efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

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

Open to Public

DLN: 93493134058151 OMB No. 1545-0047

Form **990**

Department of the

Treasu	•	enue Servic	e do to <u>www.ms.gov</u> /	Tormsso ioi macraetiona and th	e latest iii	normation.		Inspection	
			्। calendar year, or tax year beginni	ng 01-01-2020 , and ending 12	-31-2020				
B Che	ck if a	applicable:	C Name of organization UNITED WAY OF GREATER ST JOSEPH	-		D Employe	er identifi	cation number	
		change	UNITED WAT OF GREATER ST JOSEPH			44-0547	7802		
□ Na		hange	Doing business as						
		rn/terminate	d						
		d return	DO BOV 199	is not delivered to street address) Room,	suite	E Telephon	e number		
□Ар	plicati	ion pendin	9			(816) 3	64-2381		
			City or town, state or province, country ST JOSEPH, MO 64502	, and ZIP or foreign postal code					
			E Name and address of animain day	CC:	T	G Gross re		962,581 	
			F Name and address of principal o	micer:		Is this a group ret	turn for		
			PO BOX 188			subordinates? Are all subordinat	es	□Yes ☑No	
T Ta	x-exe	mpt status	ST JOSEPH, MO 64502		┨ `´	included?		☐ Yes ☐No	
			☑ 501(c)(3) ☐ 501(c)() ◄ (ins	ert no.)	I	If "No," attach a l Group exemption	•	•	
J W	ebsi	te:► W	WW.STJOSEPHUNITEDWAY.ORG		11(0)	Group exemption	number	•	
K Form	n of o	organizatio	n: 🗹 Corporation 🔲 Trust 🔲 Associa	tion Other •	L Year o	f formation: 1916		of legal domicile:	
1 011	11 01 0	organization	1. El corporation El Trust El Associa	Content P			МО		
Pa	art I		nmary						
			escribe the organization's mission or n OVE LIVES THROUGH THE CARING PC						
Ce	:	10 111110	ove erves mixoodii me cantino i	WERE OF COMMONTOR.					
nar Tar									
Xe.	`	Chook ti	nis box 🕨 🗌 if the organization disco	ntinued its operations or disposed of	i mara than	2E% of its not a	sasta		
Governance			of voting members of the governing l				3	29	
	4	Number	of independent voting members of th		4	29			
tes	5	Total nu	mber of individuals employed in caler		5	9			
Activities &	6	Total nu	mber of volunteers (estimate if neces	sary)			6	634	
¥	7a	Total un	related business revenue from Part VI	II, column (C), line 12			7a	0	
	b	Net unre	elated business taxable income from F	orm 990-T, line 39	<u> </u>		7b	0	
						Prior Year		Current Year	
3;	l		itions and grants (Part VIII, line 1h)			3,263,0		2,430,855	
Ravenue	1	-	service revenue (Part VIII, line 2g)		54,3		67,797 435,686		
ç	l		ent income (Part VIII, column (A), line		332,250 41,420				
	l		evenue (Part VIII, column (A), lines 5, venue—add lines 8 through 11 (must	•		3,691,1		·	
	-		and similar amounts paid (Part IX, colu	, , ,		2,167,8		1,720,664	
	l		paid to or for members (Part IX, colu	, ,,		2,107,0	0	1,720,00	
S	l		, other compensation, employee bene	, ,,		452,1	147	411,120	
Expenses	l		ional fundraising fees (Part IX, column	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			0	(
ъс	Ι.		draising expenses (Part IX, column (D), line						
Щ	17	Other ex	xpenses (Part IX, column (A), lines 11	a-11d, 11f-24e)	-	327,6	546	273,756	
	18	Total ex	penses. Add lines 13–17 (must equal	Part IX, column (A), line 25)		2,947,6	517	2,405,540	
	19	Revenue	e less expenses. Subtract line 18 from	line 12		743,4	197	565,428	
ces ces					Begi	nning of Current Y	ear	End of Year	
Net Assets or Fund Balances	30	Total	cots (Part V. line 15)		<u> </u>	12 200 7	770	12 002 025	
Ass HB:	l		sets (Part X, line 16) bilities (Part X, line 26)			13,288,7 2,067,2		13,993,835	
Z E	l		ets or fund balances. Subtract line 21			11,221,4		12,336,932	
	rt II		nature Block			11,221,	.55	12,330,332	
			perjury, I declare that I have examine	d this return, including accompanyii	ng schedule	es and statements	s, and to	the best of my	
know any k			ef, it is true, correct, and complete. D	eclaration of preparer (other than o	fficer) is ba	sed on all informa	ation of v	which preparer has	
ally K	HOW	euge.							
		****	**			2021-05-14			
Sign		y signa	ture of officer			Date			
Here	;		GOULD TREASURER or print name and title						
			<u> </u>	Preparer's signature	Date		PTIN		
Paid	4		Timy Type preparer 3 figure	reparer a arguature	2021-05-06	5 Check 🗀 if F	201248589)	
Pre		er	Firm's name CLIFTONLARSONALLEN LL	P	<u> </u>	self-employed Firm's EIN ► 41-	0746749		
Use			Firm's address ▶ 801 FELIX STREET			Phone no. (816) 2	22.0444		

ST JOSEPH, MO 64501

May the IRS discuss this return with the preparer shown above? (see instructions)

