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Form **990** 

Department of the Treasury

DLN: 93493114001158

2016

Open to Public

OMB No 1545-0047

# **Return of Organization Exempt From Income Tax**

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

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

▶ Information about Form 990 and its instructions is at <u>www IRS gov/form990</u>

							.пэрссиоп	
A Fe	or the	<b>2016</b> ca	alendar year, or tax year beginning 07-01-2016 , and ending 0	6-30-2017	7			
□ Ad	dress c	oplicable change	C Name of organization United Way of the Chattahoochee Valley INC		D Employer 58-05724		ition number	
	me cha tıal reti al	-	Doing business as					
☐ Am	nended	ninated return	Number and street (or P O box if mail is not delivered to street address) Roor 1100 Fifth Avenue	· ·	E Telephone number (706) 327-3255			
⊔ Ар	piicatio	on pending	City or town, state or province, country, and ZIP or foreign postal code Columbus, GA 31902		<b>G</b> Gross recei	pts \$ 6,81	.3,820	
			F Name and address of principal officer	H(a) Is th	ıs a group retu			
			Scott D Ferguson 1100 Fifth Avenue	1	rdinates?	111101	□Yes <b>☑</b> No	
			Columbus, GA 31902	<b>н(b)</b> Are а	all subordinates	;	☐ Yes ☐No	
[ Tax	x-exem	npt status	☑ 501(c)(3) ☐ 501(c)( ) ◀ (insert no ) ☐ 4947(a)(1) or ☐ 52:	7 Inclu	ded? o," attach a list	(see ins		
J W	ebsite	e:► ww	w unitedwayofthecv org		p exemption nu		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
<b>∢</b> Forn	n of or	ganızatıon	☑ Corporation ☐ Trust ☐ Association ☐ Other ▶	L Year of form	nation 1952 M	State of I	legal domicile GA	
Pa	rt I	Sumi	mary					
Activities & Governance	u	Inited Wa	scribe the organization's mission or most significant activities y's purpose is to improve people's lives by raising funds from over 20,0 e, fund programs, and identify solutions that address basic needs, healt			multiple	agencies to	
олен	2	Check thi	is box $ ightharpoonup \square$ if the organization discontinued its operations or disposed	of more than 25%	% of its net ass	ets		
ි න්	3	Number o	of voting members of the governing body (Part VI, line 1a)		•	3	24	
Š	4	Number o	of independent voting members of the governing body (Part VI, line 1b	)	•	4	24	
È	5	Total nun	nber of individuals employed in calendar year 2016 (Part V, line 2a) .		•	5	25	
E CE	6	Total num	nber of volunteers (estimate if necessary)			6	1,500	
•	7a -	Total unr	elated business revenue from Part VIII, column (C), line 12		•	7a	0	
	Ь	Net unrel	ated business taxable income from Form 990-T, line 34		•	7b	0	
				Pr	ior Year		urrent Year	
<u>⊈</u>			cons and grants (Part VIII, line 1h)		7,050,56	+	6,709,784	
Ravenue		-	service revenue (Part VIII, line 2g)			0	(	
Ω.			ent income (Part VIII, column (A), lines 3, 4, and 7d )		-17,39		68,068	
			venue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	_,	7,064,96		35,968 6,813,820	
			enue—add lines 8 through 11 (must equal Part VIII, column (A), line 12	2)				
			nd similar amounts paid (Part IX, column (A), lines 1–3 )		5,128,21	0	5,128,210	
		•	paid to or for members (Part IX, column (A), line 4)	o	1,144,78	1	1 150 074	
Expenses			other compensation, employee benefits (Part IX, column (A), lines 5–1 inal fundraising fees (Part IX, column (A), line 11e)	·	<u>' '</u>	0	1,158,076	
<u>@</u>			raising expenses (Part IX, column (D), line 25) >740,743					
Ä			penses (Part IX, column (A), lines 11a–11d, 11f–24e)		524,20	4	557,157	
		·	enses Add lines 13–17 (must equal Part IX, column (A), line 25)		6,797,19	+	6,843,443	
		-	less expenses Subtract line 18 from line 12		267,77	+	-29,623	
Net Assets or Fund Balances				Beginning	of Current Yea		End of Year	
sset afa	20	Total asse	ets (Part X, line 16)		8,550,01	1	7,768,176	
Z Z	21	Total liab	ılıtıes (Part X, lıne 26)		5,285,95	8	5,258,981	
žΞ	22	Net asset	s or fund balances Subtract line 21 from line 20		3,264,05	3	2,509,195	
Par	t II	Signa	ature Block	•		'		
knowl	edge nowle	and belie	erjury, I declare that I have examined this return, including accompany f, it is true, correct, and complete Declaration of preparer (other than   * ure of officer	officer) is based (	on all informati 18-04-17			
Here	:		Ferguson President					
			r print name and title					
			rınt/Type preparer's name Preparer's signature erian B RutledgeCPA Brian B RutledgeCPA	Date Ch	eck I of PTI	N 0113761		
Paid		-		sel	f-employed			
-	pare	;• <u> </u>	irm's name    ▶ Robinson Grimes & Company PC  irm's address    ▶ PO Box 4299		m's EIN > 58-13 one no (706) 32			
Jse	Onl	ly  ˈ			2.10 110 (700) 32	. 5733		
			Columbus, GA 31914					
ଏay t	ne IRS	S discuss	this return with the preparer shown above? (see instructions)			⊻ Yes	s □ No	

Form	n 990 (2016)					Page <b>2</b>
Par	t IIII Statem	nent of Program Service	e Accomplis	hments		
	 Check If	Schedule O contains a respo	nse or note to a	any line in this Part III		🗹
1	Briefly describe	the organization's mission		•		
	surable outcomes				lives Funding is based on meeting anks 96th of 1,200 United Ways na	
2	-	ation undertake any significa 990 or 990-EZ?		- ,		☐ Yes ☑ No
	If "Yes," describ	oe these new services on Sch	nedule O			
3	-	ation cease conducting, or m	ake significant	changes in how it cond	ucts, any program · · · · · · · · · · · · · · · · · · ·	☐ Yes ☑ No
	If "Yes," describ	e these changes on Schedul	e O			
4	Section 501(c)(		ns are required	to report the amount	largest program services, as meas of grants and allocations to others,	
4a	(Code	) (Expenses \$	5,153,550	including grants of \$	5,128,210 ) (Revenue \$	)
	See Additional Dat	• • •				,
4b	(Code	) (Expenses \$	534,268	including grants of \$	) (Revenue \$	)
	See Additional Dat	ta				
4c	(Code	) (Expenses \$	77,778	ıncludıng grants of \$	) (Revenue \$	)
	See Additional Dat	ta				
4d		services (Describe in Schedu	•			
	(Expenses \$		uding grants of	•	) (Revenue \$	)
4e	Total program	ı service expenses ▶	5,765,5	96		

or X as applicable

Section 501(c)(3) organizations.

5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,

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 " . . . Did the organization maintain collections of works of art, historical treasures, or other similar assets?

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸 . . . . . . . . . . .

to provide advice on the distribution or investment of amounts in such funds or accounts?

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

assessments, or similar amounts as defined in Revenue Procedure 98-19?

Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?

Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🕏

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 🕏

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, line 16? *If "Yes," complete Schedule D, Part IX* 😼 . . . . . . . . . . . . . . . .

b Was the organization included in consolidated, independent audited financial statements for the tax year?

**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* . . . . . . . . . . . .

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

foreign organization? If "Yes," complete Schedule F, Parts II and IV . . . . . .

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . . .

