

Form 990  Department of the Treasury Internal Revenue Service	Return of Organization Exempt From Income Tax	OMB No 1545-0047
	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990 and its instructions is at www.irs.gov/foi990	2015 Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016			
B Check if applicable ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C Name of organization UNITED WAY FOR SOUTHEASTERN MICHIGAN		D Employer identification number 20-3099071
	Doing business as		E Telephone number (313) 226-9200
	Number and street (or P.O. box if mail is not delivered to street address) 660 WOODWARD AVE SUITE 300	Room/suite	
	City or town, state or province, country, and ZIP or foreign postal code DETROIT, MI 48226		G Gross receipts \$ 62,227,662
F Name and address of principal officer HERMAN GRAY 660 WOODWARD AVE SUITE 300 DETROIT, MI 48226		H(a) Is this a group return for subordinates? ☐ Yes ☒ No	
I Tax-exempt status ☒ 501(c)(3) ☐ 501(c) () ◀(insert no) ☐ 4947(a)(1) or ☐ 527		H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list (see instructions)	
J Website: ▶ WWW.LIVEUNITEDSEM.ORG		H(c) Group exemption number ▶	
K Form of organization ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶		L Year of formation 2005	M State of legal domicile MI

Part I	Summary
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Activities & Governance	1 Briefly describe the organization's mission or most significant activities TO MOBILIZE THE CARING POWER OF DETROIT AND SOUTHEASTERN MICHIGAN TO IMPROVE COMMUNITIES AND INDIVIDUAL LIVES IN MEASURABLE AND LASTING WAYS		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets		
Activities & Governance	3 Number of voting members of the governing body (Part VI, line 1a)	3	30
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	30
	5 Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	210
	6 Total number of volunteers (estimate if necessary)	6	2,928
	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
Revenue		Prior Year	Current Year
	8 Contributions and grants (Part VIII, line 1h)	56,031,323	47,077,187
	9 Program service revenue (Part VIII, line 2g)	50,474	114
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,053,483	897,401
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,925,926	3,955,192
	12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	61,061,206	51,929,894
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3) . . .	28,033,119	24,373,540
	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)	15,696,019	16,664,311
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b Total fundraising expenses (Part IX, column (D), line 25) <u>▶4,672,172</u>		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	11,384,232	12,757,992
	18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	55,113,370	53,795,843
	19 Revenue less expenses Subtract line 18 from line 12	5,947,836	-1,865,949
	Net Assets or Fund Balances		Beginning of Current Year
20 Total assets (Part X, line 16)		79,281,348	73,167,027
21 Total liabilities (Part X, line 26)		19,805,385	14,760,761
22 Net assets or fund balances Subtract line 21 from line 20		59,475,963	58,406,266

Part II	Signature Block
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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	*****			2017-05-10	
	Signature of officer			Date	
	BRIDGETT FEAGIN CHIEF FINANCIAL OFFICER				
	Type or print name and title				
Paid Preparer Use Only	Pnnt/Type preparer's name LYNNE M HUISMANN		Preparer's signature LYNNE M HUISMANN		Date 2017-05-01
			Check ☐ if self-employed		PTIN P00053811
	Firm's name ▶ PLANTE & MORAN PLLC			Firm's EIN ▶ 38-1357951	
	Firm's address ▶ 27400 NORTHWESTERN HIGHWAY SOUTHFIELD, MI 48034			Phone no (248) 352-2500	

Part III

Statement of Program Service Accomplishments

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

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1 Briefly describe the organization’s mission

TO MOBILIZE THE CARING POWER OF DETROIT AND SOUTHEASTERN MICHIGAN TO IMPROVE COMMUNITIES AND INDIVIDUAL LIVES IN MEASURABLE AND LASTING WAYS

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 \$ 20,329,480 including grants of \$ 21,088,129) (Revenue \$)
UNITED WAY FOR SOUTHEASTERN MICHIGAN PROVIDES GRANTS AND PAYS DESIGNATIONS TO OVER 120 NONPROFIT AGENCIES THAT PROVIDE DIRECT SERVICE TO THE COMMUNITIES OF SOUTHEASTERN MICHIGAN OVER 1 MILLION PEOPLE ARE IMPACTED THROUGH THE INVESTMENT OF RESOURCES IN EDUCATION, INCOME, AND BASIC NEEDS	

