)** Book value
Total. *(Column (b) must equal Form 990, Part X, col.(B) line 15.)* . . . . ▶	

Part X Other Liabilities. See Form 990, Part X, line 25.

1 **(a)** Description of liability	**(b)** Book value
Federal income taxes	
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	

2. Fin 48 (ASC 740) Footnote 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 FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements			1	3,861,218
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains on investments	2a	220,582		
b	Donated services and use of facilities	2b	75,171		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	295,753
3	Subtract line **2e** from line **1**			3	3,565,465
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	-3,605		
c	Add lines **4a** and **4b**			4c	-3,605
5	Total revenue Add lines **3** and **4c.** (This must equal Form 990, Part I, line 12)			5	3,561,860

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements			1	3,217,852
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	75,171		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d	14,805		
e	Add lines **2a** through **2d**			2e	89,976
3	Subtract line **2e** from line **1**			3	3,127,876
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	0
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	3,127,876

Part XIII Supplemental Information

Complete this part to 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

Identifier	Return Reference	Explanation
DESCRIPTION OF INTENDED USE OF ENDOWMENT FUNDS	PART V, LINE 4	THE UNITED WAY OF GREATER ST JOSEPH HAS THREE PERMANENTLY RESTRICTED ENDOWMENT FUNDS ONE ENDOWMENT IS FOR THE OPERATION OF THE ORGANIZATION THE SECOND ENDOWMENT, THE SUCCESS BY 6 ENDOWMENT, WILL BE USED TO FUND PROGRAMS AND SERVICES TO ENSURE THAT ALL CHILDREN ARE HEALTHY AND READY TO ENTER KINDERGARTEN THE THIRD ENDOWMENT, THE CRYSTAL CIRCLE ENDOWMENT, IS FOR PERPETUAL LEADERSHIP GIFTS TO THE ANNUAL CAMPAIGN
DESCRIPTION OF UNCERTAIN TAX POSITIONS UNDER FIN 48	PART X, LINE 2	THE ORGANIZATION CONSIDERED UNCERTAIN TAX POSITIONS UNDER FIN48 (ASC 740) AND DETERMINED THAT NO LIABILITY FOR UNCERTAIN TAX POSITIONS SHOULD BE RECORDED AS OF DECEMBER 31, 2012 THEREFORE, THERE IS NO FOOTNOTE REGARDING SUCH LIABILITY IN THE ORGANIZATION'S FINANCIAL STATEMENTS
PART XI, LINE 4B - OTHER ADJUSTMENTS		LOSS ON DISPOSAL OF PROPERTY -3,605
PART XII, LINE 2D - OTHER ADJUSTMENTS		LOSS ON DISPOSAL OF PROPERTY 3,605 TRANSFER TO UNITED WAY PROGRAM 11,200

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a. Form 990-EZ filers are not required to complete this part.

▶Attach to Form 990 or Form 990-EZ. ▶See separate instructions.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST JOSEPH

Employer identification number
44-0547802

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
Total . . . . ▶						

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.** Complete if the organization answered "Yes" to 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 CAMPAIGN DINNERS (event type)	(b) Event #2 (event type)	(c) Other events (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	21,713			21,713
	2 Less Contributions	13,300			13,300
	3 Gross income (line 1 minus line 2)	8,413			8,413
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	9,925			9,925
	8 Entertainment				
	9 Other direct expenses	2,657			2,657
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				(12,582)
	11 Net income summary Combine line 3, column (d), and line 10 ▶				-4,169

Part III **Gaming.** Complete if the organization answered "Yes" to 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				
Direct Expenses	2 Cash prizes				
	3 Non-cash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____ ☐ No	☐ Yes ____ ☐ No	☐ Yes ____ ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Combine lines 1 and 7 in column (d) ▶				

9 Enter the state(s) in which the organization operates gaming activities ____

a Is the organization licensed to operate 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 ____

Does the organization operate 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 operated in

a The organization's facility	13a	
b An outside facility	13b	

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 distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Identifier	Return Reference	Explanation

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," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST JOSEPH

Employer identification number
44-0547802

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 Governments and Organizations in the United States.

Complete if the organization answered "Yes" to 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.