Firm's address ► 801 FELIX STREET

Phone no. (816) 232-8441

☑ Yes ☐ No

Form	990 (2020)					Page 2								
Pa	rt III Statement	of Program Service	e Accomplis	hments										
	Check if Sche	dule O contains a respo	onse or note to a	any line in this Part III .		🗸								
1	Briefly describe the o	organization's mission:		•										
THE	MISSION OF THE UNIT	TED WAY OF GREATER S	ST. JOSEPH IS 1	O IMPROVE LIVES THR	OUGH THE CARING POWER OF COM	MMUNITY.								
2	Did the organization	Did the organization undertake any significant program services during the year which were not listed on												
	the prior Form 990 o	or 990-EZ?				🗌 Yes 🛛 No								
	If "Yes," describe the	ese new services on Sch	nedule O.											
3	Did the organization cease conducting, or make significant changes in how it conducts, any program													
	services?	☐ Yes ☑ No												
	If "Yes," describe these changes on Schedule O.													
4	Section 501(c)(3) ar		ons are required	to report the amount o	largest program services, as meast f grants and allocations to others, t									
4a	(Code:) (Expenses \$	1,742,559	including grants of \$	1,706,437) (Revenue \$	18,694)								
	See Additional Data													
4b	(Code:) (Expenses \$	253,143	including grants of \$	14,227) (Revenue \$	49,103)								
	See Additional Data													
4c	(Code:) (Expenses \$	94,854	including grants of \$) (Revenue \$)								
	See Additional Data													
	(Code:) (Expenses \$	94,106	including grants of \$) (Revenue \$)								
	AN ACTIVE COMMUNICA	ATIONS EFFORT. UNITED W	AY LETS DONORS	AND THE GENERAL PUBLIC	RAM ACHIEVEMENTS AND SUSTAINING T KNOW ABOUT THE ORGANIZATION'S AC VIDEO PRODUCTIONS, MEDIA OUTREAC	CCOMPLISHMENTS								
4d	Other program servi	ces (Describe in Schedu	ule O.)											
	(Expenses \$	94,106 incl	uding grants of	\$) (Revenue \$)								
46	Total program serv	vice expenses >	2.184.6	62										

Νo

Nο

Nο

Nο

Nο

16

17

18

19

20a

20b

21

Yes

Form **990** (2020)

Par	Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 😼	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4		No
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D,Part \$\frac{\text{Part}}{2}\$	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X "	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX. column (A), line 3. more than \$5,000 of aggregate grants or other assistance to			

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

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,"

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

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

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

17

18

19

Form	990 (2020)			Page 4					
Par	Checklist of Required Schedules (continued)								
			Yes	No					
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes						
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No					
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No					
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b							
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c							
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d							
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No					
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No					
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No					
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No					
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):								
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No					
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No					
C	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No					
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M \ref{Matter}	29	Yes						
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No					
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No No					
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No					
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		No					
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No					
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No					
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b							
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No					
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No					
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes						
Part V Statements Regarding Other IRS Filings and Tax Compliance									
	Check if Schedule O contains a response or note to any line in this Part V	· ;		<u> </u>					
1 -	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 7		Yes	No					
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable								
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming								
-	(gambling) winnings to prize winners?	1c							

Pai	Statements Regarding Other IRS Filings and Tax Compliance (continued)							
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	9						
h	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		Yes					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	F						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		No				
	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, financial account in a foreign country (such as a bank account, securities account, or other financial account)?	a 4a		No				
b	If "Yes," enter the name of the foreign country: ▶							
F-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No No				
эа b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5b 5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization	6a		No No				
Oa	solicit any contributions that were not tax deductible as charitable contributions?							
b	b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?							
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service provided to the payor?	ces 7a		No				
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to fill Form 8282?	e 7c		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				
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as							
L	required?	7g						
п	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						
9	Sponsoring organizations maintaining donor advised funds.							
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter:							
	Initiation fees and capital contributions included on Part VIII, line 12 10a	_						
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	_						
11 a	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	\dashv						
	against amounts due or received from them.)	_						
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans							
c	Enter the amount of reserves on hand							
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or exces parachute payment(s) during the year?	15		No				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? . $$ If "Yes," complete Form 4720, Schedule O.	16		No				

orm	990 (2020)			Page 6
Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "Na 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	o" respo	onse to i	lines
Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 29	-		
	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 29	,		
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	Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8	$ \label{lem:poisson} Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: $			
а	The governing body?	8 a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8 b	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenu	e Code		
	The state of the s		Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a 10b		No
	and branches to ensure their operations are consistent with the organization's exempt purposes?	100		
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
	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	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
	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?	166		
Ç.	ction C. Disclosure	16b		
<u> </u>	List the states with which a copy of this Form 990 is required to be filed▶			
L8	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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: •KYLEE STROUGH 118 S 5TH ST ST JOSEPH, MO 64501 (816) 364-2381			
			orm 90	n (2020)

(A)

Name and title

Part VII

(F)

Estimated

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

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount

of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See instructions for definition of "key employee." • List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee)

who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000

of reportable compensation from the organization and any related organizations.

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

(C)

Position (do not check more

(D)

Reportable

(E)

Reportable

See instructions for the order in which to list the persons above. Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(B)

Average

hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation director/trustee) any hours organization organizations from the for related (W-2/1099-(W-2/1099organization and Individual trustee or director Highest compensatemployee Former organizations MISC) MISC) related Institutional Trustee below dotted organizations employee line) Ē See Additional Data Table

compensation from the organization \blacktriangleright 0

Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) Estimated

Page 8

	(A) Name and title	Average hours per week (list any hours for related for related for related hours per week (list any hours for related for rela									l s	(F) Estima amount o compens from t	ted f other sation :he	
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		2/1099- ISC)	(W-2/1099- MISC)		organizati relate organiza	ed
See	Additional Data Table													
												_		
												+		
												\perp		
												_		
												+		
c	Sub-Total	art VII, Section	Α.			•	>			102,173		0		13,310
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos			bove	e) who	rece	eived mo	re than \$	100,000			
	<u> </u>												Yes	No
3	Did the organization list any former line 1a? <i>If "Yes," complete Schedule 3</i>			ee, k •	еу е •	mplo •	oyee, d	or hi	ghest co	mpensate	d employee on	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual.										No			
5	Did any person listed on line 1a receiv services rendered to the organization		•						_	tion or inc	lividual for	5		No
S	ection B. Independent Contract													
1	Complete this table for your five high from the organization. Report compe											mpens	sation 	
	Name a	(A) and business addre	ess							Des	(B) cription of services		(C) Compen	