4b	(Code) (Expenses \$ 21,312,055 including grants of \$ 3,285,411) (Revenue \$ 3,885,306)
UWSEM'S SPECIAL INITIATIVES, IN COLLABORATION WITH COMMUNITY PARTNERS, FOCUS ON THE BUILDING BLOCKS FOR A GOOD QUALITY OF LIFE - EDUCATION, FINANCIAL STABILITY AND BASIC NEEDS EDUCATION STUDENT SUCCESSIN 2015-2016, UNITED WAY'S HIGH SCHOOL TURNAROUND INITIATIVE CONTINUED TO FOCUS ON A NETWORK OF 15 DETROIT AREA HIGH SCHOOLS REPRESENTING 7,819 STUDENTS TO IMPROVE CONDITIONS IN EACH SCHOOL AND MAINTAIN AN AGGREGATE 80% GRADUATION RATE, IMPROVE ACT SCORES CONSISTENT WITH COLLEGE ADMISSIONS REQUIREMENTS AND IMPROVE ACADEMIC PERFORMANCE WE EXCEEDED OUR GOALS OUR 15 SCHOOLS ACHIEVED A NETWORK GRADUATION RATE ABOVE 80 PERCENT IN ADDITION TO SUPPORTING SCHOOL LEADERS IN CULTIVATING A POSITIVE SCHOOL CULTURE, WE MADE STRATEGIC INVESTMENTS IN COMMUNITY ORGANIZATIONS TO ENSURE THAT EVERY STUDENT HAD A CARING ADULT TO HELP KEEP THEM ON TRACK TO GRADUATE TODAY, THE ON-TIME GRADUATION RATE OF OUR NETWORK OF SCHOOLS EXCEEDS THE STATE AVERAGE EARLY CHILDHOODIN 2015-2016, UNITED WAY CONTINUED TO ENSURE THAT KIDS GET THE RIGHT START IN LIFE BY SUPPORTING THEIR FIRST TEACHERS PARENTS AND CAREGIVERS WITH OUR PARTNERS, WE PROVIDED TRAININGS, PEER NETWORKS, LEARNING MATERIALS, CHILD-SAFETY ITEMS THROUGHOUT WAYNE, OAKLAND AND MACOMB COUNTIES AND REACHED 4,884 PARENTS AND CAREGIVERS WITH SPECIALIZED SUPPORT THROUGH OUR INVESTMENT IN THE AGES AND STAGES QUESTIONNAIRE, EVERY PARENT AND CAREGIVER WITH CHILDREN YOUNGER THAN 6 IN THE TRI-COUNTY AREA CAN ASSESS THEIR CHILD'S PROGRESS AS THEY GROW AND RECEIVE ONE-ON-ONE SUPPORT AND FEEDBACK FROM A UNITED WAY SPECIALIST MORE THAN 15,000 DEVELOPMENTAL SCREENINGS TOOK PLACE OVER THE FISCAL YEAR THESE RESOURCES HELP THOUSANDS OF CHILDREN REACH DEVELOPMENTAL MILESTONES AND ENTER KINDERGARTEN PREPARED TO LEARN FINANCIAL STABILITY ECONOMIC OPPORTUNITYIN FY 2015-2016, UNITED WAY SERVED AS THE LEAD PARTNER AND INVESTOR IN THE DETROIT REGIONAL WORKFORCE FUND, WHICH CREATES NEW PATHWAYS FOR DETROIT WORKERS TO CONNECT TO CAREERS AND INDUSTRIES THAT SUPPORT FAMILY-SUSTAINING WAGES THROUGH THE FUND'S ACCESS FOR ALL INITIATIVE, UNEMPLOYED AND UNDEREMPLOYED DETROITERS TAKE PART IN AN INTENSIVE NINE-WEEK CONSTRUCTION TRADE PRE-APPRENTICESHIP PROGRAM TO PURSUE JOB OPPORTUNITIES LIKE BRICKLAYER, CARPENTER, ELECTRICIAN AND CEMENT MASON THE HOURLY WAGE OF ACCESS FOR ALL GRADUATES RANGES FROM \$12 PER HOUR TO \$22 PER HOUR, WHICH CAN HELP SUSTAIN GRADUATES AS THEY WORK TOWARD A FULL CONSTRUCTION APPRENTICESHIP, WHERE THEY CAN EARN \$28-\$36/HOUR ACCESS FOR ALL HAS BEEN CITED AS A NATIONAL MODEL BY THE NORTH AMERICAN BUILDING TRADES UNION AND 91 PERCENT OF GRADUATES FOUND EMPLOYMENT AS WE CONTINUE TO DEVELOP WORKFORCE PATHWAYS, WE'VE ALSO LED EFFORTS TO HELP INDIVIDUALS AND FAMILIES LEARN TO BUDGET AND GROW THEIR ASSETS THROUGH THE DEVELOPMENT AND INVESTMENTS IN THE GREATER DETROIT CENTERS FOR WORKING FAMILIES (IN PARTNERSHIP WITH DETROIT LISC) AND THE COMMUNITY FINANCIAL CENTERS BASIC NEEDS HEALTHY KIDSIN FY 2015-2016, THANKS TO IMPROVED EFFICIENCIES IN THE EMERGENCY FOOD SYSTEM AND EXPANSION OF FEDERAL CHILD NUTRITION PROGRAMS, MORE THAN 1 74 MILLION MEALS WERE SERVED AT SUMMER 2015 MEET UP AND EAT UP SITES IN ADDITION, WE SERVED AS A CONSULTANT FOR THE MICHIGAN DEPARTMENT OF EDUCATION AND CREATED A TOOLKIT THAT IS USED BY MORE THAN 300 MEET UP AND EAT UP PARTNERS ACROSS THE STATE, WHICH ADVISES THEM ON CHOOSING NUTRITIOUS AND KID-FRIENDLY FOODS FROM THEIR VENDORS PARTNER INVESTMENTSIN 2015-2016, 461,706 PEOPLE WERE SERVED THROUGH OUR BASIC NEEDS PARTNERS, IN AREAS OF FOOD, EMERGENCY SHELTER, HEALTH SERVICES, ETC LSPMORE THAN 30,000 HOUSEHOLDS AVOIDED UTILITY SHUT-OFF THANKS TO THE UNITED WAY AND DTE ENERGY LOW INCOME SELF-SUFFICIENCY PLAN (LSP), WHICH OFFERING LOW-COST, AFFORDABLE UTILITY PAYMENT PLANS FOR ELIGIBLE LOW-INCOME FAMILIES	

4c	(Code) (Expenses \$ 3,224,305 including grants of \$ 0) (Revenue \$ 70,000)
2-1-1124,632 PEOPLE WERE REFERRED TO ASSISTANCE VIA OUR 2-1-1 SERVICE, WHICH OFFERS A 24/7/365 CALL CENTER, ONLINE DATABASE AND CHAT SYSTEM MORE THAN 30,000 RESOURCES ARE AVAILABLE VIA OUR ONLINE DATABASE	

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

4e	Total program service expenses ► 44,865,840
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Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? 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 Yes	
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 Yes	
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 other assistance to or for any foreign organization? 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 other assistance to or for foreign individuals? 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	No
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)

21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		25a	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II		26	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	Yes
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 or note to any line in this Part V ☐			
		Yes	No
1a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable.	1a 96		
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 210		
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" to line 3b, provide an explanation in Schedule O.	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b If "Yes," enter the name of the foreign country: _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		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?			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. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9a Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10 Section 501(c)(7) organizations. Enter			
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 or note to any line in this Part VI ☒

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O	30	
1b	Enter the number of voting members included in line 1a, above, who are independent	30	
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?		No
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?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a	The governing body?	Yes	
b	Each committee with authority to act on behalf of the governing body?	Yes	
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		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?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	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	Yes	
b	Other officers or key employees of the organization		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?		No
16b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

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

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, address, and telephone number of the person who possesses the organization's books and records
BRIDGETT FEAGIN 660 WOODWARD AVENUE NO 300 DETROIT, MI 48226 (313) 226-9372

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

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

[illegible]

Part VII

(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			
See Additional Data Table										
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								2,300,982	0	352,056

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 ► 13

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	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
RODWAN COMMUNICATION 19484 SHREWSBURY ROAD DETROIT, MI 48221	PR CONSULTING	193,250
BILL SULLIVAN ENTERPRISES LLC 2552 MORTENSON BLVD BERKLEY, MI 48072	CONSULTING	125,000
VISIONS UNLIMITED 1534 S FRANKLIN AVE FLINT, MI 48503	PROGRAM CONSULTING SERVICES	113,364
DR HUNT & ASSOCIATES PO BOX 13619 DETROIT, MI 48213	IT SERVICES	101,046

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 ► 4

Part VIII

Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	6,073,546				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	41,003,641				
	g	Noncash contributions included in lines 1a-1f \$		119,666				
	h	Total. Add lines 1a-1f ▶		47,077,187				
Program Service Revenue	2a	FEE FOR SERVICES	Business Code					
			900099	114	114			
	b							
	c							
	d							
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f ▶		114				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) ▶		955,153			955,153	
	4	Income from investment of tax-exempt bond proceeds . . ▶						
	5	Royalties ▶						
	6a	(i) Real		(ii) Personal				
	b	Less rental expenses						
	c	Rental income or (loss)						
	d	Net rental income or (loss) ▶						
	7a	(i) Securities		(ii) Other				
		10,229,516		10,500				
	b	Less cost or other basis and sales expenses		0				
	c	Gain or (loss)		10,500				
	d	Net gain or (loss) ▶		-57,752			-57,752	
	8a	Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18						
	a							
	b	Less direct expenses						
	c	Net income or (loss) from fundraising events . . ▶						
	9a	Gross income from gaming activities See Part IV, line 19						
	a							
	b	Less direct expenses						
	c	Net income or (loss) from gaming activities . . . ▶						
	10a	Gross sales of inventory, less returns and allowances						
a								
b	Less cost of goods sold							
c	Net income or (loss) from sales of inventory . . ▶							
Miscellaneous Revenue		Business Code						
11a	OTHER FEES FOR SERVICE	900099	3,410,611	3,410,611				
b	ADMIN & COST RECOVERY FEES	900099	538,877	538,877				
c	MISCELLANEOUS REVENUE	900099	5,704	5,704				
d	All other revenue							
e	Total. Add lines 11a-11d ▶		3,955,192					
12	Total revenue. See Instructions ▶		51,929,894	3,955,306	0	897,401		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