**14a** Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) . . . .

Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

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11a

11b

11c

11d

11e

11f

12a

12b

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14a

14b

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16

17

18

19

Page 3

No

No

Nο

Nο

Nο

Yes

Yes

Yes

No Nο Nο Nο Nο Nο No Nο Nο Nο No No No

No

Nο

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29

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

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

**b** Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

**d** Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . . . . . . .

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

23

24a

24b

24c

24d

25a

25b

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27

28a

28b

28c

29

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35a

35h

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Yes

Form 990 (2016)

Yes

No

Nο

Nο

No

Nο

No

No

Nο

Nο

No

No

Nο

Nο

No

Nο

Nο

Nο

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Par	t 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
	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 0			
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
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			
L		2 <sub>b</sub>	Yes	
D	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)	-	103	
3а	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
ь	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
ь	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?			
·	If res, to line su or sp, and the organization me rount occor in the first in the f	5с		
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?	6а		No
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7</b> c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
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
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as	<del>- ' · · · · · · · · · · · · · · · · · · </del>		110
9	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		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter  Institution foce and control c			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b  Section F01(c)(12) organizations. Fator.			
	Section 501(c)(12) organizations. Enter  Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
Ь	against amounts due or received from them )			
b		1		
	Section 4947/a)(1) non-exempt charitable trusts. Is the organization filing Form 900 in liquid Form 10412	122		
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12a		
2a b		12a		
2a b 3	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.  Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for			
2a b 3	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.  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  Enter the amount of reserves the organization is required to maintain by the states in	12a		
2a b 3 a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.  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  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			
2a b 3 a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year  Section 501(c)(29) qualified nonprofit health insurance issuers.  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  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			No

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Par	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	·	nse to li	
Se	Check if Schedule O contains a response or note to any line in this Part VI			✓
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 24		Yes	No
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent  1b 24			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		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? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		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?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>7</b> b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	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	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	⊋.)	
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
Ь	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	_		
		16b		
<u>Se</u> 17	List the States with which a copy of this Form 990 is required to be filed			
1/	GA			
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  Scott D Ferguson 1100 Fifth Ave Columbus, GA 31901 (706) 327-3255			

executive Committee

(13) GWENDOLYN RUFF

(14) SEBASTIAN DIXON

executive Committee

(15) LEN SEXTON

DIRECTOR

(16) ALISON DOWE

DIRECTOR

DIRECTOR

DIRECTOR

# Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

and Independent Contractors

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

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

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

- year • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount
- of compensation  $\,$  Enter -0- in columns (D), (E), and (F) if no compensation was paid • List all of the organization's current key employees, if any See 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 ullet List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 more t

of reportable compensation from the organization	n and any rélate	d orgai	nızatı	ons				'	·	•
<ul> <li>List all of the organization's former director organization, more than \$10,000 of reportable control</li> </ul>										
List persons in the following order individual trus compensated employees, and former such person	stees or directo		-					-		
$\square$ Check this box if neither the organization no	r any related or	ganızat	ion c	omp	ens	ated a	any	current officer, dire	ctor, or trustee	
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	pers	an on on is	e bo both	t che x, u n an or/tr	m sice Highest compensated	er )	(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
(1) JANET BAKER DIRECTOR	1 00	Х						0	0	0
(2) SALLIE MARTIN executive Committee	1 00	×						0	0	0
(3) BRYANT MCCLENAGHAN DIRECTOR	1 00	×						0	0	0
(4) JENSEN M MELTON executive Committee	1 00	х						0	0	0
(5) DAVID MITCHELL DIRECTOR	1 00	х						0	0	0
(6) MIKE BURNS DIRECTOR	1 00	х						0	0	0
(7) W ALLEN PETTIS DIRECTOR	1 00	х						0	0	0
(8) MIKE CLEGHORN  Executive Committee	1 00	×						0	0	0
(9) KEITH PIERCE executive Committee	1 00	Х						0	0	0
(10) DR BRENDA COLEY DIRECTOR	1 00	х						0	0	0
(11) CHRISTINE ROBINS DIRECTOR	1 00	х						0	0	0
(12) STEVE DAVIS	1 00	v						0	0	0

1 00 (17) CHIEF RAYMOND SMITH Х 0 0 Form 990 (2016)

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

(B)

Description of services

(C)

Compensation

Form **990** (2016)

Page 8

	<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	Average hours per than one box, unless person week (list and hours hours director/trustee)  Average hours per than one box, unless person is both an officer and a director/trustee)  Average hours position (do not check more compensation compensation from the from related organization (W. 2/1000 MISC)							(E) Reportable compensation from related organizations	(	nted of other sation the		
		organizations below dotted line)	Individual trustee or director	Institutional Trust⊭⊬	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)		ganizat relat organiza	ed	
	ORETTE HOOVER	1 00	×						0		0		(	_ o
DIREC	CTOR	•••	••••						_					_
	SHERIFF HEATH TAYLOR	1 00	X						0		٥		(	0
	tive Committee	•••	••••								_			_
	SAIAH HUGLEY CTOR	1 00	×						0		o		(	0
` '	ACK TURNER	1 00							0		٥		(	0
DIREC	CTOR	•••	^						, and the second					_
	ROBERT KIDD	1 00	×						0		٥		(	0
execu	tive Committee	•••	···· ^						,		_			_
	EN WILLIAMS	1 00	×						0		٥		(	0
DIREC	CTOR	•••	••••								_			_
	RODNEY MAHONE	1 00	х						0		o		(	0
	tive Committee		••••								+			_
٠, ,	SCOTT D FERGUSON	40 00			x				135,886		0		9,862	2
CEO											+			-
														_
	Sub-Total					•	•							_
	otal from continuation sheets to Part	•				•	•		125.006	0			0.00	_
	otal (add lines 1b and 1c)						<u> </u>		135,886	<u>-</u>			9,862	_
2	Total number of individuals (including but of reportable compensation from the orga		those li	sted a	abov	/e) v	vho red	ceiv	ed more than \$100	,000				_
												Yes	No	
3	Did the organization list any <b>former</b> offic line 1a? <i>If "Yes," complete Schedule J for</i>	,	,	,		,	,	_	· ·	. ,	3		No	
4	For any individual listed on line 1a, is the organization and related organizations grandividual	sum of reporta eater than \$150	ble com 0,000? i	npens If "Ye	atio s," d	n an	d othe	r co che	ompensation from t dule J for such	he	4		No	
5	Did any person listed on line 1a receive o	r accrile compe	nsation	from	ימבו	, un	related	l or	nanization or individ				110	
	services rendered to the organization?If "	Yes," complete								I .	5		No	_
Se	ction B. Independent Contractors													_
1	Complete this table for your five highest of from the organization. Report compensation										ensat	ion		
		/A\								(D)		10		-

/B\

(A)