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 23

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

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance
(1) COLLEGE SCHOLARSHIPS FOR EARLY CHILDHOOD PROFESSIONAL	13	7,765			
(2) MEDICAL	1	530			
(3) HOUSING ASSISTANCE	7	2,603			
(4) TRANSPORATION	2	761			
(5) EVENT MONITOR	1	273			

Part IV **Supplemental Information.**

Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information

Identifier	Return Reference	Explanation
PROCEDURE FOR MONITORING GRANTS IN THE U S	PART I, LINE 2	SCHEDULE I, PART I, LINE 2 THE UNITED WAY MONITORS GRANT FUNDS BY REQUIRING GRANT RECIPIENTS TO SUBMIT TO THE UNITED WAY BUDGET FORMS ON AN ANNUAL BASIS GRANT RECIPIENTS MUST ALSO SUBMIT ANNUAL OUTCOME REPORTS DETAILING THEIR ACCOMPLISHMENTS MONTHLY FINANCIAL STATEMENTS ARE ALSO REQUIRED PRIOR TO A RELEASE OF AN AGENCY'S MONTHLY ALLOCATION GRANTEES MUST ALSO PROVIDE TO THE UNITED WAY A YEAR-END REPORT AND AN UP-TO-DATE AUDIT CONDUCTED BY A PROFESSIONAL INDEPENDENT AUDITOR OTHER SPECIFIC FINANCIAL MATERIALS MAY BE REQUESTED, AS NECESSARY THIS INFORMATION IS NOT ONLY REVIEWED BY THE UNITED WAY STAFF, BUT BY COMMUNITY VOLUNTEERS ON A YEARLY BASIS

Additional Data

Return to Form

Software ID:
Software Version:
EIN: 44-0547802
Name: UNITED WAY OF GREATER ST JOSEPH