☐		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.					
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.	24,241,427	24,241,427		
2	Grants and other assistance to domestic individuals. See Part IV, line 22.	132,113	132,113		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members.				
5	Compensation of current officers, directors, trustees, and key employees.	2,286,788	897,068	842,716	547,004
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.	11,000,092	7,412,153	1,661,423	1,926,516
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).				
9	Other employee benefits.	2,492,420	1,621,062	399,845	471,513
10	Payroll taxes.	885,011	556,958	162,875	165,178
11	Fees for services (non-employees):				
a	Management.				
b	Legal.	69,336	1,217	68,119	
c	Accounting.	137,301		137,301	
d	Lobbying.				
e	Professional fundraising services. See Part IV, line 17.				
f	Investment management fees.	86,175		86,175	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	3,010,838	2,217,401	296,069	497,368
12	Advertising and promotion.	446,519	260,613	66,139	119,767
13	Office expenses.	873,120	629,174	89,338	154,608
14	Information technology.				
15	Royalties.				
16	Occupancy.	517,662	327,662	94,304	95,696
17	Travel.	840,222	646,266	64,383	129,573
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings.	377,374	104,279	12,429	260,666
20	Interest.				
21	Payments to affiliates.	546,537	343,948	100,584	102,005
22	Depreciation, depletion, and amortization.	730,218	459,544	134,387	136,287
23	Insurance.	86,325	41,429	12,115	32,781
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	OTHER PROGRAM EXPENSES	4,785,424	4,785,424		
b	COMMUNICATION	208,478	150,061	28,248	30,169
c	MISCELLANEOUS	32,881	31,387	633	861
d	MEMBERSHIP DUES	9,582	6,654	748	2,180
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e.	53,795,843	44,865,840	4,257,831	4,672,172
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 or note to any line in this Part X

				(A)		(B)
				Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			1	
	2	Savings and temporary cash investments		28,829,674	2	21,819,350
	3	Pledges and grants receivable, net		18,015,996	3	17,607,396
	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		486,783	9	729,011
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D.	10a	8,656,034	10c	1,550,926
	b	Less: accumulated depreciation	10b	7,105,108		
	11	Investments—publicly traded securities		30,188,523	11	30,376,886
	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.		0	15	1,083,458
	16	Total assets. Add lines 1 through 15 (must equal line 34).		79,281,348	16	73,167,027
Liabilities	17	Accounts payable and accrued expenses		6,929,489	17	5,967,812
	18	Grants payable		6,065,057	18	1,836,454
	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.		6,810,839	25	6,956,495
	26	Total liabilities. Add lines 17 through 25.		19,805,385	26	14,760,761
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		43,490,403	27	48,214,320
	28	Temporarily restricted net assets		15,697,705	28	9,404,091
	29	Permanently restricted net assets		287,855	29	787,855
	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		59,475,963	33	58,406,266
	34	Total liabilities and net assets/fund balances		79,281,348	34	73,167,027

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI ☒

1	Total revenue (must equal Part VIII, column (A), line 12)	1	51,929,894
2	Total expenses (must equal Part IX, column (A), line 25)	2	53,795,843
3	Revenue less expenses Subtract line 2 from line 1	3	-1,865,949
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	59,475,963
5	Net unrealized gains (losses) on investments	5	-695,441
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	1,156,912
9	Other changes in net assets or fund balances (explain in Schedule O)	9	334,781
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	58,406,266

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☒

		Yes	No
1	Accounting method used to prepare the Form 990 ☐ 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? 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		No
b	Were the organization's financial statements audited by an independent accountant? 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	Yes	
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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
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?	Yes	
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	Yes	

Additional Data

Software ID:

Software Version:

EIN: 20-3099071

Name: UNITED WAY FOR SOUTHEASTERN MICHIGAN

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			
LIZABETH ARDISANA CHAIR	3 00 0 00	X		X				0	0	0
JEFFREY D BERGERON IMMEDIATE FORMER CHAIR	1 00 0 00	X						0	0	0
MARK PETROFF VICE CHAIR	3 00 0 00	X		X				0	0	0
MARK STIERS TREASURER	3 00 0 00	X		X				0	0	0
DEBORAH MACON SECRETARY	3 00 0 00	X		X				0	0	0
TONYA ALLEN DIRECTOR	1 00 0 00	X						0	0	0
ELIZABETH ALVAREZ DIRECTOR	1 00 0 00	X						0	0	0
BRYAN C BARNHILL II DIRECTOR	1 00 0 00	X						0	0	0
RICK BLOCKER DIRECTOR	1 00 0 00	X						0	0	0
BETH CHAPPELL DIRECTOR	1 00 0 00	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)						(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			
MARK DAVIDOFF DIRECTOR	1 00 0 00	X						0	0	0
DAVID FOLTYN DIRECTOR	1 00 0 00	X						0	0	0
LISA FORD DIRECTOR	1 00 0 00	X						0	0	0
FRANK W ERVIN III DIRECTOR	1 00 0 00	X						0	0	0
CHARLES E HALL DIRECTOR	1 00 0 00	X						0	0	0
BRIAN D HARLOW DIRECTOR	1 00 0 00	X						0	0	0
SRIKANT INAMPUDI DIRECTOR	1 00 0 00	X						0	0	0
HASSAN JABER DIRECTOR	1 00 0 00	X						0	0	0
JAMES JACOBS PHD DIRECTOR	1 00 0 00	X						0	0	0
STEVEN A KIEFER DIRECTOR	1 00 0 00	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)						(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			
MARY KRAMER DIRECTOR	1 00 0 00	X						0	0	0
LESLIE A MURPHY DIRECTOR	1 00 0 00	X						0	0	0
HEATHER PAQUETTE DIRECTOR	1 00 0 00	X						0	0	0
SANDRA E PIERCE DIRECTOR	1 00 0 00	X						0	0	0
MICHAEL T RICHIE DIRECTOR	1 00 0 00	X						0	0	0
RAY SCOTT DIRECTOR	1 00 0 00	X						0	0	0
ED SIAJE DIRECTOR	1 00 0 00	X						0	0	0
REGINALD TURNER DIRECTOR	1 00 0 00	X						0	0	0
JAMES G VELLA DIRECTOR	1 00 0 00	X						0	0	0
KEN WHIPPLE DIRECTOR	1 00 0 00	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)						(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			
PHILLIP WM FISHER DIRECTOR THRU 5/16	1 00 0 00	X						0	0	0
MICHAEL J BRENNAN PRESIDENT AND CEO THRU 1/16	50 00 0 00			X				467,165	0	147,904
KRISTEN HOLT COO THRU 4/16	50 00 0 00			X				304,460	0	20,875
JOHN A FREDRICKSON DIRECTOR OF FINANCE THRU 9/15	50 00 0 00			X				214,160	0	18,466
HERMAN B GRAY PRESIDENT AND CEO	50 00 0 00			X				80,769	0	2,723
BRIDGETT FEAGIN CHIEF FINANCIAL OFFICER AS OF 1/16	40 00 0 00			X				0	0	0
DOUGLAS FERRICK VICE PRESIDENT	50 00 0 00				X			162,308	0	8,910
SUSAN E DUNCAN-MURPHY VICE PRESIDENT	50 00 0 00				X			177,495	0	18,788
DOUGLAS PLANT VICE PRESIDENT THRU 10/15	50 00 0 00				X			177,598	0	20,001
KERRI GENTRY VICE PRESIDENT	50 00 0 00					X		142,797	0	24,394