Name and business address

compensation from the organization ▶ 0

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

Part		II Statement of	Revenue						rage 9
				a respo	onse or note to any	line in this Part VIII			🗆
				·		(A) Total revenue	(B) Related or exempt function	<b>(C)</b> Unrelated business revenue	(D) Revenue excluded from tax under sections
	1:	a Federated campaig	ns	1a	6,457,612		revenue		512-514
nts nts		<b>b</b> Membership dues		1b	, , , <u>, , , , , , , , , , , , , , , , </u>				
rai 10 n		c Fundraising events							
A H		_		1c	1				
iff.		d Related organizatio		1d					
E .C		e Government grants (co	•	1e	127,172				
ii S		f All other contributions, and similar amounts n		1f	125,000				
Iributions, Gifts, Grants Other Similar Amounts		above			123,000				
ĒÖ		g Noncash contribution in lines 1a-1f \$		809	.666				
Contributions, Gifts, Grants and Other Similar Amounts	١,	h <b>Total.</b> Add lines 1a-1				6 700 704			
	┌-	Total.Add lilles 1a-1		• •	Business	6,709,784 Code			
Service Revenue	2a								
بر د	-			-					
i e	Ь	·							
, v	d								
32	e								
ıran		· · All other program se	rvice revenue	!					
Program	а	   <b>Total.</b> Add lines 2a-2f	f						
		Investment income (iii			nterest and other	1			<del>                                     </del>
		similar amounts) .			interest, and other	19,700			19,700
	4	Income from investme	ent of tax-exe	empt b	ond proceeds	•			
	5	Royalties			<u> → </u>	•			
	_		(ı) Rea	I	(II) Personal	_			
	6a	Gross rents							
	ŧ	b Less rental expenses				=			
		5				_			
	•	c Rental income or (loss)							
	•	d Net rental income o	r (loss)			†			
			(ı) Securit	ties	(II) Other				
	7 <i>a</i>	Gross amount from sales of		48,368					
		assets other than inventory		.0,500					
		b Less cost or				_			
		other basis and		0					
		sales expenses Gain or (loss)		48,368		-			
		d Net gain or (loss) .			<b>.</b>	48,368			48,368
	8 <i>a</i>	Gross income from f	undraising ev	ents		1			
ne		(not including \$ contributions reporte		of					
Other Revenue		See Part IV, line 18			1				
Re	ŧ	<b>b</b> Less direct expense	s	b					
eľ		c Net income or (loss)			ents 🕨	_			
Oth	9ā	Gross income from g See Part IV, line 19		ies					
_		See Fare 17, mile 15		а					
	ŧ	Less direct expense	s	b		1			
	(	c Net income or (loss)	from gaming	activit	ies	_			
	10	<b>a</b> Gross sales of invent returns and allowand	tory, less						
		returns and anoward	.65	a	}				
	ŧ	Less cost of goods s	sold	b		1			
		Net income or (loss)		invent	cory				
		Miscellaneous			Business Code				
	11	L <b>a</b> special events			90009	9 25,213	25,213		
	ŀ	other income			90009	9 7,959	7,959		
		admin fees			56100	0 2,796	2,796		
		d All other revenue .							
	•	e <b>Total.</b> Add lines 11a	-11d			35.053			
	12	<b>2 Total revenue.</b> See	Instructions			35,968			
						6,813,820	35,968		68,068 Form <b>990</b> (2016)

Form 990 (2016)				Page <b>10</b>
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all co	olumns All other orga	anizations must comm	olete column (A)	
Check if Schedule O contains a response or note to any	<b>J</b>	'	` '	🗆
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,128,210	5,128,210		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
<b>3</b> Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16				
4 Benefits paid to or for members				
<b>5</b> Compensation of current officers, directors, trustees, and key employees	135,886	95,120	27,177	13,589
<b>6</b> Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
<b>7</b> Other salaries and wages	785,906	245,885	137,522	402,499
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)				
9 Other employee benefits	166,567	62,171	39,684	64,712
<b>10</b> Payroll taxes	69,717	27,290	9,148	33,279
11 Fees for services (non-employees)				
a Management				
<b>b</b> Legal				
c Accounting				
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	22,322		22,322	
12 Advertising and promotion	52,675	718	5,288	46,669

43,327

25,125

1,612

38,010

10,118

96,296

86,321

56,402

38,236

86,713

6,843,443

7,352

9,033

8,480

2,694

96,296

11,378

25,944

44,685

5,765,596

95

245

5,436

4,549

12,108

4,066

35,293

9,191

4,509

20,243

337,104

568

30,539

11,543

17,422

3,358

39,650

21,267

33,632

21,785

740,743

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799

13 Office expenses .

15 Royalties .

**17** Travel .

16 Occupancy .

14 Information technology

**20** Interest . . . .

23 Insurance . .

21 Payments to affiliates . . . .

expenses on Schedule O )

a OTHER PROGRAM EXPENSES

**b** UW OF AMERICA DUES

d CAMPAIGN EXPENSES

e All other expenses

c REPAIRS AND MAINTENANCE

22 Depreciation, depletion, and amortization

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .19 Conferences, conventions, and meetings . . .

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

25 Total functional expenses. Add lines 1 through 24e
 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)

	(A) Beginning of	/ear	( <b>B</b> ) End of year
1 Cash-non-interest-bearing		908,806 <b>1</b>	54,235
2 Savings and temporary cash investments	. 2	,768,321 <b>2</b>	2,914,610
3 Pledges and grants receivable, net	3	,406,984 3	3,196,338
4 Accounts receivable, net		5,386 4	17,515
5 Loans and other receivables from current and former officers, directors,			

trustees, key employees, and highest compensated employees Complete Part 5 II of Schedule L 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) 6 voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L

Assets Notes and loans receivable, net . . . . Inventories for sale or use . 8 35.402 37.748 9 Prepaid expenses and deferred charges . 10a Land, buildings, and equipment cost or other 10a 927,695 basis Complete Part VI of Schedule D

567.414 372,374 360,281 b Less accumulated depreciation 10b 10c 1.050.013 1.187.449 11 Investments—publicly traded securities . 11 12 12 Investments—other securities See Part IV, line 11 . 13 13 Investments—program-related See Part IV, line 11 14 Intangible assets . . . . . 14

15

16

17

18

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34

Liabilities 22

Fund Balances

Assets or 30

Net

Other assets See Part IV, line 11 . . . .

Tax-exempt bond liabilities . . . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here 

and complete lines 30 through 34.

Capital stock or trust principal, or current funds . . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Accounts payable and accrued expenses

Grants payable . . .

Deferred revenue . . . .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Total assets. Add lines 1 through 15 (must equal line 34) . . .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

key employees, highest compensated employees, and disqualified

Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

2.725

8,550,011

5,285,958

5,285,958

2.691.270

572.783

3,264,053

8.550.011

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34

7.768,176

5,180,737

5,258,981

2.410.030

2,509,195

7.768.176

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99.165

78.244

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O

3a

3b

No

Form 990 (2016)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

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

Audit Act and OMB Circular A-133?

### Additional Data

Software ID:

Software Version:

EIN: 58-0572434

**Name:** United Way of the Chattahoochee Valley

INC

Form 990 (2016)

Form 990, Part III, Line 4a: United Way's Community Investment Process funds programs that improve conditions for individuals and families. All programs must address one of United Way's four priority areas Basic Needs (food, shelter, clothing), Income (having enough money to pay for today's necessities and save a little for tomorrow), Education (supporting children and youth and ensuring they graduate from high school on time, ready for college or to join the workforce), and Health (enduring children and adults are healthy and able to be productive at school and/or work) We believe these four priority areas are the building blocks for a good life. Through the generous contributions of local donors, we fund local programs that promote collaboration, efficiency, innovation and accountability. Annually, more than 70 volunteers who represent a cross-section of the community, form nine teams for the purpose of evaluating each program requesting funds. This evaluation is based on a written application and a site visit. The key criteria in the evaluation are 1) does the program meet a community need, 2) does the program achieve results for the people it serves, and 3) does it demonstrate good stewardship (in both financial accountability and organizational management/governance) For the 2017 fiscal year, United Way had 29 Community Partners and funded 58 programs The programs funded by United Way served more than 100,000 persons in the Chattahoochee Valley Below are several selected outcomes that demonstrate the results achieved through investing in United Way - 914 children, or 85 2% participating in targeted intervention for reading/math improved their skill level - 90 (100%) children with developmental needs and disabilities maintained or enhanced their growth and development because of activities that targeted skill development, growth and socialization -1.142 children, or 80% of those who are at-risk and participate in a United Way funded after-school program, improved academics and advanced to the next grade level -5,181 youth, or 82% served, will demonstrate healthy lifestyle choices, improve decision making and social interation and/or avoid at-risk behavior -582 children who have been physically and/or sexually abused received supportive services that decreased the trauma experienced by the child victim and improved their physical and emotional health - An average of 1,753 children in need received a hot, nutritious meal after school in their neighborhood at churches, agencies and housing authority communities. Children also benefitted from having volunteers read to them, engaging in arts and crafts activities, and having access to computers in a learning center to help them complete homework assignments