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code 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
AMERICAN RED CROSS401 NORTH 12TH STREET ST JOSEPH,MO 64501	44-0545909	501C3	229,355				GENERAL OPERATING COST
AMERICAN RED CROSS (CIF)401 NORTH 12TH STREET ST JOSEPH,MO 64501	44-0545909	501C3	5,000				DISASTER RELIEF
BARTLETT CENTER409 SOUTH 18TH ST JOSEPH,MO 64501	23-7116216	501C3	31,389				GENERAL OPERATING COSTS
BARTLETT CENTER (HELP FUND)409 SOUTH 18TH ST JOSEPH,MO 64501	23-7116216	501C3	8,000				SOCIAL ADVOCATE PROGRAM
BARTLETT CENTER (CIF) 409 SOUTH 18TH ST JOSEPH,MO 64501	23-7116216	501C3	1,325				EQUIPMENT PURCHASE
BIG BROTHERS AND BIG SISTERS1202 SOUTH 28TH STREET ST JOSEPH,MO 64507	43-6068464	501C3	28,758				GENERAL OPERATING COSTS
BOY SCOUTS-PONY EXPRESS COUNCIL1704 BUCKINGHAM ST JOSEPH,MO 64506	44-0546279	501C3	115,583				GENERAL OPERATING COST
CATHOLIC CHARITIES902 EDMOND SUITE 204 ST JOSEPH,MO 64501	43-0887779	501C3	95,008				GENERAL OPERATING COST
CATHOLIC CHARITIES (CIF)902 EDMOND SUITE 203 ST JOSEPH,MO 64501	43-0887779	501C3	9,787				PERMANENT HOUSING PROGRAM
CATHOLIC CHARITIES (HELP FUND)902 EDMOND SUITE 203 ST JOSEPH,MO 64501	43-0887779	501C3	4,500				PERMANENT HOUSING PROGRAM
COMMUNITY MISSIONS CORPORATION700 OLIVE STREET ST JOSEPH,MO 64501	90-0180479	501C3	28,699				GENERAL OPERATING COST
FAMILY GUIDANCE724 NORTH 22ND STREET ST JOSEPH,MO 64501	44-0666362	501C3	282,907				GENERAL OPERATING COST
FAMILY GUIDANCE (HELP FUND)724 NORTH 22ND STREET ST JOSEPH,MO 64501	44-0666362	501C3	10,000				DENTAL CARE FOR HEALTH CARE HOME PROGRAM
FAMILY GUIDANCE (CIF) 724 NORTH 22ND STREET ST JOSEPH,MO 64501	44-0666362	501C3	4,525				PURCHASE SCHOOL BUS
GIRL SCOUTS OF NE KS AND NW MO3300 DALE AVENUE SUITE 105 ST JOSEPH,MO 64506	43-0892926	501C3	1,986				GENERAL OPERATING COSTS
ST JOSEPH HABITAT FOR HUMANITY (CIF)827 S 9TH STREET ST JOSEPH,MO 64501	43-1733608	501C3	12,500				HABITAT RESTORE
HEARTLAND HEALTH (HELP FUND)5325 FARAON ST JOSEPH,MO 64506	44-0545289	501C3	5,000				DENTAL MISSIONARIES
INTERFAITH COMMUNITY SERVICES200 CHEROKEE ST JOSEPH,MO 64504	44-0545910	501C3	444,020				GENERAL OPERATING COSTS
INTERFAITH COMMUNITY SERVICES (CIF)200 CHEROKEE ST JOSEPH,MO 64504	44-0545910	501C3	450				PROJECT HOMELESS CONNECT
LEGAL AID OF WESTERN MISSOURI106 SOUTH 7TH STREET 4TH FLOOR ST JOSEPH,MO 64501	43-0824638	501C3	74,360				GENERAL OPERATING COST
LEGAL AID OF WESTERN MISSOURI (CIF)106 SOUTH 7TH STREET 4TH FLOOR ST JOSEPH,MO 64501	43-0824638	501C3	5,500				COMMUNITY OUTREACH AND EDUCATION
NW MISSOURI COMMUNITY SERVICES 1203 NORTH 6TH STREET ST JOSEPH,MO 64501	43-1496809	501C3	129,430				GENERAL OPERATING COSTS
SALVATION ARMY622 MESSANIE ST JOSEPH,MO 64501	44-0545998	501C3	103,774				GENERAL OPERATING COSTS
SECOND HARVEST (HELP FUND)915 DOUGLAS ST JOSEPH,MO 64505	43-1268319	501C3	8,000				BACKPACK BUDDIES PROGRAM
SOCIAL WELFARE BOARD (HELP FUND)904 SOUTH 10TH STREET ST JOSEPH,MO 64503	44-6000455	GOVERNMENT AGENCY	8,000				DIABETES MANAGEMENT INITIATIVE
SPECIALTY INDUSTRIES 3801 SOUTH LEONARD ROAD ST JOSEPH,MO 64503	43-0896903	501C3	5,276				GENERAL OPERATING COST
ST JOSEPH HEALTH AND SAFETY COUNCIL118 SOUTH 5TH LOWER LEVEL ST JOSEPH,MO 64501	44-0548468	501C3	73,751				GENERAL OPERATING COSTS
ST JOSEPH HEALTH AND SAFETY COUNCIL (HELP FUND)118 SOUTH 5TH LOWER LEVEL ST JOSEPH,MO 64501	44-0548468	501C3	1,890				BIKE SAFETY & HELMET PROGRAM
THE CENTER902 EDMOND SUITE 203 ST JOSEPH,MO 64501	43-1615018	501C3	33,542				GENERAL OPERATING COST
UCP OF NW MISSOURI3303 FREDERICK AVENUE ST JOSEPH,MO 64506	43-0909607	501C3	175,373				GENERAL OPERATING COST
YMCA315 SOUTH 6TH ST JOSEPH,MO 64501	44-0552491	501C3	176,087				GENERAL OPERATING COSTS
YMCA315 SOUTH 6TH ST JOSEPH,MO 64501	44-0552491	501C3	9,748				POOL LIFT EQUIPMENT
YWCA304 NORTH 8TH ST JOSEPH,MO 64501	44-0552219	501C3	257,228				GENERAL OPERATING COSTS
YWCA (HELP FUND)304 NORTH 8TH ST JOSEPH,MO 64501	44-0552219	501C3	4,500				ENCORE PROGRAM
THE CENTER902 EDMOND SUITE 203 ST JOSEPH,MO 64501	43-1615018	501C3	30,000				MENTAL HEALTH SERVICES
HURRICANE SANDY RECOVERY FUND2 PARK AVE NEW YORK,NY 10016	13-2617681	501C3	5,000				DISASTER RELIEF
ADJUSTMENTS NOT REQUIRING DETAIL			-6,988				PRIOR YEAR ALLOCATION ADJUSTMENTS AND WRITE OFFS

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST JOSEPH

Employer identification number
44-0547802

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				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	8	23,556	FAIR MARKET VALUE
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 ► (VARIOUS)	X	3	25,838	FAIR MARKET VALUE
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 IV, Donee Acknowledgement . . . | 29 |

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

Part II **Supplemental Information.** Complete this part to 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.