SCHEDULE A
(Form 990 or 990EZ)

Public Charity Status and Public Support

OMB No 1545-0047

2015

Open to Public Inspection

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.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

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 (Form 990 or 990-EZ))

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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a

☐

Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b

☐

Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c

☐

Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d

☐

Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e

☐

Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f

Enter the number of supported organizations

g

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 (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	49,030,499	47,800,028	57,848,079	56,031,323	47,077,187	257,787,116
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	49,030,499	47,800,028	57,848,079	56,031,323	47,077,187	257,787,116
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)						24,677,862
6 Public support. Subtract line 5 from line 4						233,109,254

Section B. Total Support						
Calendar year (or fiscal year beginning in) ►	(a)2011	(b)2012	(c)2013	(d)2014	(e)2015	(f)Total
7 Amounts from line 4	49,030,499	47,800,028	57,848,079	56,031,323	47,077,187	257,787,116
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	651,537	613,583	838,615	961,605	955,153	4,020,493
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	1,427,724	1,020,014	1,849,976	3,925,926	3,955,192	12,178,832
11 Total support. Add lines 7 through 10						273,986,441
12 Gross receipts from related activities, etc (see instructions)					12	106,813
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ☐						

Section C. Computation of Public Support Percentage		
14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f))	14	85 080 %
15 Public support percentage for 2014 Schedule A, Part II, line 14	15	86 390 %
16a 33 1/3% support test—2015. 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—2014. 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—2015. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► ☐		
b 10%-facts-and-circumstances test—2014. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ► ☐		
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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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)2011	(b)2012	(c)2013	(d)2014	(e)2015	(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 VI.)						
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 section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16 Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	17	
18 Investment income percentage from 2014 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2015. 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—2014. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization ► ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		

Part IV

Supporting Organizations (continued)

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)			
a	☐ The organization satisfied the Activities Test. Complete line 2 below.		
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI) _____		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		Current Year	
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) ☐		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013.			
e From 2014.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 \$			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 Excess distributions carryover to 2016. Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013.			
d From 2014.			
e From 2015.			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS INCOME FEES FOR SERVICE

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047
2015
Open to Public Inspection

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

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

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

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

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

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

Name of the organization UNITED WAY FOR SOUTHEASTERN MICHIGAN	Employer identification number 20-3099071
--	--

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures	▶ \$ _____
3	Volunteer hours	_____

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

1	Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$ _____
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$ _____
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

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

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$ _____
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$ _____
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b	▶ \$ _____
4	Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No
5	Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV	

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A

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

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ☐ if the filing organization checked box A and "limited control" provisions apply

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	46,800													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	63,500													
c	Total lobbying expenditures (add lines 1a and 1b)	110,300													
d	Other exempt purpose expenditures	53,599,360													
e	Total exempt purpose expenditures (add lines 1c and 1d)	53,709,660													
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	1,000,000													
<table><thead><tr><th>If the amount on line 1e, column (a) or (b) is:</th><th>The lobbying nontaxable amount is:</th></tr></thead><tbody><tr><td>Not over \$500,000</td><td>20% of the amount on line 1e</td></tr><tr><td>Over \$500,000 but not over \$1,000,000</td><td>\$100,000 plus 15% of the excess over \$500,000</td></tr><tr><td>Over \$1,000,000 but not over \$1,500,000</td><td>\$175,000 plus 10% of the excess over \$1,000,000</td></tr><tr><td>Over \$1,500,000 but not over \$17,000,000</td><td>\$225,000 plus 5% of the excess over \$1,500,000</td></tr><tr><td>Over \$17,000,000</td><td>\$1,000,000</td></tr></tbody></table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000	Over \$17,000,000	\$1,000,000		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000														
Over \$17,000,000	\$1,000,000														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000													
h	Subtract line 1g from line 1a If zero or less, enter -0-	0													
i	Subtract line 1f from line 1c If zero or less, enter -0-	0													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?														

☐ Yes

☐ No

4-Year Averaging Period Under section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a)2012	(b)2013	(c)2014	(d)2015	(e) Total
2a Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000
c Total lobbying expenditures	60,000	65,000	53,000	110,300	288,300
d Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
f Grassroots lobbying expenditures	30,000	32,500	32,500	46,800	141,800

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Return Reference	Explanation
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SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
► Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors 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" on 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)
☐ Protection of natural habitat
☐ Preservation of open space

☐ Preservation of an historically important land area
☐ Preservation of a certified historic structure

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

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, handling of violations, and enforcing conservation easements during the year
►

7

Amount of expenses incurred in monitoring, inspecting, handling of violations, 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" on 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)

Revenue included on 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

Revenue included on 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" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII and complete the following table

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

2a

Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided 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	b (c)Two years back	(d)Three years back	(e)Four years back
1a Beginning of year balance	21,051,278	24,053,322	19,297,082	17,743,648	18,133,592
b Contributions		174,224	3,131,576	57,951	
c Net investment earnings, gains, and losses	-143,286	-238,272	2,501,511	1,524,858	120,812
d Grants or scholarships					
e Other expenditures for facilities and programs		2,837,855	848,800		450,000
f Administrative expenses	43,518	100,141	28,047	29,375	60,756
g End of year balance	20,864,474	21,051,278	24,053,322	19,297,082	17,743,648

2

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

a Board designated or quasi-endowment ▶ 98 550 %

b Permanent endowment ▶ 1 450 %

c Temporarily restricted endowment ▶

The percentages on lines 2a, 2b, and 2c should equal 100%

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		No
3a(ii)		No
b If "Yes" on 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.

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

Description of property	(a)Cost or other basis (investment)	(b)Cost or other basis (other)	(c)Accumulated depreciation	(d)Book value
1a Land				
b Buildings				
c Leasehold improvements		3,531,473	2,593,877	937,596
d Equipment		5,106,460	4,511,231	595,229
e Other		18,101		18,101
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) ▶				1,550,926

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	44,310,552
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-695,441
b	Donated services and use of facilities	2b	1,475,511
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	334,781
e	Add lines 2a through 2d	2e	1,114,851
3	Subtract line 2e from line 1	3	43,195,701
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	8,734,193
c	Add lines 4a and 4b	4c	8,734,193
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	51,929,894

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	46,537,161
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	1,475,511
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	1,475,511
3	Subtract line 2e from line 1	3	45,061,650
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	8,734,193
c	Add lines 4a and 4b	4c	8,734,193
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	53,795,843

Part XIII Supplemental Information

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

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	PRIOR YEAR PROVISION FOR UNCOLLECTIBLE PLEDGES 334,781

Part XIII **Supplemental Information** *(continued)*

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	INVESTMENT EXPENSES INCLUDED IN REVENUE 86,175 ON BEHALF OF ITS DONORS, UWSEM PROCESSED DESIGNATIONS TO OTHER NON PROFIT ORGANIZATIONS 8,648,018

2015

Open to Public Inspection

20-3099071

☒ Yes ☐ No

(h) Purpose of grant or assistance

Schedule I (Form 990) 2015

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) INDIVIDUAL DEVELOPMENT	15	61,183			
(2) FINANCIAL STABILITY MICRO GRANTS	56	67,930			
(3) SCHOLARSHIP PROGRAMS	3	3,000			