#### Form 990, Part III, Line 4b:

UNITED WAY PROGRAMSSTUFF THE BUS - 2017 MARKED THE FOURTH YEAR THAT UNITED WAY PARTNERED WITH AREA BUSINESSESS TO CONDUCT A SCHOOL SUPPLY

COUNTY, HARRIS COUNTY AND MUSCOGEE COUNTY YOUTH PROGRAMS - UNITED WAY IS FOCUSED ON HELPING YOUTH DEVELOP AS LEADERS, LEARN ABOUT

COMMUNITY NEEDS, INCREASE COMMUNITY INVOLVEMENT AND UNDERSTAND THE ROLE OF NON-PROFIT ORGANIZATIONS IN OUR COMMUNITY IN 2009, UNITED WAY

ESTABLISHED THE UNITED WAY YOUTH CAMP, WHICH IS A THREE DAY EVENT FOR LOCAL 7TH GRADE STUDENTS WHERE THEY GAIN KNOWLEDGE ABOUT COMMUNITY

NEEDS, VOLUNTEER, BEGIN TO DEVELOP LEADERSHIP SKILLS AND LEARN HOW THEY CAN MAKE A DIFFERENCE IN OUR COMMUNITY IN 2017, 20 7TH GRADERS

ATTENDED YOUTH CAMP AND HAD AN EXPERIENCE THAT WILL LAST A LIFETIME IN ADDITION TO THE THREE DAY CAMP. STUDENTS CONDUCTED A FOOD DRIVE AND

THEIR FFFORTS ON THE PLATFORM OF "WOMEN HELPING WOMEN" AFTER MEETING WITH SEVERAL SERVICE PROVIDERS WHO SERVE THE NEEDS OF WOMEN IN OUR COMMUNITY, WE FOUND THAT THERE IS A TRUE NEED FOR UNDERGARMENTS AND FOUNDATION PIECES. IN NOVEMBER OF 2016 THE WLC HOSTED "Wear One, Bring One", the 5th annual Power of the Purse luncheon Attendees were asked to bring an undergarment donation to the event. We collected more than 2,200 items. In addition, more than \$5,700 was raised to fund the Undergarment Voucher Program, which provides vouchers for women in need through a partnership with Goodwill Industries of the Southern Rivers and J.C. Penney. The first annual scholarship of \$2,500 was awarded to a former client of a partner agency HOME FOR GOOD - HOME FOR GOOD IS FOCUSED ON MAKING HOMELESSNESS ATYPICAL AND NON-REOCCURRING IN THE AREA. THE PROGRAM COORDINATES THE CONTINUUM OF CARE AS WELL AS THE HOMELESS INFORMATION MANAGEMENT SYSTEM THEY LEAD A COALITION THAT HAS HOUSED 164 VETERANS AND 186 CHRONICALLY HOMELESS PEOPLE 211 - 211 UNITED WAY OF THE CHATTAHOOCHEE VALLEY (211UWCV) PROVIDES ONLINE AND TELEPHONE ACCESS 24 HOURS A DAY, 7 DAYS A WEEK FOR ALL PEOPLE IN OUR COMMUNITY TO EASILY GET OR GIVE HELP RESIDENTS CAN DIAL THE EASY-TO-REMEMBER THREE DIGIT CODE OF 2-1-1 OR SEARCH THE COMPREHENSIVE DATABASE ONLINE AT WWW 211UWCV ORG TO CONNECT TO A VARIETY OF SERVICES DURING THE 2016-17 FISCAL YEAR, 211 AVERAGED 7,556 CALLS, GAVE 16,185 REFERRALS AND HAD 20,981 WEB SEARCHES THE TOP REFERRALS WERE FOR UTILITY ASSISTANCE (5,200), HOUSING (3,391), HOMELESSNESS (355) AND FOOD (2,830)

DRIVE TARGETED TO TITLE I SCHOOLS, GRADES K-2, over 5,000 FILLED BACKPACKS VALUED AT \$115,000 WERE DISTRIBUTED TO SCHOOLS IN PHENIX CITY, RUSSELL

CONTINUE TO PARTICIPATE IN VOLUNTEER PROJECTS IN 2012, WE ESTABLISHED THE UNITED WAY YOUTH COUNCIL IN 2017, THE YOUTH COUNCIL COMPLETED ITS

SIXTH YEAR WITH 41 HIGH SCHOOL JUNIORS AND SENIORS PARTICIPATING THROUGH THEIR INVOLVEMENT, THESE STUDENTS EXPERIENCED THE KEY ASPECTS OF UNITED WAY - GIVING, ADVOCATING AND VOLUNTEERING THE STUDENTS CHOSE TO FOCUS THEIR EFFORTS ON THE ISSUE OF EDUCATIONAL PROGRAMS THAT

CONCENTRATE ON AREAS OUTSIDE OF TRADITIONAL ACADEMICS, SUCH AS SPECIAL NEEDS, TECHNOLOGY OR ARTS AND MUSIC. The STUDENTS RAISED \$4.673 AND

GAVE 385 VOLUNTEER HOURS WOMEN UNITED IS A LOCAL AFFINITY GROUP COMPRISED OF WOMEN DONORS IN OUR COMMUNITY. THIS GROUP OF WOMEN FOCUSES

## Form 990, Part III, Line 4c: United Way Volunteer CenterThe Volunteer Center connects individuals and groups with agencies in need of volunteers on both an on-going basis and for specific projects

Through the Volunteer Center, we want to make it easy to volunteer, get connected to agencies, and help our community. Individual volunteers can get connected to agencies and their volunteer opportunities online. The Volunteer Center coordinates volunteer opportunities for corporate teams, allowing them to help others as they

volunteers for 3,444 hours

engage in team building. The Volunteer Center also recruits volunteers to help support United Way initiatives such as Stuff the Bus, Read United and Days of Caring. Through the Volunteer Center, more than 2,500 volunteers provided 10,459 volunteer hours in our community in 2017. This included 90 corporate volunteer projects engaging 1,063.