Identifier	Return Reference	Explanation
THIRD PARTY USE	PART I, LINE 32B	THE UNITED WAY OF GREATER ST JOSEPH'S POLICY RELATED TO THIRD PARTIES IS AS FOLLOWS - GIFTS OF STOCKS, BONDS OR OTHER PROPERTY IS LIQUIDATED AS SOON AS POSSIBLE UPON RECIEPT SUCH LIQUIDATED ASSETS ARE THEN DEPOSITED THE UNITED WAY OF GREATER ST JOSEPH USES THE SERVICE OF A THIRD PARTY BROKER TO LIQUIDATE THESE ASSETS

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493134055743

SCHEDULE O
(Form 990 or 990-EZ)

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 to provide any additional information.
▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

2012

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST JOSEPH

Employer identification number
44-0547802

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION A, LINE 2	HEATHER SHEARIN MAY HAVE BUSINESS A RELATIONSHIP WITH MULTIPLE BOARD MEMBERS KYLEE STROUGH IS CHAIR OF THE MISSOURI WESTERN STATE UNIVERSITY BOARD OF GOVERNORS AND ROBERT VARTABEDIAN IS PRESIDENT OF MISSOURI WESTERN STATE UNIVERSITY ALL BOARD MEMBERS AND THE KEY EMPLOYEE DISCLOSE THEIR BUSINESS RELATIONSHIPS EACH YEAR ON THE CONFLICT OF INTEREST POLICY THESE ARE KEPT ON RECORD AT THE UNITED WAY OF GREATER ST JOSEPH OFFICE.
	FORM 990, PART VI, SECTION A, LINE 6	EACH CONTRIBUTOR TO THE UNITED WAY CAMPAIGN IS A MEMBER OF THE ORGANIZATION
	FORM 990, PART VI, SECTION A, LINE 7A	THE GENERAL MEMBERSHIP ELECTS THE BOARD OF DIRECTORS AT THE ANNUAL MEETING TERMS OF BOARD MEMBERS ARE STAGGERED, WITH ONE-THIRD OF MEMBERS BEING ELECTED EACH YEAR THE BOARD MEMBERS MAY ELECT REPLACEMENT BOARD MEMBERS DURING THE YEAR IF A VACANCY SHOULD OCCUR
	FORM 990, PART VI, SECTION A, LINE 8B	UNITED WAY BOARD MEETINGS, EXECUTIVE COMMITTEE MEETINGS, AND FINANCE COMMITTEE MEETINGS ALL KEEP MINUTES ALL SUB-COMMITTEES THAT MAKE RECOMMENDATION TO THE UNITED WAY BOARD OF DIRECTORS OR COMMIT UNITED WAY TO FINANCIAL TRANSACTIONS KEEP MINUTES
	FORM 990, PART VI, SECTION B, LINE 11	A COMPLETED 990 IS REVIEWED BY THE BOARD OF DIRECTORS AT A REGULAR MEETING PRIOR TO THE FILING WITH THE INTERNAL REVENUE SERVICE.
	FORM 990, PART VI, SECTION B, LINE 12C	THE UNITED WAY OF GREATER ST JOSEPH REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY BY 1)MAINTAINING RECORDS OF THE CONFLICT OF INTEREST FORMS COMPLETED AND SIGNED EACH YEAR BY BOARD MEMBERS AND KEY STAFF, 2) REQUIRING MEMBERS TO DISCLOSE ANY DUALITY OR CONFLICT OF INTEREST ON ANY MATTER COMING TO A VOTE BY THE BOARD, PRIOR TO THAT VOTE BEING TAKEN A MEMBER DISCLOSING A CONFLICT OF INTEREST MAY NOT VOTE ON THE MATTER AND THE MINUTES OF THE MEETING MUST REFLECT THAT A DISCLOSURE WAS MADE AND THAT THERE WAS AN ABSTENTION BY THAT MEMBER
	FORM 990, PART VI, SECTION B, LINE 15A	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE PRESIDENT AND CEO OF THE UNITED WAY OF GREATER ST JOSEPH INCLUDES THE FOLLOWING STEPS- 1)THE PRESIDENT COMPLETES A SELF EVALUATION FORM THAT ENUMERATES THE GOALS AND ACCOMPLISHMENTS OF THE YEAR THIS FORM IS SUBMITTED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, 2)THE EXECUTIVE COMMITTEE AND ANY BOARD MEMBER WHO WOULD LIKE TO PARTICIPATE MEETS WITH THE PRESIDENT AND REVIEWS THE PRESIDENT'S ACCOMPLISHMENTS FOR THE YEAR, MONITORING PROGRESS TOWARD GOALS 3)THE EXECUTIVE COMMITTEE CONSIDERS THE UNITED WAY WORLDWIDE SALARY SURVEY OF COMPARABLE UNITED WAY ORGANIZATIONS IN SIZE AND REGION ALL MOTIONS ARE RECORDED IN EXECUTIVE COMMITTEE MINUTES 4)THE EXECUTIVE COMMITTEE PRESENTS INFORMATION ON THE ENTIRE EVALUATION TO THE BOARD OF DIRECTORS, ALONG WITH A SALARY RECOMMENDATION FOR THE PRESIDENT THE BOARD THEN REVIEWS THE INFORMATION PROVIDED AND ASKS ADDITIONAL QUESTIONS IF DESIRED THE BOARD OF DIRECTORS MUST APPROVE THE RECOMMENDATION OR MAKE THEIR OWN RECOMMENDATION ON THE COMPENSATION OF THE PRESIDENT AND CEO THE RECOMMENDATION IS VOTED ON BY THE BOARD AND RECORDED IN THE MINUTES OF THE DECEMBER BOARD MEETING 15B) NO OTHER EMPLOYEES ARE COMPENSATED AT A LEVEL THAT WOULD REQUIRE THIS PROCESS
	FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC AT THE UNITED WAY OF GREATER ST JOSEPH OFFICE AT 118 S 5TH STREET, ST JOSEPH, MO 64501 ANY INDIVIDUAL OR ORGANIZATION WHO WOULD LIKE TO SEE THESE DOCUMENTS MAY DO SO DURING NORMAL OFFICE HOURS OF 8 AM TO 5 PM CENTRAL TIME, MONDAY THROUGH FRIDAY THE PHONE NUMBER FOR THE UNITED WAY OF GREATER ST JOSEPH IS (816) 364-2381
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 9	TRANSFER TO UNITED WAY PROGRAM -11,200
	FORM 990, PART XII, LINE 2C, OVERSIGHT PROCESS	PROCESS IS CONSISTENT WITH PRIOR YEARS