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

14			(2020)	of E	Povonuo						Page 9
Total (Revenue 19 Company 10	Part	VIII				respo	nse or note to anv	line in this Part VIII			🗆
Description								(A)	(B) Related or exempt function	Unrelated business	(D) Revenue excluded from tax under sections 512 - 514
10	v	1 a	Federated campai	gns	1	.a			revenue		312 314
10	ante	b	Membership dues	•	. 1	.b					
10	S E	С	Fundraising events	s .	. 1	lc					
2a LECESSI P-PACGRAYS 33,971 34,975 34,9	ifts,		_			.d					
20 LAUDERS' PROCROMS 611 15,000 38,924 38,925 15,000 15,	s. G imil	_			· <u>L</u>	.е					
20 LAUDERS' PROCROMS 611 15,000 38,924 38,925 15,000 15,	tion er S	Т	and similar amounts	not ir	schidod	Lf	2,430,855				
20 LAUDERS' PROCROMS 611 15,000 38,924 38,925 15,000 15,	ibu Sthe	g	Noncash contribution	s incl							
20 LAUDERS' PROCROMS 611 15,000 38,924 38,925 15,000 15,	ont nd (h		a-1f							
2a LEADBIGH PROGRAMS	<u>U 8</u>		Totali / Ida III les 1			•		2,430,855	1		1
Description		2a	LEADERSHIP PROGRA	AMS				38,921	38,921		
## All other program service revenue. 9 Total. Add lines 11a-11d 17 Total revenue 1 Total Add lines 11a-11d 17 Total. Add lines 11a-11d 17 Total revenue 1 Total. Add lines 11a-11d 17 Total revenue. See instructions 1 Total. Add lines 11a-11d 17 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 To	He He						011430	18 604	18 604		
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7 Total. Add lines 23-27.	9. P.						611710	8,248	8,248		
## All other program service revenue. 9 Total. Add lines 11a-11d 17 Total revenue 1 Total Add lines 11a-11d 17 Total. Add lines 11a-11d 17 Total revenue 1 Total. Add lines 11a-11d 17 Total revenue. See instructions 1 Total. Add lines 11a-11d 17 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 To	ervić						624400	1,694	1,694		
## All other program service revenue. 9 Total. Add lines 11a-11d 17 Total revenue 1 Total Add lines 11a-11d 17 Total. Add lines 11a-11d 17 Total revenue 1 Total. Add lines 11a-11d 17 Total revenue. See instructions 1 Total. Add lines 11a-11d 17 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 Total revenue. See instructions 1 Total. Add lines 11a-11d 1 To	S L		-				624100	240	240		
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3 Treatment income (including dividends, interest, and other similar amounts) 183,568 183,568	Ř	ء	All able to the second								
3 Investment income (including dividends, interest, and other similar amounts). 4 Income from investment of tax-exempt bond proceeds 5 Royalties. (i) Real (ii) Personal 6a Gross rents 6a 36,300 b Less: rental exempts 6b 0 c Rental income or (loss) d Net rental income or (loss) 7a Gross amount from sales of than inventory b Less cost or other basis and sales expenses c Oain or (loss) 7 b 3,891,613 sales expenses c Oain or (loss) 7 c 252,118 d Net gain or (loss) a Gross income from fundratising events (not including s combibutions reported on line 1c). See Part IV, line 19 b Less: circct expenses . Bb b Less: circct expenses . Bb c Net income or (loss) from gaming activities. See Part IV, line 19 10 Gross sales of inventory, less returns and allowances . 10a b Less: cost of goods sold . 10b C Net income or (loss) from sales of inventory . Miscellaneous Revenue Business Code 11a OTHER INCOME Business Code 11a OTHER INCOME Business See instructions .							67 797				
Similar amounts).		⊢						1			
S Royalties (i) Real (ii) Personal		5	similar amounts) .	•			>	· ·	3		183,568
(i) Real (ii) Personal						npt bo	•	-			
Description Company			,								
Description Company		62	Gross rents	6a		36 300		1			
C Rental income or (loss) d Net rental income or or (loss) (i) Securities (ii) Other 7a Gross amount from seles or assets other than income or (loss) 1.						30,300		+			
or (loss) 6c 36,300 38,300 38,300 38,300 4 Net rental income or (loss) 38,300				6b		0		_			
Ta Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7b 3,991,613 3a Gross income from fundraising events (not including s of contributions reported on line 1c). See Part IV, line 13		C		6c	;	36,300					
Ta Gross smouth from side of the street of the side of the street of the side of the street of the s		۰	Net rental income	e or (36,300)		36,300
from sales of assets other than inventory b Less: cott or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 7c 252,118 d Net gain or (loss) See Part IV, line 18 c Net income or (loss) from fundralising events c Net income or (loss) from gaming activities See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities See Part IV, line 19 c Net income or (loss) from gaming activities See Part IV, line 19 c Net income or (loss) from gaming activities see Part IV, line 19 c Net income or (loss) from gaming activities lioa b Less: cost of goods sold lib c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11aOTHER INCOME d All other revenue e Total, Add lines 11a-11d 12 Total revenue, See instructions			Cross amount		(i) Securit	ies	(ii) Other	4			
than inventory b Less: cost or other basis and sales expenses c Gain or (loss) 7c 252,118 d Net gain or (loss)		/ a	from sales of	7a	4,243,731						
other basis and sales expenses c Gain or (loss) d Net gain or (loss) Sa Gross income from fundraising events (not including s of contributions reported on line 1c). See Part IV, line 18			than inventory					_			
To Gain or (loss) C Gain or (loss) D C Segret IV, line 18		b	other basis and	7b	3,99	91,613					
The state of the s			sales expenses					-			
8a Gross income from fundraising events (not including s of contributions reported on line 1c). See Part IV, line 18 · · · 8a b Less: direct expenses · . 8b contributions reported on line 1c). See Part IV, line 18 · · · · 8a b Less: direct expenses · . 8b contributions reported on line 1c). See Part IV, line 19 · · · · 9a Gross income from gaming activities. See Part IV, line 19 · · · 9a b Less: direct expenses · . 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · 9a b Less: direct expenses · · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · · 9a b Less: direct expenses · · · · · · 9b contributions reported on line 1c). See Part IV, line 19 · · · · · 9a b Less: direct expenses · · · · · · · · · · · · · · · · · ·				\Box				252 118	3		252,118
(not including s of contributions reported on line 1c). See Part IV, line 18							•	232,110	, 		252,110
Gross income from gaming activities. See Part IV, line 19	ıμe		(not including \$ of								
Gross income from gaming activities. See Part IV, line 19	₹ •					8a					
Gross income from gaming activities. See Part IV, line 19	Ϋ́	ı	•								
Gross income from gaming activities. See Part IV, line 19	the	٩	: Net income or (los	ss) fr	om fundraisii	ng eve	ents >	1			
b Less: direct expenses 9b		9a									
c Net income or (loss) from gaming activities		١,				\vdash		_			
10aGross sales of inventory, less returns and allowances		l	· ·				es .	J			
returns and allowances 10a b Less: cost of goods sold 10b c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11aOTHER INCOME 900099 b c d All other revenue e Total. Add lines 11a-11d			-								
b Less: cost of goods sold		10:	aGross sales of inve returns and allowa	ento: ances	ry, less	10a					
Miscellaneous Revenue Business Code 11aOTHER INCOME 900099 330 b C d All other revenue		Ŀ	Less: cost of good	ls sol	ld	10b		1			
11a _{OTHER INCOME} 900099 330 c d All other revenue		٠				nvent					
d All other revenue e Total. Add lines 11a-11d		11		us R	evenue			9 330			330
d All other revenue e Total. Add lines 11a–11d			OTHER INCOME				50005.				
d All other revenue e Total. Add lines 11a–11d		l E	·								
d All other revenue e Total. Add lines 11a–11d											
e Total. Add lines 11a-11d						ł					
e Total. Add lines 11a-11d								<u> </u>	<u> </u>	<u>L_</u> _	
12 Total revenue. See instructions		ı									
							•	330)		
		12	2 Total revenue. S	ee ir	nstructions .	•	• • • •	2,970,968	67,79	,	0 472,316