efile GRAPHIC print - DO NOT PROCESS As Filed Data					As Filed Data -			DLN: 9:	LN: 93493114001158			
SCI	ΗED	ULE A		Public (	Charity Statu	e and Dul	olic Supp		OMB No 1545-0047			
	m 990		Con		ganization is a sect 4947(a)(1) nonexe Attach to Form 9	l l	2016					
•		the Treasury	► Inf	ormation abou	t Schedule A (Form			ıctions is at	Open to Public Inspection			
Nam	e of th	ne organiza f the Chattahoo						Employer identific	ation number			
INC	,							58-0572434				
Pal					<b>is</b> (All organization: it is (For lines 1 thro			See instructions.	_			
1 1	rganiz				sociation of churches			(A)(:)				
		•		,				(A)(I).				
2					1)(A)(ii). (Attach Sch	,	• • • • • • • • • • • • • • • • • • • •	:::>				
3		·	•	·	rice organization descr			•				
4	Ш	name, city,		nization operate	ed in conjunction with	a hospital descri	bed in section	1/0(b)(1)(A)(III). E	nter the hospital's			
5		_	ition operate [ <b>iv].</b> (Comple		of a college or univer	sity owned or op	perated by a gov	ernmental unit descri	bed in <b>section 170</b>			
6				•	governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	۸)(v).				
7	<b>✓</b>			mally receives a (vi). (Complete	a substantial part of it Part II )	s support from a	governmental u	unit or from the gener	al public described in			
8		A communi	ty trust desc	rıbed ın <b>section</b>	170(b)(1)(A)(vi)	(Complete Part I	I)					
9					scribed in <b>170(b)(1)</b> ee instructions Enter f				ege or university or a			
10		from activit	ies related to income and	o its exempt fund unrelated busine	(1) more than 331/3% ctions—subject to cert ess taxable income (le mplete Part III )	ain exceptions,	and (2) no more	than 331/3% of its su	,			
11		An organiza	ition organiz	ed and operated	exclusively to test for	r public safety S	ee section 509	(a)(4).				
12		more public	ly supported	organizations d	exclusively for the belescribed in <b>section 5</b> the type of supporting	<b>09(a)(1)</b> or sec	ction 509(a)(2	). See section 509(a	ne purposes of one or a)(3). Check the box			
a		<b>Type I.</b> A so	upporting or n(s) the pow	ganızatıon opera	ated, supervised, or co	ontrolled by its s	upported organi	zation(s), typically by				
b		manageme	nt of the sup		ervised or controlled in ation vested in the san and C.							
С					upporting organization				ted with, its			
d		Type III n functionally	on-function integrated	nally integrated The organization	i. A supporting organi generally must satisf t IV, Sections A and	zation operated fy a distribution i	in connection wi requirement and	th its supported organ	• •			
e		Check this	oox if the org	janization receiv	ed a written determin integrated supporting	ation from the II		pe I, Type II, Type II	I functionally			
f	Enter			organizations	mregrated supporting	organization						
g	Provid	de the follow	ıng ınformatı	on about the su	pported organization(	s)						
(i)N	ame of	f supported o	organization	(ii)EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv Is the organiz your governir	ation listed in	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
						Yes	No					
Tota		uaula De 1	A -2 A1 -	tice, see the In		Cat No 11285		Cabadula A / T	90 or 990-EZ) 2016			

17a 10%-facts-and-circumstances test—2016. 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

18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see

b 10%-facts-and-circumstances test—2015. 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

organization

instructions

supported organization

▶□

Schedule A (Form 990 or 990-EZ) 2016

20

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

	the organization rans to						
Se	ction A. Public Support		Г	1		1	
	Calendar year (or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	<b>(d)</b> 2015	(e)2016	(f)Total
	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						
5	to or expended on its behalf The value of services or facilities						
3	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						
	A						
D	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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6 )						
Se	ction B. Total Support						
	Calendar year				(d)2015	( ) > 0 ( )	407 L
		(a)2012	(b)2013	(c)2014	(u)2015	(e)2016	(f)lotal
•	(or fiscal year beginning in) ▶	(a)2012	<b>(b)</b> 2013	(c)2014	(4)2015	(e)2016	(f)Total
9	(or fiscal year beginning in) ► Amounts from line 6	(a)2012	<b>(b)</b> 2013	(c)2014	(4)2015	(e)2016	(f) lotal
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a)2012	<b>(b)</b> 2013	(c)2014	(4)2015	(e)2016	(f) lotal
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on	(a)2012	<b>(b)</b> 2013	(c)2014	(4)2015	(e)2016	(f) lotal
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest,	(a)2012	<b>(b)</b> 2013	(c)2014	(4)2015	(e)2016	(†)Total
	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(f) lotal
10a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(f) lotal
10a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30,	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(r) I otal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) I otal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) I otal
10a b	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets	(a)2012	(b)2013	(c)2014	(d)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	(a)2012	(b)2013	(c)2014	(u)2013	(e)2016	(r) lotal
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12)						
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c,						ganization,
10a b c 11	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12)						
10a  b  c 11  12  13  14	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo	r the organization	's first, second, th				ganization,
10a  b  c 11  12  13  14	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here	r the organization	's first, second, th	nird, fourth, or fift			ganization,
10a  b  c 11  12  13  14  See	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is fo check this box and stop here	r the organization  Support Perce e 8, column (f) d	's first, second, the second of the second o	nird, fourth, or fift		ection 501(c)(3) or	ganization,
10a b c 11 12 13 14 Se 15 16	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public sepublic support percentage from 2015 S	r the organization  Support Perce e 8, column (f) d  schedule A, Part I	's first, second, the second of the second o	nird, fourth, or fift		ection 501(c)(3) or	ganization,
10a b c 111 12 13 14 Se 15 16 Se	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public section D. Computation of Investor	r the organization  Support Perce ie 8, column (f) d  Schedule A, Part I:  ment Income	's first, second, the second by line 13, II, line 15  Percentage	nird, fourth, or fift	h tax year as a se	25 16	ganization,
10a b c 111 12 13 14 See 15 16 See 17	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization  Support Perce  e 8, column (f) d  ichedule A, Part I:  ment Income  16 (line 10c, column	's first, second, the second by line 13, II, line 15  Percentage mn (f) divided by	nird, fourth, or fift	h tax year as a se	15 16 17	ganization,
10a b c 11 12 13 14 Se 15 16 Se 17 18	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public services Public support percentage for 2016 (lin Public support percentage from 2015 Section D. Computation of Investi Investment income percentage from 2015 Investment income percentage from 2015 Investment income percentage from 2015	r the organization  Support Perce  10	i's first, second, the second by line 13, II, line 15  Percentage mn (f) divided by Part III, line 17	column (f))	h tax year as a se	15   16   17   18	ganization,
10a  b  c 111  12  13  14  See 17 18 19a	(or fiscal year beginning in) ► Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is fo check this box and stop here ction C. Computation of Public section D. Computation of Investi Investment income percentage for 2015	r the organization  Support Perce ie 8, column (f) di Schedule A, Part II  ment Income 16 (line 10c, colui  015 Schedule A, organization did r	a's first, second, the stage invided by line 13, II, line 15  Percentage in (f) divided by Part III, line 17 into check the box	column (f)) line 13, column (f	h tax year as a se	15 16 17 18 133 1/3%, and line	ganization, ▶ □

not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

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Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete

Schedule A (Form 990 or 990-EZ) 2016

Sections A and D, and complete Part V ) Section A. All Supporting Organizations Yes No

Page 4

10b

Schedule A (Form 990 or 990-EZ) 2016

Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 If "No," describe in Part VI how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain 1 Did the organization have any supported organization that does not have an IRS determination of status under section 509

(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)

below 3а Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination 3b

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 3с Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 12a or 12b in Part I, answer (b) and (c) below 4a

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 4b supervised by or in connection with its supported organizations 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 4c 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 5a amendment to the organizing document) Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document? 5b

Substitutions only. Was the substitution the result of an event beyond the organization's control? 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6 supported organizations, or (III) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI. 6

7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in

section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) 7

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," 8 complete Part I of Schedule L (Form 990 or 990-EZ)

8 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as

defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI. 9a

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

organization had an interest? If "Yes," provide detail in Part VI. 9b

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

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)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding 10a

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below 10a

Pa	art IV Supporting Organizations (continued)			
	Supporting Organizations (continued)		Yes	No
	Use the surrougher seconds of sufficient surface, then forms and of the fellowing surrough		165	NO
	Has the organization accepted a gift or contribution from any of the following persons?			
а	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?	11a		
b	A family member of a person described in (a) above?	11b		
С	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	11c		
S	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? If "No," describe in <b>Part VI</b> 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.			
,	Did the comment of the beautiful of the comment of the beautiful of the comment o	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting			
	organization	2		
S	Section C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)			
		1		
S	Section D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?			
		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard			
		3		
S	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 instruct	ions)		
	a  The organization satisfied the Activities Test Complete line 2 below			
	b			
	The organization supported a governmental entity Describe in <b>Part VI</b> how you supported a government entity (see	ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported organizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement	2b		
3	Parent of Supported Organizations Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in <b>Part VI</b> .	3a		
	<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its			
	supported organizations? If "Yes," describe in Part VI. the role played by the organization in this regard	3b		