Additional Data

Software ID:
Software Version:
EIN: 44-0547802
Name: UNITED WAY OF GREATER ST JOSEPH

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(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			
BRADLEY DEBRA BOARD MEMBER	1 00	X						0	0	0
BURKE TOM BOARD MEMBER	1 00	X						0	0	0
CLINTON GEORGE BOARD MEMBER	1 00	X						0	0	0
CRIPE DAVID BOARD MEMBER	1 00	X						0	0	0
EHLERT TODD BOARD MEMBER	1 00	X						0	0	0
EIMAN PATTI BOARD MEMBER	1 00	X						0	0	0
ELLIS DR WILLIAM BOARD MEMBER	1 00	X						0	0	0
MARTIN ROGER BOARD MEMBER	1 00	X						0	0	0
MCANALLY BRAD BOARD MEMBER	1 00	X						0	0	0
MURPHY MICHAEL BOARD MEMBER	1 00	X						0	0	0
PRITCHETT ROBERT L BOARD MEMBER	1 00	X						0	0	0
PULIDO MICHAEL BOARD MEMBER	1 00	X						0	0	0
RICHMOND TOM BOARD MEMBER	1 00	X						0	0	0
RUCKER LAVELL BOARD MEMBER	1 00	X						0	0	0
SHEARIN HEATHER BOARD MEMBER	1 00	X						0	0	0
STEELE DARREN BOARD MEMBER	1 00	X						0	0	0
STEIN ADAM BOARD MEMBER	1 00	X						0	0	0
TEWELL TOM BOARD MEMBER	1 00	X						0	0	0
TITCOMB BILL BOARD MEMBER	1 00	X						0	0	0
VARTABEDIAN DR ROBERT BOARD MEMBER	1 00	X						0	0	0
VEALE MIKE BOARD MEMBER	1 00	X						0	0	0
WOODS JULIE BOARD MEMBER	1 00	X						0	0	0
WRIGHT SETH BOARD MEMBER	1 00	X						0	0	0
CONNALLY CHIEF CHRIS IMMEDIATE PAST CHAIR	1 00	X						0	0	0
SEVERN BILL CHAIR	3 00	X		X				0	0	0

Form 990, Part VII - Compensation of Officers, Directors,Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MEIERHOFFER TODD W VICE CHAIR	2 00	X		X				0	0	0
CAROLUS BRETT SECRETARY & COMMUNITY INITIATIVES CHAIR	2 00	X		X				0	0	0
HORN JASON TREASURER	2 00	X		X				0	0	0
RYAN AMY COMMUNITY INVESTMENT CO-CH	2 00	X		X				0	0	0
JOHNSON BEERY COMMUNITY INVESTMENT CO-CH	2 00	X		X				0	0	0
WOLLENMAN BOB CAMAPAIGN CHAIR	3 00	X		X				0	0	0
STROUGH KYLEE PRESIDENT	50 00			X				74,677	0	14,489