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

Return Reference	Explanation
PART I, LINE 2	THE GRANT AWARD PROCESS BEGINS WITH A REQUEST FOR PROPOSAL PROCESS BASED ON A REVIEW OF THE PROPOSALS, GRANTS ARE AWARDED TO AGENCIES THROUGHOUT THE YEAR, AGENCIES ARE REQUIRED TO SUBMIT PROGRESS REPORTS ON THE PROJECTS THAT WERE FUNDED THROUGH THE GRANT AWARD PROCESS UWSEM ALSO REVIEWS THE AUDITED FINANCIAL STATEMENTS FOR THE AGENCIES THAT HAVE BEEN AWARDED GRANTS IN ADDITION, UWSEM STAFF CONDUCT ON-SITE VISITS OF AGENCIES TO REVIEW PROGRESS ON GRANT ACTIVITIES DURING THE YEAR FOR DONOR DESIGNATIONS, UWSEM VERIFIED THAT THE AGENCY IS A 501(C)(3) NON-PROFIT ORGANIZATION AND THAT THE AGENCY IS IN COMPLIANCE WITH THE PROVISIONS OF THE PATRIOT ACT

Additional Data

Software ID:
Software Version:
EIN: 20-3099071
Name: UNITED WAY FOR SOUTHEASTERN MICHIGAN