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	<b>1</b> b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		

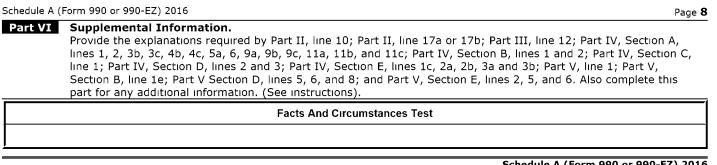
a Average monthly value of securities	1a	
<b>b</b> Average monthly cash balances	1b	
<b>c</b> Fair market value of other non-exempt-use assets	1c	
d Total (add lines 1a, 1b, and 1c)	1d	
<ul> <li>Discount claimed for blockage or other factors (explain in detail in Part VI)</li> </ul>		
2 Acquisition indebtedness 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	

Current Year **Section C - Distributable Amount** Adjusted net income for prior year (from Section A, line 8, Column A) 1 2 Enter 85% of line 1 3 Minimum asset amount for prior year (from Section B, line 8, Column A) Enter greater of line 2 or line 3 4

2 5 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency 6 temporary reduction (see instructions) Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) Schedule A (Form 990 or 990-F7) 2016

Schedule A (Form 990 or 990-EZ) (2016)

e Excess from 2016. . . .



efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D** 

As Filed Data -

DLN: 93493114001158

OMB No 1545-0047

**Supplemental Financial Statements** 

Open to Public

Department of the Treasury Internal Revenue Service

(Form 990)

▶ 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.

**Inspection** 

	me of the organization ted Way of the Chattahoochee Valley		Employer identification number
INC			58-0572434
Pa	Organizations Maintaining Donor Advised Funds or Oth Complete if the organization answered "Yes" on Form 990, Po		s or Accounts.
	(a) Donor advised fu	·	(b)Funds and other accounts
1	Total number at end of year	ands	(B)) and other accounts
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 funds are the organization's property, subject to the organization's exclusive		advised
6	Did the organization inform all grantees, donors, and donor advisors in writing used only for charitable purposes and not for the benefit of the donor or don conferring impermissible private benefit?		
Pa	rt II Conservation Easements. Complete if the organization and	swered "Yes" on Fo	orm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (check all the	at apply)	
	$\square$ Preservation of land for public use (e g , recreation or education)	Preservation of	an historically important land area
	Protection of natural habitat	Preservation of	a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualified conservation easement on the last day of the tax year	n contribution in the	form of a conservation  Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
c	Number of conservation easements on a certified historic structure included i	n (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17/06, ar structure listed in the National Register	nd not on a historic	2d
3	Number of conservation easements modified, transferred, released, extinguitax year ▶	shed, or terminated l	by the organization during the
4	Number of states where property subject to conservation easement is located	d <b>▶</b>	_
5	Does the organization have a written policy regarding the periodic monitoring and enforcement of the conservation easements it holds?	g, inspection, handlir	ng of violations,  Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of viol	ations, and enforcing	conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations  • \$	s, and enforcing cons	servation easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the rec	quirements of section	170(h)(4)(B)(ı)
	and section $170(h)(4)(B)(ii)$ ?		☐ Yes ☐ No
9	In Part XIII, describe how the organization reports conservation easements is balance sheet, and include, if applicable, the text of the footnote to the organization's accounting for conservation easements	n its revenue and ex nization's financial st	pense statement, and atements that describes
Par	<b>Organizations Maintaining Collections of Art, Historical</b> Complete if the organization answered "Yes" on Form 990, Po		ther Similar Assets.
1a	If the organization elected, as permitted under SFAS 116 (ASC 958), not to a art, historical treasures, or other similar assets held for public exhibition, edu provide, in Part XIII, the text of the footnote to its financial statements that	ication, or research i	n furtherance of public service,
b	If the organization elected, as permitted under SFAS 116 (ASC 958), to repo historical treasures, or other similar assets held for public exhibition, educati following amounts relating to these items	rt ın ıts revenue stat	ement and balance sheet works of art,
(	(i) Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
(1	ii)Assets ıncluded ın Form 990, Part X		<b>▶</b> \$
2	If the organization received or held works of art, historical treasures, or othe following amounts required to be reported under SFAS 116 (ASC 958) relating		nancial gain, provide the
а	Revenue included on Form 990, Part VIII, line 1		<b>&gt;</b> \$
b	Assets included in Form 990, Part X		<b>&gt;</b> \$
For	Paperwork Reduction Act Notice, see the Instructions for Form 990.	Cat N	lo 52283D Schedule D (Form 990) 2016

Par	t III	Organizations Ma	aintaining Col	lections of Art	, Histori	ical T	reası	ıres, or	Other	Similar A	ssets (	(continued)	
3		the organization's acq (check all that apply)	uisition, accessior	n, and other record	ds, check	any of	the fo	ollowing t	hat are a	significant	use of it	s collection	
а		Public exhibition			d		Loan	or excha	nge pro	grams			
b		Scholarly research			е		Othe	ır					
c	Preservation for future generations												
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII												
5		ig the year, did the orga is to be sold to raise fur								nılar	□ Y	es 🗆 l	No
Pa	rt IV	Escrow and Cust Complete if the org X, line 21.			orm 990	), Part	IV, lı	ine 9, or	reporte	ed an amo	unt on	Form 990,	Part
1a		e organization an agent ded on Form 990, Part )		an or other Interm	ediary for	- contri	bution	s or othe	r assets	not	□ <b>v</b>	es 🗆 l	No
Ь	If "Y∈	es," explain the arrange	ement in Part XIII	and complete the	following	table				-	mount	:	_
С	Begin	nning balance							1c				
d	Addıt	ions during the year							1d				
е	Dıstrı	butions during the year	r						1e				
f	Endın	ng balance							1f				_
2a	Did th	he organization include	an amount on Fo	rm 990, Part X, lır	ne 21, for	escrov	v or cu	ıstodıal a	ccount li	ability?	☐ <b>Y</b>	es 🔲	No
ь	If "Ye	es," explain the arrange	ment in Part XIII	Check here if the	explanat	ion has	s been	provided	in Part	XIII		<u> </u>	
Pa	rt V	Endowment Fund	<b>ds.</b> Complete ıf	the organization	n answei	red "Y							
	D			(a)Current year	(b)₽	rior yea	ır	(c)Two ye	ears back	(d)Three ye	ars back	(e)Four yea	ars back
	-	ing of year balance .											
		outions vestment earnings, gair	ns and losses										
		or scholarships	·										
	Other 6	expenditures for facilitie			+								
£	•	ograms Istrative expenses .											
		year balance					-						
_		•			(1 1	I		\\	_				
2		de the estimated percei d designated or quasi-e	•	ent year end balan	ice (line 1	g, colu	mn (a	)) neid a	5				
a		anent endowment >	ndownient P										
Ь		oorarily restricted endov	wment •										
С		percentages on lines 2a,		ld equal 100%									
3a		here endowment funds		•	zation tha	t are h	eld an	ıd admını	stered fo	r the			
	-	nization by									_	Yes	No
		nrelated organizations				•						Ba(i)	
Ь		elated organizations . es" on 3a(ii), are the rel		e listed as require	d on Sche	 Daluba					3	a(ii) 3b	<del>                                     </del>
4		ribe in Part XIII the inte	-	·				•	• •		· L	30	<u> </u>
Pa	rt VI	Land, Buildings,											
		Complete if the or			orm 990,	, Part	IV, lır	ne 11a.	See For	m 990, Pa	rt X, lır	ne 10.	
	Descri	iption of property	(a) Cost or oth (Investme		ost or other	basis (d	other)	(c)Accı	ımulated o	depreciation		(d)Book valu	ie
1a	Land					;	30,925						30,925
	Buildin					7:	33,655			432,554			301,101
c	Leaseh	old improvements											
d	Equipm	nent				1	44,641			116,851			27,790
e	Other						18,474			18,009			465
Tota	I. Add	lines 1a through 1e (Co	olumn (d) must ed	qual Form 990, Pa	rt X, colui	mn (B)	, line .	10(c)) .		<b>&gt;</b>			360,281