Р	art IX Statement of Functional Expenses		All		(4)
	Section 501(c)(3) and 501(c)(4) organizations must c		=	ns must complete colu	mn (A). □
	Check if Schedule O contains a response or note to an not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	1,604,151	1,604,151	general expenses	ехрепзез
2	Grants and other assistance to domestic individuals. See Part IV, line 22	116,513	116,513		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	115,482	72,754	41,573	1,155
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	229,294	151,505	75,486	2,303
8	Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	9,977	6,358	3,513	106
9	Other employee benefits	31,440	21,018	10,115	307
10	Payroll taxes	24,927	15,780	8,884	263
11	Fees for services (non-employees):				
	a Management				
ı	b Legal				
	c Accounting	21,425	13,454	7,741	230
	d Lobbying				_
	e Professional fundraising services. See Part IV, line 17				
1	f Investment management fees	47,194	44,061	3,133	
(g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,512	949	547	16
12	Advertising and promotion	6,818	5,595	655	568
13	Office expenses	13,641	8,300	4,577	764
14	Information technology				
15	Royalties				
16	Occupancy	33,267	20,222	12,670	375
17	Travel	6,769	4,251	2,446	72
18	Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19	Conferences, conventions, and meetings	13,846	6,273	105	7,468
20	Interest				
21	Payments to affiliates	24,138	15,159	8,721	258
22	Depreciation, depletion, and amortization	42,001	26,300	15,252	449
23	Insurance	13,027	8,272	4,618	137
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
	a PARENT AWARENESS ITEMS	19,476	19,476		
	b EQUIP RENT/MAINTENANCE	14,623	9,183	5,284	156
	c TRAINING	6,816	6,816		
	d AWARDS (NON ASSISTANCE	3,343	3,343		
	e All other expenses	5,860	4,929	905	26
25	Total functional expenses. Add lines 1 through 24e	2,405,540	2,184,662	206,225	14,653
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).				

Form 990 (2020)

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32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 End of year

Page **11**

267,988

9,803,846

13,993,835

1,585,552

8.351

63,000

1.656.903

7.689,572

4,647,360

Check	if	Schedule

b Less: accumulated depreciation

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Investments—publicly traded securities .

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

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Investments—other securities. See Part IV, line 11 .

Total assets. Add lines 1 through 15 (must equal line 33) .

Escrow or custodial account liability. Complete Part IV of Schedule D

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

Organizations that follow FASB ASC 958, check here <a> \square and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity

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

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

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

Retained earnings, endowment, accumulated income, or other funds

Investments—program-related. See Part IV, line 11

				•
L	Cash-non-interest-bearing	1,193,120	1	1,269,5
2	Savings and temporary cash investments	557,594	2	803,9
3	Pledges and grants receivable, net	2,292,032	3	1,840,6

Beginning of year

303,920

8,933,195

13,288,770

2,057,020

10.251

2.067.271

6.960.251

4,261,248

11,221,499

13,288,770

10c

11

12 13

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15

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17

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Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled 5

10b

O contains a response or note to any line in this Part IX .

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). 6 7 Notes and loans receivable, net Assets 8 Inventories for sale or use . . Prepaid expenses and deferred charges . 8,909 9 7,853 10a Land, buildings, and equipment: cost or other 10a 940,078 basis. Complete Part VI of Schedule D

672,090

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

3a

3h

Nο

Form 990 (2020)

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: 44-0547802

Name: UNITED WAY OF GREATER ST JOSEPH

Form 990 (2020)