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACCOUNTING AID SOCIETY 7700 2ND AVENUE 314 DETROIT,MI 48202	23-7310753	501(C)(3)	171,502				COMMUNITY INVESTMENT
ADULT WELL BEING SERVICES 1423 FIELD AVENUE DETROIT,MI 48214	38-1555827	501(C)(3)	358,338				COMMUNITY INVESTMENT
AID IN MILAN 89 W MAIN ST MILAN,MI 48160	38-2108453	501(C)(3)	14,849				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALTERNATIVES FOR GIRLS 903 W GRAND BLVD DETROIT, MI 48208	38-2766412	501(C)(3)	321,276				COMMUNITY INVESTMENT
AMERICAN INDIAN HEALTH & FAMILY SEV 4880 LAWDALE DETROIT, MI 48210	38-3081615	501(C)(3)	20,000				COMMUNITY INVESTMENT
ARAB AMERICAN & CHALDEAN COUNCIL 363 W BIG BEAVER RD TROY, MI 48084	38-2311840	501(C)(3)	29,380				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARAB COM CTR FOR ECON & SOCIAL SCVS 2651 SAULINO COURT DEARBORN, MI 48120	23-7444497	501(C)(3)	857,108				COMMUNITY INVESTMENT
ARC MICHIGAN 1325 S WASHINGTON AVE LANSING, MI 48910	38-1536920	501(C)(3)	361,853				COMMUNITY INVESTMENT
BEYOND BASICS PO BOX 1504 BLOOMFILED HILLS, MI 48012	75-2993015	501(C)(3)	73,500				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF MET DET 7700 SECOND AVE SUITE 602 DETROIT, MI 48202	38-6112533	501(C)(3)	69,345				COMMUNITY INVESTMENT
BLACK FAMILY DEVELOPMENT INC 2995 EAST GRAND BLVD DETROIT, MI 48202	38-2248479	501(C)(3)	248,246				COMMUNITY INVESTMENT
BOYS & GIRLS CLUB OF SE MICHIGAN 26777 HALSTED ROAD SUITE 100 FARMINGTON HILLS, MI 48331	38-1387123	501(C)(3)	89,052				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES OF SE MICHIGAN 15945 CANAL RD CLINTON TOWNSHIP, MI 48038	45-3623184	501(C)(3)	77,038				COMMUNITY INVESTMENT
CENTER FOR COMMUNITY BASED ENTERPRISE 4605 CASS AVE DETROIT, MI 48201	26-1336414	501(C)(3)	50,000				COMMUNITY INVESTMENT
CENTER FOR YOUTH AND FAMILIES 3031 WEST GRAND BLVD DETROIT, MI 48202	38-3050521		579,480				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILD TRENDS INC 7315 WISCONSIN AVE BETHESDA, MD 20814	13-2982969	501(C)(3)	166,743				COMMUNITY INVESTMENT
CHILDRENS AID SOCIETY 7700 SECOND AVENUE DETROIT, MI 48202	38-1532540	501(C)(3)	134,434				COMMUNITY INVESTMENT
CITY YEAR - DETROIT ONE FORD PLACE SUITE 1F DETROIT, MI 48202	22-2882549	501(C)(3)	454,025				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMON GROUND 1410 S TELEGRAPH RD BLOOMFIELD HILLS, MI 48302	38-1997712	501(C)(3)	119,752				COMMUNITY INVESTMENT
COMMUNITIES IN SCHOOLS OF DET INC 5575 CONNER DETROIT, MI 48213	38-3257060	501(C)(3)	32,050				COMMUNITY INVESTMENT
COMMUNITY ASSESSMENT REFERRAL & EDUCATION - CARE FRASER, MI 48026	38-2175274	501(C)(3)	113,294				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY LIVING SERVICES METRO PLACE CENTER WAYNE, MI 48184	38-2849658	501(C)(3)	135,996				COMMUNITY INVESTMENT
COMMUNITY SOCIAL SVCS OF WAYNE CO 9851 HAMILTON AVENUE DETROIT, MI 48202	38-1539820	501(C)(3)	253,392				COMMUNITY INVESTMENT
CORPORATION FOR NAT'L & COMM SERV 1201 NEW YORK AVE NW WASHINGTON, DC 20525	52-0971471	GOVERNMENT	30,963				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DETROIT CENTRAL CITY CMH 10 PETERBORO DETROIT, MI 48201	38-1986574	501(C)(3)	118,437				COMMUNITY INVESTMENT
DETROIT IMPACT INC 9930 GREENFIELD DETROIT, MI 48227	38-3063817	501(C)(3)	162,600				COMMUNITY INVESTMENT
DETROIT PARENT NETWORK 726 LOTHROP RD DETROIT, MI 48202	33-1054423	501(C)(3)	23,633				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DETROIT POLICE ATHLETIC LEAGUE INC 111 W WILLIS ST DETROIT, MI 48201	38-3314318	501(C)(3)	109,430				COMMUNITY INVESTMENT
DEVELOPMENT CENTERS INC 17421 TELEGRAPH DETROIT, MI 48219	38-2440204	501(C)(3)	219,047				COMMUNITY INVESTMENT
DOLLYWOOD FOUNDATION 111 DOLLYWOOD LANE PIGEON FORGE, TN 37863	62-1348105	501(C)(3)	326,637				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DON BOSCO HALL 2340 CALVERT DETROIT, MI 48204	38-1627081	501(C)(3)	234,071				COMMUNITY INVESTMENT
EAST DETROIT PUBLIC SCHOOLS 15501 COUZENS EASTPOINT, MI 48021	38-6002520	GOVERNMENT	4,443				COMMUNITY INVESTMENT
EASTERN MARKET CORPORATION 2934 RUSSELL ST DETROIT, MI 48207	32-0030432	501(C)(3)	50,000				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EMPOWERMENT ZONE COALITION 4146 LAKEWOOD ST DETROIT, MI 48215	38-3409433	501(C)(3)	99,560				COMMUNITY INVESTMENT
EXCELLENT SCHOOLS DETROIT 2111 WOODWARD DETROIT, MI 48201	27-4616034	501(C)(3)	113,716				COMMUNITY INVESTMENT
FAIR FOOD NETWORK 205 E WASHINGTON STREET ANN ARBOR, MI 48104	26-4143394	501(C)(3)	62,500				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY INDEPENDENCE INITIATIVE 1201 MARTIN LUTHER KING JR WAY OAKLAND, CA 94612	02-0784790	501(C)(3)	125,002				COMMUNITY INVESTMENT
FIRST STEP 44567 PINETREE DRIVE PLYMOUTH, MI 48170	38-2208980	501(C)(3)	92,002				COMMUNITY INVESTMENT
FORGOTTEN HARVEST 21800 GREENFIELD ROAD OAK PARK, MI 48237	38-2926476	501(C)(3)	84,698				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRANKLIN WRIGHT SETTLEMENTS 3360 CHARLEVOIX AVE DETROIT, MI 48207	38-1845857	501(C)(3)	373,890				COMMUNITY INVESTMENT
FURNITURE BANK OF SOUTHEASTERN MI 333 NORTH PERRY PONTIAC, MI 48342	38-1914651	501(C)(3)	19,284				COMMUNITY INVESTMENT
GLEANERS COMMUNITY FOOD BANK-SEM 2131 BEAUFIT DETROIT, MI 48207	38-2156255	501(C)(3)	131,434				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOODWILL INDUSTRIES OF GREATER DET 7700 SECOND AVE DETROIT, MI 48202	38-1362823	501(C)(3)	26,077				COMMUNITY INVESTMENT
GREATER DETROIT AGENCY FOR THE BLIND AND VISUALLY IMPAIRED DETROIT, MI 48227	38-1683860	501(C)(3)	38,440				COMMUNITY INVESTMENT
GREEN LIVING SCIENCE 1331 HOLDEN STREET DETROIT, MI 48202	27-4304259	501(C)(3)	12,500				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GUIDANCE CENTER THE 13101 ALLEN RD SOUTHGATE, MI 48195	38-1621700	501(C)(3)	352,930				COMMUNITY INVESTMENT
HARPER WOODS SCHOOL DISTRICT 20225 BEACONSFIELD HARPER WOODS, MI 48225	38-6004167	GOVERNMENT	7,235				COMMUNITY INVESTMENT
HAVEN 801 VANGUARD DR PONTIAC, MI 48343	38-2426175	501(C)(3)	92,124				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE CENTER - MACOMB 33222 GROESBECK HIGHWAY FRASER, MI 48026	20-4839848	501(C)(3)	18,050				COMMUNITY INVESTMENT
INSIDEOUT LITERACY ARTS PROJECT 5143 CASS AVE SUITE 225 DETROIT, MI 48202	31-1428704	501(C)(3)	99,300				COMMUNITY INVESTMENT
INTERNATIONAL INST OF METRO DETROIT OF METROPOLITAN DETROIT INC DETROIT, MI 48202	38-1358200	501(C)(3)	95,000				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FAMILY SERVICE OF METRO 6555 WEST MAPLE RD WEST BLOOMFIELD, MI 48322	38-0691329	501(C)(3)	184,349				COMMUNITY INVESTMENT
JEWISH VOCATIONAL SERVICE 29699 SOUTHFIELD RD SOUTHFIELD, MI 48076	38-1358013	501(C)(3)	238,112				COMMUNITY INVESTMENT
JOHNS HOPKINS INSTITUTIONS CENTRAL LOCKBOX C/O BANK OF AMERICA CHICAGO, IL 60693	52-0595110	501(C)(3)	71,920				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JUNIOR ACHIEVEMENT OF SE MICHIGAN 577 EAST LARNED STREET STE 200 DETROIT, MI 48226	38-1348535	501(C)(3)	50,632				COMMUNITY INVESTMENT
KIDS FOOD BASKET 2055 OAK INDUSTRIAL DR NE GRAND RAPIDS, MI 49505	04-3760991	501(C)(3)	15,000				COMMUNITY INVESTMENT
LAKESHORE LEGAL AID 21885 DUNHAM RD SUITE 4 CLINTON TOWNSHIP, MI 48036	38-1850908	501(C)(3)	60,000				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LATIN AMERICAN SOC & ECONOMIC DEV 4138 W VERNOR DETROIT, MI 48209	38-1892670	501(C)(3)	73,829				COMMUNITY INVESTMENT
LEAPS AND BOUNDS FAMILY SERVICES 8129 PACKARD AVENUE WARREN, MI 48090	38-2854143	501(C)(3)	243,543				COMMUNITY INVESTMENT
LEGAL AID & DEFENDER ASSOCIATION 613 ABBOTT STREET DETROIT, MI 48226	38-1358203	501(C)(3)	62,309				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LIGHTHOUSE OF OAKLAND COUNTY 46156 WOODWARD AVE PONTIAC, MI 48342	38-3327797	501(C)(3)	143,635				COMMUNITY INVESTMENT
LIVING ARTS 8701 W VERNOR DETROIT, MI 48209	43-1950379	501(C)(3)	137,526				COMMUNITY INVESTMENT
MACOMB CNTY COMM DISPUTE RES CENTER 176 SOUTH MAIN 2 MT CLEMENS, MI 48043	38-3119995	501(C)(3)	125,500				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MACOMB FAMILY SERVICES INC 124 W GATES BRUCE TOWNSHIP, MI 48065	38-2315965	501(C)(3)	326,436				COMMUNITY INVESTMENT
MACOMB HOMELESS COALITION 33222 GROESBECK HWY MT CLEMENS, MI 48046	38-2719602	501(C)(3)	61,971				COMMUNITY INVESTMENT
MACOMB INTERMEDIATE SCHOOL DISTRICT 44001 GARFIELD ROAD CLINTON TOWNSHIP, MI 48038	38-1714601	GOVERNMENT	172,445				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MANHOOD PROJECT LLC THE 26025 CHERRY HILL RD A2 INKSTER, MI 48141	45-4785914	501(C)(3)	103,116				COMMUNITY INVESTMENT
MATRIX HUMAN SERVICES 120 PARSONS DETROIT, MI 48201	38-1358015	501(C)(3)	285,510				COMMUNITY INVESTMENT
METROPOLITAN DETROIT AFL-CIO 600 WEST LAFAYETTE SUITE 200 DETROIT, MI 48226	38-1587001	501(C)(3)	37,979				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MICHIGAN LEAGUE FOR PUBLIC POLICY 1223 TURNER STREET LANSING, MI 48906	38-1360557	501(C)(3)	85,970				COMMUNITY INVESTMENT
NATIONAL COUNCIL ON ALCOHOLISM AND DRUG DEPENDENCE-GTR DETROIT AREA DETROIT, MI 48221	38-2471616	501(C)(3)	39,996				COMMUNITY INVESTMENT
NATIONAL EQUITY PROJECT 1720 BROADWAY OAKLAND, CA 94612	94-3222960	501(C)(3)	110,498				COMMUNITY INVESTMENT