Part VII		anization ans	swered 'Yes' on Fo	rm 990, Part IV, line IID.
	See Form 990, Part X, line 12.  (a) Description of security or category (including name of security)	(b)Bool value		:)Method of valuation r end-of-year market value
	derivatives			
(3)Other (A)		_		
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	n (b) must equal Form 990, Part X, col (B) line 12 )	<b>•</b>		
Part VIII	Investments—Program Related. Complete if the or	ganization ar	nswered 'Yes' on F	Form 990, Part IV, line 11c.
	See Form 990, Part X, line 13.  (a) Description of investment	(b) Book value		) Method of valuation
(1)			Cost o	r end-of-year market value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
Total. (Colum	n (b) must equal Form 990, Part X, col (B) line 13 )			
Part IX	Other Assets. Complete if the organization answered 'Yes' of (a) Description	on Form 990, P	Part IV, line 11d See	Form 990, Part X, line 15 (b) Book value
(1)	(a) Description			(b) book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
		ed 'Yes' on F	orm 990, Part IV,	▶ Inne 11e or 11f.
1.	See Form 990, Part X, line 25.  (a) Description of liability	(b)	Book value	
(1) Federal ı	ncome taxes			
(2)				
(3)				
(4)				
(5)				
(6)		I	ı	
(7)				
(6) (7) (8) (9)				
(7) (8) (9)	n (b) must equal Form 990, Part X, col (B) line 25 )	<b>•</b>		

2c c Recoveries of prior year grants . . . Other (Describe in Part XIII ) . . 2d

d е Add lines 2a through 2d . . . . 2e 3 Subtract line 2e from line 1 . 3

4 Amounts included on Form 990, Part VIII, line 12, but not on line 1

Investment expenses not included on Form 990, Part VIII, line 7b. b

Total expenses and losses per audited financial statements .

Donated services and use of facilities .

Prior year adjustments . . .

Other (Describe in Part XIII ) . Add lines 2a through 2d .

Subtract line 2e from line 1 .

Add lines 4a and 4b .

Return Reference

See Additional Data Table

Other losses .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Other (Describe in Part XIII ) . . . . .

Supplemental Information

Schedule D (Form 990) 2016

Part XI

5

1

2

а b

d

е 3

а

b

c

Part XIII

5

4

Part XII

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) . . . . . . . . . . .

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

Other (Describe in Part XIII ) . . . . . . Add lines 4a and 4b . . .

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

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

4a 4b Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) . . . . . . . .

2a

2b

2c 2d

4b

Explanation

4c

132,846

32.577

2e

3

4c

5

Page 4

207,715

6,813,820

6,813,820

6,943,712

132,846

32,577

6,843,443

Schedule D (Form 990) 2015

6.810.866

	Schedule D (Form 990) 2015			
Supplemental Information (continued)	Part XIII Supplemental Info			
Return Reference Explanation	Return Reference			

Schedule D (Form 990) 2016

### **Additional Data**

Software ID: Software Version:

**EIN:** 58-0572434

Name: United Way of the Chattahoochee Valley INC

Supplemental Information

Return Reference	Explanation
Part X, Line 2	GAAP requires recognition of a liability for the benefit resulting from any uncertain tax positions taken by the Organization. The tax returns of the Organization are subject to ex amination by Federal and State taxing authorities under standard statute of limitation per lods. There are currently no audits for any tax periods in progress. Based on evaluation of the Organization's tax positions, management believes all positions would be upheld under an examination. Therefore, no provision for the effect of uncertain tax positions has been recorded for the year ended June 30, 2017.

ipplemental Information								
Return Reference	Explanation							
Part XII, Line 4b - Other Adjustments	DIFFERENCE IN GRANTS PAID VS ACCRUED IN CY 32,577							

s

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493114001158 OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations,** (Form 990) **2016** Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer Identification number** United Way of the Chattahoochee Valley 58-0572434 INC Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant ıf applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance other) or government assistance See Additional Data Table (1)(2)(3)(4)(6)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . . 27 

Cat No 50055P

Schedule I (Form 990) 2016

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

Schedule I (Form 990) 2016	ۈ					Page <b>2</b>			
		Domestic Individu		anization answered "Yes"	" on Form 990, Part IV, line 22				
(a) Type of grant or	<u> </u>	(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)									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
Part IV Suppleme	ental Informati	on. Provide the in	formation required in	Part I, line 2, Part III	, column (b), and any other a	ıddıtıonal ınformatıon.			
Return Reference	Explanation	on							
Part I, Line 2	nearly 70 vi agencies to need, achie	Nine Community Investment volunteer teams evaluate requests for funding to determine how to invest the dollars raised. During the Community Investment process, nearly 70 volunteers comprise the nine teams to evaluate requests for funding during the six-week process. The volunteers reviewe detailed program applications, visit agencies to see the programs in action, and hear from clients and agency representatives. Volunteers reviewe each program in terms of how it meets a community need, achieves results and exercises good stewardship. All programs must serve the local community within one of the four core areas of United Way Basic Needs, Income, Health or Education. In addition, the financial position of each agency is reviewed by a group of volunteers who have vast experience in accounting and							

financial management

Schedule I (Form 990) 2016

### **Additional Data**

AMERICAN RED CROSS W

CENTRAL GEORGIA

3940 ROSEMONT DR COLUMBUS, GA 31904

Software ID: Software Version: EIN:

53-0196605

**EIN:** 58-0572434 **ame:** United Way of

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

501C3

Name: United Way of the Chattahoochee Valley INC

SUPPORT OF DONEE

PROGRAMS

(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
AMERICAN RED CROSS EAST ALABAMA 1208 8TH AVE PHENIX CITY, AL 36867	53-0196605	501C3	24,500				SUPPORT OF DONEE PROGRAMS

220,500

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1174393 501C3 462.330 SUPPORT OF DONEE BOYS AND GIRLS CLUB OF THE CHATTAHOOCHEE VALLEY PROGRAMS

1700 BUENA VISTA ROAD COLUMBUS. GA 31906 58-0601576 501C3 210.000 CHATTAHOOCHEE COUNCIL

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

COLUMBUS, GA 31901

SUPPORT OF DONEE BOY SCOUTS OF AMERICA PROGRAMS 1237 1ST AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 63-0985199 501C3 107.450 SUPPORT OF DONEE CRISIS CENTER OF RUSSELL COUNTY PROGRAMS 808 8TH STREET PHENIX CITY, AL 36867 EASTER SEALS OF WEST 58-1919206 501C3 569.000 SUPPORT OF DONEE

PROGRAMS

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

GEORGIA INC

PO BOX 1690 FORTSON, GA 31808

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 58-0828094 501C3 514.000 FAMILY CENTER OF COLUMBUS SUPPORT OF DONEE INC PROGRAMS

PROGRAMS

PO BOX 1825 COLUMBUS, GA 31902 58-1498131 501C3 350.000 SUPPORT OF DONES

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

FFEDING THE VALLEY INC. 5928 COCA COLA BLVD

COLUMBUS, GA 31909

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-2489181 501C3 10.000 SUPPORT OF DONEE FERST FOUNDATION FOR PROGRAMS