Form 990, Part III, Line 4a: ALLOCATED SERVICESTRADITIONALLY, UNITED WAY HAS BEEN KNOWN FOR HARNESSING THE CARING POWER OF COMMUNITY THROUGH GIVING, ADVOCATING AND VOLUNTEERING AND IS MOST WELL-KNOWN FOR THE ANNUAL UNITED WAY CAMPAIGN THAT TAKES PLACE EACH FALL. THROUGH THE CAMPAIGN, HUNDREDS OF BUSINESSES AND THOUSANDS OF INDIVIDUALS MAKE PLEDGES TO IMPROVE LIVES THROUGH THE CARING POWER OF COMMUNITY. THE MAJORITY OF DOLLARS RAISED THROUGH THE ANNUAL CAMPAIGN ARE ALLOCATED TO THE NETWORK OF UNITED WAY PARTNER AGENCIES TO HELP SUSTAIN THEIR CURRENT PROGRAMS AND SERVICES. MORE THAN 100 VOLUNTEERS ARE INVOLVED IN DECIDING HOW THOSE DONOR DOLLARS ARE ALLOCATED. IN 2020 THE NETWORK OF UNITED WAY PARTNER AGENCIES AND INITIATIVES IMPROVED LIVES THROUGH THE CARING POWER OF COMMUNITY IN THE FOLLOWING WAYS, PLUS MANY MORE: EDUCATION: UNITED WAY OF GREATER ST. JOSEPH WORKS TO HELP PEOPLE OF ALL AGES REACH THEIR POTENTIAL THROUGH A VARIETY OF EDUCATIONAL PURSUITS THAT WILL. IN TURN. STRENGTHEN OUR COMMUNITY. OUALITY EARLY LEARNING, YOUTH EDUCATION IN AND OUT OF THE CLASSROOM, AND OTHER INSTRUCTION FOR LIFE-LONG LEARNING ARE JUST A FEW WAYS UNITED WAY SUPPORTS EDUCATION. MORE THAN 350 CHILDREN RECEIVED EARLY CARE AND EDUCATION TO HELP THEM BEGIN THEIR SCHOOL YEARS READY TO LEARN. MORE THAN 400 STUDENTS PARTICIPATED IN AFTER-SCHOOL YOUTH ACTIVITIES AND PROGRAMS. 151 INCOMING KINDERGARTNERS AND THEIR FAMILIES CONNECTED WITH UNITED WAY KINDERCLUB AT HOME. A RESOURCE THAT EMPOWERS PARENTS TO PREPARE THEIR INCOMING KINDERGARTENER TO BE A SUCCESSFUL LEARNER ON THE FIRST DAY OF SCHOOL. AREA BUSINESSES PARTNERED WITH MORE THAN 1,000 STUDENTS TO HELP THEM LEARN ABOUT LOCAL EMPLOYERS AND EDUCATION REQUIRED TO WORK IN PARTICULAR JOBS. 1,203 SCHOOL-AGE CHILDREN ATTENDED CAMP FOR SUMMER ENRICHMENT LEARNING AND POSITIVE ACTIVITIES.HEALTH: IN THE GREATER ST. JOSEPH AREA, YOUR CONTRIBUTIONS HELP PEOPLE OF ALL AGES IMPROVE THEIR PHYSICAL AND MENTAL WELL-BEING. HEALTH IS PROMOTED THROUGH FITNESS AND WELLNESS ACTIVITIES, NUTRITION AND IN-HOME SERVICES, COUNSELING, AND OTHER IMPORTANT PROGRAMS. GOOD HEALTH IS CRUCIAL FOR EVERYONE. THOUSANDS OF ADULTS AND CHILDREN RECEIVED NEEDED MENTAL HEALTH SERVICES. 619 SENIOR ADULTS RECEIVED 107.490 NUTRITIOUS MEALS TO HELP MAINTAIN HEALTH. MORE THAN \$39 MILLION IN UNREIMBURSED MEDICAL CARE WAS PROVIDED TO CHILDREN IN THE GREATER ST. JOSEPH AREA. 1,400 PEOPLE WORKED THROUGH ALCOHOL AND DRUG ADDICTION RECOVERY. 224 PEOPLE RECEIVED COUNSELING RELATED TO DOMESTIC AND SEXUAL VIOLENCE. 138 CHILDREN WITH A DISABILITY OR SPECIAL NEED AND THEIR FAMILIES RECEIVED SERVICES THAT HELPED THE CHILDREN WORK TOWARD IMPORTANT DEVELOPMENTAL MILESTONES.FINANCIAL STABILITY: STABLE HOUSEHOLD FINANCES ARE IMPORTANT FOR DAILY LIVING, WHICH IS WHY UNITED WAY OF GREATER ST. JOSEPH ALSO FOCUSES ON FINANCIAL STABILITY. UNITED WAY SUPPORTS EFFORTS FOR FAMILIES AND INDIVIDUALS IN CRISIS. SUCH EFFORTS INCLUDE FOOD, DISASTER RELIEF, INFORMATION AND REFERRAL, AND SHELTER SERVICES RELATED TO HOMELESSNESS OR DOMESTIC VIOLENCE, UNITED WAY IS ALSO WORKING TO PREVENT FINANCIAL SITUATIONS FOR BECOMING PROBLEMS IN THE FIRST PLACE, 541 MEN, WOMEN, AND CHILDREN RECEIVED 20,162 NIGHTS OF EMERGENCY SHELTER. 247 LOW-INCOME OR ELDERLY PEOPLE WERE REPRESENTED AT NO COST FOR NON-CRIMINAL COURT CASES. 121 PREVIOUSLY HOMELESS HOUSEHOLDS (191 PEOPLE) LIVED IN TRANSITIONAL, PERMANENT, OR SUPPORTIVE HOUSING. MORE THAN 1,000 PEOPLE RECEIVED NEARLY \$1,000,000 IN TAX REFUNDS THROUGH FREE TAX PREPARATION. 150 ADULTS WITH DISABILITIES HELD JOBS THROUGH SHELTERED AND SUPPORTED EMPLOYMENT. 4,917 AREA RESIDENTS SAVED \$240.643 ON PRESCRIPTION MEDICATIONS WITH A PRESCRIPTION DISCOUNT CARD. A PORTION OF EACH YEAR'S CAMPAIGN IS HELD IN A GRANT MAKING FUND CALLED THE UNITED WAY COMMUNITY INVESTMENT FUND. THROUGH THIS GRANT OPPORTUNITY, AREA NON-PROFITS THAT MEET UNITED WAY'S CRITERIA IN FINANCIAL ACCOUNTABILITY, PROGRAM DELIVERY AND OUTCOMES ARE ELIGIBLE TO APPLY FOR GRANTS TO FURTHER MEET COMMUNITY OR AGENCY NEEDS. IN RECENT YEARS, UNITED WAY HAS INCREASED THE DOLLARS AVAILABLE THROUGH THE COMMUNITY INVESTMENT FUND AND SEEN AN UPTICK IN FUNDED REQUESTS. THE COMMUNITY INVESTMENT FUND GRANTS IN THE LAST FEW YEARS HAVE HELPED INNOVATIVE PROGRAMS BEGIN. BUILD CAPACITY. MEET ORGANIZATIONAL NEEDS WITHIN AGENCIES SO THEY CAN CONTINUE THEIR MISSION TO THE FULLEST AND HAVE MINIMIZED THE IMPACT TO CLIENTS WHEN SIGNIFICANT PROGRAM CHANGES OCCUR. BEGINNING IN MARCH 2020, CONSIDERATION OF REQUESTS WAS LIMITED TO AGENCIES, PROGRAMS AND SERVICES PROVIDING SERVICES DEEMED ESSENTIAL DURING THE PANDEMIC AND THAT WERE AT RISK OF DISRUPTION WITHOUT FUNDING FROM THE COMMUNITY INVESTMENT FUND. GRANTS FUNDED IN 2020 INCLUDED: -BARTLETT CENTER- PROVIDED EMERGENCY FUNDING FOR OPERATIONS TO CONTINUE -MERIL- PROVIDED FUNDING FOR EXPANSION OF IN-HOME PERSONAL CARE ATTENDANT PROGRAM -NORTHWEST MISSOURI COMMUNITY SERVICES- FUNDED THE COST ASSOCIATED WITH AN ADDITIONAL CALL SPECIALIST -THE SALVATION ARMY- FUNDED EMERGENCY SHELTER FOR FAMILIES EXPERIENCING HOMELESSNESS -UNITED CEREBRAL PALSY OF NORTHWEST MISSOURI- PROVIDED FUNDING FOR ADULT SENSORY ROOM EQUIPMENT -HOUSING STABILITY FUND- FUNDING TO ASSIST INDIVIDUALS AND FAMILIES WITH HOMELESS PREVENTION AND BARRIER REMOVAL SO THEY CAN