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

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NATIONAL KIDNEY FOUNDATION OF MICH 1169 OAK VALLEY ANN ARBOR, MI 48108	38-1559941	501(C)(3)	382,537				COMMUNITY INVESTMENT
NEIGHBORHOOD LEGAL SERVICES MICHIGA 7310 WOODWARD STE 701 DETROIT, MI 48202	38-1818068	501(C)(3)	274,029				COMMUNITY INVESTMENT
NEIGHBORHOOD SERVICE ORGANIZATION 882 OAKMAN BLVD DETROIT, MI 48238	38-1561624	501(C)(3)	142,337				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OAKLAND COUNTY CHILD CARE COUNCIL 550 HULET DRIVE STE 101 BLOOMFIELD HILLS, MI 48302	38-2787636	501(C)(3)	317,870				COMMUNITY INVESTMENT
OAKLAND FAMILY SERVICES 114 ORCHARD LAKE ROAD PONTIAC, MI 48341	38-1358388	501(C)(3)	328,825				COMMUNITY INVESTMENT
OAKLAND LIVINGSTON HUMAN SVD AGENCY 1956 HILTON ROAD FERNDAL, MI 48220	38-1785665	501(C)(3)	137,960				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OAKLAND SCHOOLS 2111 PONTIAC LAKE RD WATERFORD, MI 48328	38-1713563	GOVERNMENT	102,940				COMMUNITY INVESTMENT
PEOPLE'S COMMUNITY SERVICES 420 LEIGH DETROIT, MI 48209	38-1641161	501(C)(3)	117,026				COMMUNITY INVESTMENT
PRINCETON REVIEW FOUNDATION INC TH 1 LOWER ALCATRAZ PL 5 MILL VALLEY, CA 94941	13-3429168	501(C)(3)	129,233				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY - EASTERN MI DIV HQ 16130 NORTHLAND DR SOUTHFIELD, MI 48075	38-1370971	501(C)(3)	362,203				COMMUNITY INVESTMENT
SOUTH OAKLAND SHELTER 18505 WEST 12 MILE ROAD LATHRUP VILLAGE, MI 48076	38-2847849	501(C)(3)	147,521				COMMUNITY INVESTMENT
SOUTHWEST COUNSELING SOLUTIONS INC 1700 WATERMAN DETROIT, MI 48209	38-2042021	501(C)(3)	601,722				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STARFISH FAMILY SERVICES 30000 HIVELEY ROAD INKSTER, MI 48141	38-2230416	501(C)(3)	680,895				COMMUNITY INVESTMENT
TEACHER'S PET DOGS AND KIDS LEARNIN MACOMB COUNTY SOUND COUNSELING CLINTON TOWNSHIP, MI 48038	20-3168612	501(C)(3)	47,740				COMMUNITY INVESTMENT
TECH TOWN 440 BURROUGHS ST DETROIT, MI 48202	41-2061387	501(C)(3)	25,002				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE ENGINEERING SOCIETY OF DETROIT 20700 CIVIC CENTER DRIVE SOUTHFIELD, MI 48076	38-1207155	501(C)(3)	21,000				COMMUNITY INVESTMENT
TOTAL PACKAGE LIFESTYLE LLC 719 GRISWOLD DETROIT, MI 48226	11-3746815		155,066				COMMUNITY INVESTMENT
TURNING POINT INC P O BOX 1123 MT CLEMENS, MI 48046	38-2292020	501(C)(3)	80,815				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED COMMUNITY HOUSING COALITION 220 BAGLEY STE 224 DETROIT, MI 48226	38-2142140	501(C)(3)	121,668				COMMUNITY INVESTMENT
US NAVAL ACEDEMY FOUNDATION 291 WOOD ROAD BEACH HALL ANNAPOLIS, MD 21402	23-7003516	501(C)(3)	50,000				COMMUNITY INVESTMENT
VIP MENTORING 700 PEACH TREE LANE ROCHESTER HILLS, MI 48306	38-2311813	501(C)(3)	21,322				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WAYNE MEDIATION CENTER 19855 W OUTER DR DEARBORN, MI 48124	38-3123313	501(C)(3)	47,403				COMMUNITY INVESTMENT
WAYNE METROPOLITAN COMM ACT AGY 7310 WOODWARD DETROIT, MI 48202	38-1976979	501(C)(3)	359,619				COMMUNITY INVESTMENT
WELLSPRING LUTHERAN SERVICES - C&F PO BOX 48 BAY CITY, MI 48707	38-1359524	501(C)(3)	23,754				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINNING FUTURES 27500 COSGROVE WARREN, MI 48092	20-2263860	501(C)(3)	161,542				COMMUNITY INVESTMENT
WOMEN OF TOMORROW MENTOR & SCHOLAR 22 EAST FLAGLER ST 6TH FLOOR MIAMI, FL 33131	65-0862995	501(C)(3)	97,026				COMMUNITY INVESTMENT
YMCA OF METROPOLITAN DETROIT 1401 BROADWAY SUITE 3A DETROIT, MI 48226	38-1358055	501(C)(3)	172,422				COMMUNITY INVESTMENT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DIRECT DESIGNATIONS TO VARIOUS AGENCIES			8,648,018				PROGRAM SUPPORT

Schedule J
(Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax indemnification and gross-up payments ☒ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)		
b If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	Yes	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	Yes	
3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. ☒ Compensation committee ☐ Written employment contract ☒ Independent compensation consultant ☒ Compensation survey or study ☒ Form 990 of other organizations ☒ Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization: a Receive a severance payment or change-of-control payment?		No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		No
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of: a The organization?		No
b Any related organization? If "Yes," on line 5a or 5b, describe in Part III		No
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: a The organization?		No
b Any related organization? If "Yes," on line 6a or 6b, describe in Part III		No
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	Yes	
8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column(B) reported as deferred on prior Form 990
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
See Additional Data Table							

Part III Supplemental Information

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

Return Reference	Explanation
PART I, LINE 1A	THE ORGANIZATION PAID THE DUES FOR A DETROIT ATHLETIC CLUB MEMBERSHIP FOR MICHAEL J BRENNAN, FORMER CEO. THE DETROIT ATHLETIC CLUB'S FACILITIES INCLUDE DINING ROOMS AND MEETING ROOMS AND IS UTILIZED BY MANY INDIVIDUALS AND ORGANIZATIONS IN THE DETROIT BUSINESS COMMUNITY. THE CEO USED THE MEMBERSHIP PRIMARILY TO CONDUCT BUSINESS MEETINGS THROUGHOUT THE YEAR.
PART I, LINE 4B	MICHAEL J BRENNAN'S COMPENSATION INCLUDES A CONTRIBUTION TO HIS 457(F) PLAN (SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN) IN THE AMOUNT OF \$124,680.
PART I, LINE 7	DURING 2015, THE CEO AND COO WERE AWARDED BONUSES BASED ON ORGANIZATIONAL GOAL ACHIEVEMENT.
PART II, LINE 1	FOR AN EXPLANATION OF THE COMPONENTS OF THE CEO'S COMPENSATION FOR 2015, SEE SCHEDULE O UNDER FORM 990, PART VI, LINE 15A.