PROGRAMS

CHILDHOOD LITERACY po box 1327 Madison, GA 30650 GIRL SCOUTS OF HISTORIC 58-0566191 501C3 198.000 SUPPORT OF DONEE

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

GEORGIA 1344 13TH AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-6011441 501C3 458.540 SUPPORT OF DONEE GIRLS INC OF COLUMBUS AND I PROGRAMS

PROGRAMS

PHENIX CITYRUSSELL CO PO BOX 4040 COLUMBUS. GA 31914 HOMELESS RESOURCE 58-2147861 501C3 111.414 SUPPORT OF DONEE

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

NETWORK

PO BOX 811

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1399257 501C3 180.000 SUPPORT OF DONEE HOPE HARBOUR (COLUMBUS ALLIANCE FOR BATTERED PROGRAMS

WOMEN)
PO BOX 4182
COLUMBUS, GA 31914

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

COLUMBUS, GA 31906

COLUMBUS, GA 31914

HOUSE OF TIME INC 58-1995951 501C3 148,000 SUPPORT OF DONEE 1200 WYNNTON ROAD PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 501C3 10.000 MERCYMED OF COLUMBUS 27-5011913 SUPPORT OF DONEE po box 1491 PROGRAMS

| PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS | PROGRAMS

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 58-2352811 501C3 104.500 RUSSELL COUNTY CHILD SUPPORT OF DONEE ADVOCACY CENTER INC PROGRAMS 67 DOWNING STREET

SUPPORT OF DONES

PROGRAMS

83.000

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

501C3

PHENIX CITY, AL 36869
SAFEHOUSE MINISTRIES

2101 HAMILTON ROAD

COLUMBUS, GA 31904

26-4503737

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization ıf applicable grant cash non-cash assistance or assistance other) or government assistance 58-0660607 501C3 210.000 SALVATION ARMY SUPPORT OF DONEE PO BOX 1378 PROGRAMS

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance ORT OF DONEE RAMS

SUPPORT OF DONEE

PROGRAMS

TEEN ADVISORS INC 1316 WILDWOOD AVE COLUMBUS, GA 31906	58-2108493	501C3	99,000		SUPPOF PROGRA
TEARS	72-1357665	501C3	27,000		SUPPOR

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

1011 SOUTH RAILROAD ST

PHENIX CITY, AL 36867

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government other) assistance 58-1413499 501C3 144.976 SUPPORT OF DONEE TWIN CEDARS YOUTH AND FAMILY SERVICES INC PROGRAMS

18 9TH STREET SUITE 104
COLUMBUS, GA 31901

YMCA OF METROPOLITAN 58-0648697 501C3 292,000

SUPPORT OF DONEE PROGRAMS

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

4384 WARM SPRINGS ROAD COLUMBUS, GA 31909

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 58-6003031 501C3 65.000 COLUMBUS COMMUNITY SUPPORT OF DONEE PROGRAMS

SUPPORT OF DONES

PROGRAMS

CENTER 3952 STEAM MILL ROAD COLUMBUS, GA 31907

30.000

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

501C3

SAFE KIDS COLUMBUS 58-1936575 2100 COMER AVE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (c) IRC section (d) Amount of cash (e) Amount of non- (f) Method of valuation (a) Description of (h) Purpose of grant (b) EIN organization ıf applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 10.000 URBAN LEAGUE OF GREATER 58-1123741 Support of donee COLUMBUS INC programs 802 1ST AVENUE

DLN: 93493114001158 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) 2016 ▶ 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 Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number United Way of the Chattahoochee Valley 58-0572434 Types of Property Part I (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining noncash contribution amounts applicable items contributed amounts reported on Form 990, Part VIII, line Art—Works of art . . 2 Art—Historical treasures Art—Fractional interests Books and publications Clothing and household goods . . . . Cars and other vehicles Boats and planes . 8 Intellectual property Securities—Publicly traded . Χ 809,666 FMV ON DATE OF DONATION 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures . . . . 14 Qualified conservation contribution—Other . Real estate—Residential . 16 Real estate—Commercial . 17 Real estate—Other . . 18 Collectibles . . Food inventory . . . 19 20 Drugs and medical supplies 21 Taxidermy . . . 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . Other ▶ ( \_\_\_\_\_\_ **26** Other ▶ ( \_\_\_ Other ▶ ( \_\_\_\_\_ 27 Other ► ( \_\_\_ 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 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 Nο 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? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a contributions? . . . . . . . . Nο **b** If "Yes," describe in Part II 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 Schedule M (Form 990) (2016) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2016)	Page <b>2</b>
I, column (b), t	I <b>Information.</b> Description required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part the number of contributions, the number of items received, or a combination of both. Also complete by additional information.
Return Reference	Explanation
Part I, Column (b)	THERE WERE 28 CONTRIBUTIONS OF STOCK DURING THE YEAR
Part I, Line 32b	THE ORGANIZATION HAS A WRITTEN GIFT ACCEPTANCE POLICY THAT GOVERNS THE ACCEPTANCE OF ALL GIFTS RECEIVED BY THE ORGANIZATION AND PROVIDES GUIDANCE TO PROSPECTIVE DONORS AND THEIR ADVISORS THE POLICY OUTLINES TYPES OF ACCEPTABLE GIFTS, RESTRICTIONS ON GIFTS, CRITERIA FOR ACCEPTANCE OF CERTAIN TYPES OF GIFTS, USE OF LEGAL COUNSEL, IRS FILINGS, VALUATION, RECOGNITON, AND DONOR REPORTING THE BOARD OF DIRECTORS SERVES AS THE GIFT ACCEPTANCE COMMITTEE AND MUST APPROVE ANY CHANGES TO THESE POLICIES GENERALLY, ANY SECURITIES RECEIVED by the Organization ARE SOLD IMMEDIATELY BY A THIRD-PARTY BROKER
_	Schedule M (Form 990) (2016)

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SCHEDUL (Form 990 or EZ)	99()-  Complete to provide information for responses to specific quipers form 990 or 990-EZ or to provide any additional information form 990 or 990-EZ.	estions on tion.	OMB No 1545-0047  2016 Open to Public			
Department of the T	, www.iis.uov/ioiiisso.	tructions is at	Inspection			
INC	anization Chattahoochee Valley e O, Supplemental Information	Employer identi	fication number			
Return Reference	Explanation					
Form 990, Part VI, Section B, line 11b	The Board of Directors is responsible for review and approval of the IRS Form 990 before f iling. The Finance and Audit Committee, chaired by the Treasurer of the Executive Committe e of the Board, will review and discuss the audit and Form 990. The Treasurer will present to the full Board of Directors, after they have adequate time to review the documents. Af ter review they will approve submission of the Form 990 to the IRS. The composition of the Board of Directors ensures that they are individuals familiar with the organization and the process and are qualified to accept responsibility for the preparation of the Form 990.					

Return Explanation
Reference

990 Schedule O, Supplemental Information

line 12c

Form 990,
Part VI,
Section B.

Board members are required to complete an annual conflict of interest statement. Community
Investment committee and staff complete the same form

Return Explanation
Reference

990 Schedule O, Supplemental Information

Form 990,
Part VI,
Section B,
Inne 15a

The Executive Committee reviews the performance of management and determines salary and an y adjustments that are necessary on an annual basis. The Committee uses a documented Compe nsation Plan that was developed by an independent third party in making its evaluation of compensation levels.

990 Schedule O, Supplemental Information Return Explanation Reference Form 990. Upon request Part VI,

Section C, line 19

990 Schedule O, Supplemental Information Explanation Return Reference

Form 990,
Part XI, line

DIFFERENCE IN GRANTS ACCRUED VS PAID IN CY 32,577

Return Explanation
Reference

990 Schedule O, Supplemental Information

Reference	
Form 990,	The Organization has not changed its selection and oversight process from the prior year
Part XII, Line	