MAINTAIN OR ATTAIN STABLE HOUSING. -IMAGINE ST. JOSEPH 2040- FUNDING TO SUPPORT THE IMPLEMENTATION OF COMMUNITY PLAN

Form 990, Part III, Line 4b:

UNITED WAY INITIATIVES AND PROGRAMSFAMILYWIZE PRESCRIPTION ASSISTANCE -SAVING RESIDENTS MONEY ON PRESCRIPTION MEDICATION WITH A FREE PRESCRIPTION DISCOUNT CARD SINCE 2007. THE UNITED WAY FAMILYWIZE PRESCRIPTION DISCOUNT CARD CAN BE USED AS OFTEN AS NEEDED BY ANYONE FOR ANY QUALIFYING PRESCRIPTION; IT IS LIKE A REUSABLE COUPON FOR MANY DIFFERENT PRESCRIPTIONS. DURING 2020, PEOPLE IN THE AREA SAVED MORE THAN \$220,000. THE GREATER ST. JOSEPH COMMUNITY HAS EXCEEDED \$2.5 MILLION IN SAVINGS ON PRESCRIPTIONS SINCE THE PROGRAM'S BEGINNING. FINANCIAL STABILITY -PROVIDING OPPORTUNITIES FOR INDIVIDUALS AND FAMILIES TO BECOME FINANCIALLY SELF-SUFFICIENT SINCE 2009. IN 2020, UNITED WAY PROMOTED FREE TAX PREPARATION SERVICES OFFERED THROUGH PARTNER AGENCY INTERSERV. INTERSERV HELPED 1,065 COMMUNITY MEMBERS FILE TAX RETURNS AND RECEIVE REFUNDS TOTALING \$909,705. MORE THAN 70 COMMUNITY MEMBERS USED MYFREETAXES.COM, AN ONLINE SERVICE MADE AVAILABLE THROUGH A PARTNERSHIP WITH H&R BLOCK, TO FILE THEIR RETURNS LEADERSHIP ST. JOSEPH -BUILDING THE SKILLS OF INDIVIDUALS TO BE EFFECTIVE LEADERS IN THE COMMUNITY SINCE 1982 UNITED WAY LEADERSHIP ST. JOSEPH IS AN ANNUAL, YEAR-LONG LEADERSHIP DEVELOPMENT PROGRAM FOR ADULTS LIVING OR WORKING IN THE ST. JOSEPH AREA. THE PROGRAM HELPS CREATE A NETWORK OF TRAINED INDIVIDUALS WILLING TO ENGAGE IN LEADERSHIP AND COMMUNITY SERVICE WITH ENHANCED KNOWLEDGE OF OUR COMMUNITY'S OPPORTUNITIES, REALITIES AND CHALLENGES. IN 2020, TWENTY-EIGHT COMMUNITY MEMBERS COMPLETED THE PROGRAM, BRINGING THE TOTAL NUMBER OF PROGRAM GRADUATES TO 935 SINCE 1982. DURING THE YEAR, PARTICIPANTS LEARNED AND PRACTICED PROJECT DEVELOPMENT AND ESSENTIAL LEADERSHIP SKILLS. THE SAME LEARNING OBJECTIVES AND OUTCOMES WERE MAINTAINED EVEN THOUGH THE CLASS WENT VIRTUAL IN APRIL DUE TO THE COVID-19 PANDEMIC. THE CLASS WAS DIVIDED INTO FOUR GROUPS AND WAS CHALLENGED TO LEARN THE PROCESS OF DEVELOPING A PROJECT THAT WOULD MEET A COMMUNITY NEED. THE CHALLENGE RESULTED IN THE FOLLOWING PROJECTS: YOUTHFUL EXPRESSION OF UNCOMMON CHARACTER A DOWNTOWN YOUTH ART EXHIBIT; SPECIAL OLYMPICS/UNITED WAY LEADERSHIP ST. JOSEPH ALUMNI SOFTBALL TOURNAMENT; ST. JOSEPH SPORTS ALLIANCE YOUTH SPORTS SCHOLARSHIP FUND; AND ADVERSE CHILDHOOD EXPERIENCES (ACES) INFOGRAPHICS SHARED WITH ST. JOSEPH MIDDLE AND HIGH SCHOOL YOUTH. THE 2020 DISTINGUISHED LEADER AWARD WAS PRESENTED TO SETH WRIGHT, 2003 UNITED WAY LEADERSHIP ST. JOSEPH GRADUATE. THE DISTINGUISHED LEADER AWARD IS PRESENTED EVERY YEAR TO AN INDIVIDUAL WHO EXEMPLIFIES LEADERSHIP WHILE SERVING THE GREATER ST. JOSEPH COMMUNITY. DUE TO CONTINUING HEALTH AND SAFETY CONCERNS, THE 2021 UNITED WAY LEADERSHIP ST. JOSEPH CURRICULUM FORMAT HAS BEEN CHANGED TO TWO MONTHLY HALF-DAY VIRTUAL SESSIONS WITH THE HOPE THAT THE NEW, VIRTUAL, SHORTER CLASS DAY FORMAT WILL AFFORD MORE FLEXIBILITY AND ACCOMMODATION FOR PARTICIPANTS AND EMPLOYERS.PROFIT IN EDUCATION -IMPROVING THE EDUCATION LEVEL OF THE POTENTIAL AND CURRENT WORKFORCE SINCE 1989. UNITED WAY PROFIT IN EDUCATION WORKS TO INCREASE THE HIGH SCHOOL GRADUATION RATE AND COLLABORATE WITH AND SUPPORT EDUCATION EFFORTS ACROSS THE COMMUNITY. IN 2020, UNITED WAY READING ADVENTURE WAS HELD DURING THE SPRING SEMESTER WITH SECOND GRADE CLASSES AT THREE LOCAL ELEMENTARY SCHOOLS. THE GOAL OF UNITED WAY READING ADVENTURE IS TO HELP ELEMENTARY-AGE STUDENTS MAINTAIN AND IMPROVE THEIR READING SKILLS AND HELP BUILD THEIR HOME LIBRARIES THROUGH NEW AND DONATED BOOKS. THOUSANDS OF BOOKS WERE DISTRIBUTED DURING THE SUMMER THROUGH A NEW PROGRAM CALLED UNITED WAY TAKE A BOOK TUESDAY. BOOKS WERE GIVEN TO AREA CHILDREN ON TUESDAYS IN JUNE AND JULY THROUGH SCHOOL-AGE CHILDCARE PROVIDERS AND SECOND HARVEST'S NO HUNGER SUMMER. THE BOOKS CONTAINED INFORMATION FROM LOCAL LIBRARIES SO KIDS WOULD KNOW WHERE TO TURN FOR ADDITIONAL READING MATERIALS AND ACTIVITIES. VOLUNTEERS AND COMMUNITY MEMBERS DONATED THOUSANDS OF BOOKMARKS AND NOTES THAT WERE INCLUDED IN THE BOOKS. UNITED WAY SPEAKERS' BUREAU LINKED BUSINESS VOLUNTEERS WITH CLASSROOMS, CAREER DAYS AND EVENTS TO HELP STUDENTS LEARN ABOUT DIFFERENT CAREERS AND EMPLOYER EXPECTATIONS. MORE THAN 1,000 ELEMENTARY, MIDDLE AND HIGH SCHOOL STUDENTS LEARNED ABOUT CAREERS FROM PEOPLE IN A SPECIFIC FIELD, INCLUDING ANIMAL HEALTH SCIENCES, ARTS AND COMMUNICATION, SKILLED TRADES, HEALTHCARE, INFORMATION