Additional Data

Software ID:
Software Version:
EIN: 20-3099071
Name: UNITED WAY FOR SOUTHEASTERN MICHIGAN

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1MICHAEL J BRENNAN PRESIDENT AND CEO THRU 1/16	(i)	392,165	75,000	0	122,142	25,762	615,069	0
	(ii)	0	0	0	0	0	0	0
1KRISTEN HOLT COO THRU 4/16	(i)	257,840	46,620	0	0	20,875	325,335	0
	(ii)	0	0	0	0	0	0	0
2JOHN A FREDRICKSON DIRECTOR OF FINANCE THRU 9/15	(i)	104,160	110,000	0	0	18,466	232,626	0
	(ii)	0	0	0	0	0	0	0
3DOUGLAS FERRICK VICE PRESIDENT	(i)	162,308	0	0	0	8,910	171,218	0
	(ii)	0	0	0	0	0	0	0
4SUSAN E DUNCAN-MURPHY VICE PRESIDENT	(i)	170,495	7,000	0	0	18,788	196,283	0
	(ii)	0	0	0	0	0	0	0
5DOUGLAS PLANT VICE PRESIDENT THRU 10/15	(i)	167,598	10,000	0	0	20,001	197,599	0
	(ii)	0	0	0	0	0	0	0
6KERRI GENTRY VICE PRESIDENT	(i)	142,797	0	0	0	24,394	167,191	0
	(ii)	0	0	0	0	0	0	0
7ERIC DAVIS VICE PRESIDENT	(i)	148,000	0	0	0	26,258	174,258	0
	(ii)	0	0	0	0	0	0	0
8DENISE FLECKENSTEIN DIRECTOR, GIFT PLANNING	(i)	126,794	0	0	0	30,183	156,977	0
	(ii)	0	0	0	0	0	0	0
9RONALD CARR HR DIRECTOR THRU 10/15	(i)	160,084	0	0	0	24,418	184,502	0
	(ii)	0	0	0	0	0	0	0

SCHEDULE M
(Form 990)

Noncash Contributions

OMB No 1545-0047

2015

Open to Public Inspection

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

► Attach to Form 990.

►Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

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	14	119,666	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 ► ()				
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

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 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

Yes

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

Yes

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.

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.

Return Reference	Explanation
PART I, COLUMN (B)	THE NUMBER REPORTED IS BOTH THE NUMBER OF CONTRIBUTIONS AND THE NUMBER OF ITEMS CONTRIBUTED
PART I, LINE 32B	UWSEM USES THE SERVICES OF A BROKERAGE FIRM TO SELL DONATED SECURITIES

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 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047

2015**Open to Public
Inspection**Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN**Employer identification number**

20-3099071

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	THE DRAFT FORM 990 IS REVIEWED BY STAFF INTERNALLY BEFORE BEING FINALIZED IT IS THEN PROVIDED TO THE AUDIT COMMITTEE AND BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	EACH MEMBER OF THE BOARD OF DIRECTORS COMPLETES A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY WHEN THE BOARD OF DIRECTORS IS VOTING ON SPECIFIC ISSUES WHERE A PARTICULAR DIRECTOR MIGHT HAVE A CONFLICT OF INTEREST, THE DIRECTOR RECUSES HIMSELF FROM VOTING

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	KEY FEATURE OF THE CHIEF EXECUTIVE OFFICER'S COMPENSATION AND BENEFITS COMPENSATION POLICY & OBJECTIVES UNITED WAY FOR SOUTHEASTERN MICHIGAN (UWSEM) MAINTAINS THE HIGHEST STANDARDS OF PROFESSIONALISM, ACCOUNTABILITY AND TRANSPARENCY IN ITS STEWARDSHIP OF CONTRIBUTOR DOLLARS AND FINANCIAL MANAGEMENT IN REGARDS TO ITS EXECUTIVE COMPENSATION PROGRAM, UWSEM'S OBJECTIVES ARE TO - ENCOURAGE THE ATTRACTION AND RETENTION OF HIGH CALIBER EXECUTIVES BY PROVIDING A TOTAL COMPENSATION OPPORTUNITY, INCLUDING BENEFITS, THAT IS COMPETITIVE ON A LOCAL AND NATIONAL LEVEL - ASSURE THAT THE PROCESS STRONGLY SUPPORTS AND FURTHER TRANSITIONS THE ORGANIZATION TO A "PAY FOR PERFORMANCE" CULTURE THROUGH THE USE OF INCENTIVES ON A LOCAL AND NATIONAL LEVEL - REINFORCE THE GOALS OF THE ORGANIZATION BY SUPPORTING TEAMWORK AND COLLABORATION - DEVELOP COMPENSATION LEVELS THAT ARE CONSISTENT WITH UWSEM'S MISSION - MAINTAIN A PROCESS THAT IS FREE FROM CONFLICTS OF INTEREST AND IN COMPLIANCE WITH RELEVANT REGULATIONS - ENSURE TRANSPARENCY IN ITS COMPENSATION DECISIONS GOVERNANCE & OVERSIGHT UNITED WAY FOR SOUTHEASTERN MICHIGAN'S BYLAWS PROVIDE FOR THE EXECUTIVE COMMITTEE TO DETERMINE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER THE COMMITTEE BASES ITS DECISIONS, IN PART, ON APPROPRIATE COMPENSATION COMPARABILITY DATA COMPARISONS ARE MADE BETWEEN UWSEM AND OTHER ORGANIZATIONS BASED ON ORGANIZATION SIZE (REVENUE, ASSETS, NUMBER OF EMPLOYEES, ETC) IN ADDITION, THE COMMITTEE UTILIZED COMPENSATION STUDIES AND OUTSIDE CONSULTANTS TO REVIEW THE CEO'S COMPENSATION THE COMMITTEE EVALUATED THE CEO'S GENERAL MANAGEMENT AND LEADERSHIP COMPETENCIES AS WELL AS HIS PERFORMANCE AGAINST THE KEY OBJECTIVES SET AT THE BEGINNING OF THE YEAR
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC AT UWSEM'S OFFICES IN ADDITION, COPIES OF THESE DOCUMENTS WILL BE PROVIDED BY MAIL OR EMAIL UPON REQUEST THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE ALSO AVAILABLE ON UWSEM'S WEBSITE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PRIOR YEAR PROVISION FOR UNCOLLECTIBLE PLEDGES 334,781
FORM 990, PART XII, LINE 2C	THE AUDIT PROCESS HAS NOT CHANGED FROM PRIOR YEAR

SCHEDULE R
(Form 990)

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.▶ Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

Part I

Identification of Disregarded Entities

Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) LINKED LEARNING DETROIT L3C 600 WOODWARD AVENUE SUITE 300 DETROIT, MI 48226 35-2522123	SUPPORT AND PROMOTE EDUCATIONAL PROGRAMS	MI			UNITED WAY FOR SOUTHEASTERN MICHIGAN

Part II

Identification of Related Tax-Exempt Organizations

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III

Identification of Related Organizations Taxable as a Partnership

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust

Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity?	
								Yes	No

Part V

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

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

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

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

1a

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

1b

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

1c

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

1d

e Loans or loan guarantees by related organization(s)

1e

f Dividends from related organization(s)

1f

g Sale of assets to related organization(s)

1g

h Purchase of assets from related organization(s)

1h

i Exchange of assets with related organization(s)

1i

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

1j

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

1k

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

1l

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

1m

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

1n

o Sharing of paid employees with related organization(s)

1o

p Reimbursement paid to related organization(s) for expenses

1p

q Reimbursement paid by related organization(s) for expenses

1q

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

1r

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

1s

Yes

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation
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