TECHNOLOGY, EDUCATION AND BUSINESS. MORE THAN 65 LOCAL PROFESSIONALS VOLUNTEERED AND SHARED ABOUT THEIR CAREERS IN 2020.SUCCESS BY 6 -PREPARING CHILDREN TO BE SUCCESSFUL LEARNERS WHEN THEY BEGIN KINDERGARTEN SINCE 1999. UNITED WAY SUCCESS BY 6 WORKS TO PREPARE ALL CHILDREN TO BE SUCCESSFUL LEARNERS WHEN THEY BEGIN KINDERGARTEN. THE INITIATIVE WORKS THROUGH COMMUNITY-WIDE COLLABORATIONS TO SUPPORT PARENTS, CHILDCARE PROVIDERS AND OTHERS TO FACILITATE THE DEVELOPMENT OF CHILDREN AGED BIRTH TO SIX. IN EARLY 2020, UNITED WAY SUCCESS BY 6 BROUGHT FAMILIES TOGETHER FOR EVENTS THAT CELEBRATED EARLY LITERACY, GAVE PARENTS THE TOOLS AND INFORMATION TO SUPPORT THEIR CHILDREN'S EARLY DEVELOPMENT AND INCREASED THEIR UNDERSTANDING OF AUTISM. CHILDCARE PROVIDERS GATHERED TO LEARN ABOUT LEADERSHIP AND MANAGEMENT TOPICS AT THE ANNUAL UNITED WAY SUCCESS BY 6 DIRECTORS' SYMPOSIUM, UNITED WAY ALSO BEGAN SERVING AS A CAPACITY BUILDING PARTNER FOR CHILD CARE AWARE OF MISSOURI, DEEPENING CONNECTIONS WITH CHILDCARE PROVIDERS AND EXPANDING IMPACT TO 12 COUNTIES IN NORTHWEST MISSOURI, WHEN COVID-19 HIT, UNITED WAY SUCCESS BY 6 ADAPTED AND REDIRECTED FOCUS TO THE AREAS THAT NEEDED THE MOST SUPPORT. STAFF IMMEDIATELY BEGAN CONNECTING CHILDCARE PROVIDERS WITH RESOURCES AT THE LOCAL. STATE AND NATIONAL LEVELS, CONVENED DISCUSSIONS AROUND HOW TO ENSURE CARE FOR CHILDREN OF ESSENTIAL WORKERS AND MOVED ACTIVITIES TO AN ONLINE ENVIRONMENT. UNITED WAY STAFF PARTICIPATED IN STATEWIDE DISCUSSIONS, PROVIDING A VOICE FOR CHILDCARE PROVIDERS AND FAMILIES IN OUR REGION. AS THE PANDEMIC CONTINUED, THE FOCUS SHIFTED TOWARD SUPPORTING THE WELLNESS AND RESILIENCY OF LOCAL CHILDCARE PROVIDERS. UNITED WAY SUCCESS BY 6 CONTINUED TO PROVIDE PARENT EDUCATION OPPORTUNITIES THROUGHOUT 2020, UNITED WAY STAFF WORKED WITH EDUCATORS, THE ST. JOSEPH SCHOOL DISTRICT AND ST. JOSEPH PUBLIC LIBRARIES TO CREATE AND DISTRIBUTE UNITED WAY KINDERCLUB AT HOME, A RESOURCE THAT EMPOWERS PARENTS TO PREPARE THEIR CHILDREN TO BE SUCCESSFUL LEARNERS. UNITED WAY SUCCESS BY 6 ALSO PARTNERED WITH COMMUNITY ACTION PARTNERSHIP HEAD START TO OFFER CONSCIOUS DISCIPLINE CLASSES FOR PARENTS AND PRIMARY CAREGIVERS IN AN ONLINE ENVIRONMENT. UNITED WAY SUCCESS BY 6 SUPPORTED EARLY CARE AND EDUCATION PROVIDERS WITH VIRTUAL TRAININGS. LEADERSHIP DEVELOPMENT AND SCHOLARSHIPS IN 2020. THROUGH UNITED WAY SUCCESS BY 6, EARLY CARE AND EDUCATION PROVIDERS EARNED 1,240 HOURS OF TRAINING AND EIGHT FINANCIAL SCHOLARSHIPS WERE AWARDED TO EARLY EDUCATORS TO PURSUE ASSOCIATE'S AND BACHELOR'S DEGREES IN EARLY EDUCATION.UNMET NEEDS COMMITTEE -COLLABORATING TO CONNECT PEOPLE TO RESOURCES TO SOLVE IMMEDIATE NEEDS WITH LASTING IMPACT SINCE 1993. UNITED WAY UNMET NEEDS COMMITTEE MEETS THROUGHOUT THE YEAR TO IDENTIFY ALTERNATIVE RESOURCES AND SOLUTIONS FOR CASES BROUGHT BEFORE THEM. IN 2020 REPRESENTATIVES FROM NON-PROFITS, CHURCHES, UTILITY COMPANIES AND GOVERNMENT AGENCIES AS WELL AS COMMUNITY MEMBERS MET IN-PERSON TWICE BEFORE CONVERTING TO VIRTUAL MEETINGS. THE COMMITTEE MET EVERY THREE MONTHS AND HAD PRESENTATIONS ON A VARIETY OF TOPICS. INCLUDING COVID-19 RESOURCES, MENTAL HEALTH AND AGENCY PROGRAMS, POTENTIAL CASES WERE ABLE TO BE HANDLED THROUGH OTHER RESOURCES OR CONNECTIONS TO OTHER AGENCIES VOLUNTEER CENTER -CONNECTING THE COMMUNITY THROUGH VOLUNTEERISM SINCE 2009. UNITED WAY VOLUNTEER CENTER IS A CENTRAL RESOURCE FOR VOLUNTEER NEEDS ACROSS THE GREATER ST. JOSEPH AREA. INDIVIDUALS, GROUPS AND CORPORATIONS SEEKING VOLUNTEER OPPORTUNITIES CAN FIND A VARIETY OF OPTIONS CALLING FOR VARYING LEVELS OF COMMITMENT AVAILABLE AT MANY DIFFERENT NON-PROFIT ORGANIZATIONS. IN 2020, VIRTUAL UNITED WAY COMMUNITY VOLUNTEER RESOURCE NETWORK (CVRN) MEETINGS WERE ATTENDED BY INDIVIDUALS WHO MANAGE VOLUNTEERS FOR LOCAL ORGANIZATIONS. CVRN PROMOTES AND DEVELOPS EFFECTIVE VOLUNTEER MANAGEMENT PROGRAMS IN THE COMMUNITY AND ENHANCES THE KNOWLEDGE, SKILLS AND CONNECTIONS AMONG MEMBERS. UNITED WAY IS BUILDING THE CAPACITY OF COMMUNITY VOLUNTEER COORDINATORS THROUGH THE NETWORK, UNITED WAY STUFF THE BUS! SCHOOL SUPPLIES DRIVE LOOKED VERY DIFFERENT IN 2020, WHILE THE TRADITIONAL SCHOOL SUPPLIES DRIVE COULD NOT BE HELD DUE TO COVID-19 RESTRICTIONS, UNITED WAY CONTINUED TO ACCEPT SUPPLIES AND DONATIONS TO DISTRIBUTE TO LOCAL SCHOOLS. NEARLY 100 VOLUNTEER OPPORTUNITIES FROM MORE THAN 25 LOCAL AGENCIES WERE SHARED THROUGH UNITED WAY VOLUNTEER CENTER.-RESPONDING TO EMERGING OR EMERGENCY NEEDS BEYOND ALLOCATING DOLLARS TO OTHER AGENCIES

Form 990, Part III, Line 4c:

SUPPORTING COMMUNITY PLANNING, ARE ACCOUNTED FOR IN THE COMMUNITY BUILDING PROGRAM. UNITED WAY'S ROLE GOES FAR BEYOND THE RAISING AND ALLOCATING OF DOLLARS AND IMPLEMENTATION OF INITIATIVES AND PROGRAMMING. UNITED WAY PARTICIPATES IN A NUMBER OF COMMUNITY COALITIONS. COMMITTEES, TASK FORCES AND EFFORTS THAT IMPROVE THE COMMUNITY, IN MANY CASES UNITED WAY IS AN ACTIVE PARTICIPANT, PROVIDING STAFF RESOURCES. LEADERSHIP, FACILITATION, ADVOCACY AND ACTION. CONTINUUM OF CARE FOR HOMELESS SERVICES, CONTINUUM OF CARE HMIS TRANSITION COMMITTEE, HOMELESS

OTHER GENERAL ACTIVITIES OF THE UNITED WAY, WHICH CONTRIBUTE TO BUILDING COMMUNITY COALITIONS, PARTICIPATING IN COMMUNITY GROUPS AND

COURT, VOLUNTEER SERVICES ADVISORY COUNCIL FOR RETIRED SENIOR VOLUNTEER PROGRAM (RSVP), CHILDREN'S FAIR PLANNING COMMITTEE, TINY TOT TOWN PLANNING COMMITTEE, HEALTH (HELPING EVERYONE ACHIEVE LONG TERM HEALTH), URBAN MISSION SUPPORT AGENCIES NETWORK, TAV/AIM NETWORK, BEACON, NORTHWEST MISSOURI PROFESSIONALS ON AGING, MERIL NETWORKING LUNCHES, EMERGENCY OPERATIONS CENTER DAILY BRIEFINGS, COAD (COMMUNITY

ORGANIZATIONS ACTIVE IN DISASTER), LEPC (LOCAL EMERGENCY PLANNING COMMITTEE), EARLY CHILDHOOD COMPREHENSIVE SYSTEMS STATE STEERING COMMITTEE, MOSAIC LIFE CARE FOUNDATION E2 - STEERING COMMITTEE, MOSAIC LIFE CARE FOUNDATION E2 - PATHWAYS TO PROSPERITY, MOSAIC LIFE CARE FOUNDATION E2 -

PATHWAYS TO EARLY LEARNING, COMMERCE BANK CRA BOARD (COMMUNITY REINVESTMENT ACT), ST. JOSEPH CHAMBER OF COMMERCE WORKFORCE DEVELOPMENT COMMITTEE, INTERAGENCY COUNCIL ON AGING, ST. JOSEPH CHAMBER OF COMMERCE DIPLOMATS, ST. JOSEPH CHAMBER OF COMMERCE MEMBER COUNCIL, ST. JOSEPH

CHAMBER OF COMMERCE GOVERNMENT RELATIONS COMMITTEE, ST. JOSEPH CHAMBER OF COMMERCE FINANCE COMMITTEE, ST. JOSEPH COMMUNITY ALLIANCE, IMAGINE ST. JOSEPH 2040 PLANNING TEAM, DOWNTOWN ROTARY CLUB #32, DOWNTOWN ROTARY CLUB #32 BOARD OF DIRECTORS, KIWANIS CLUB OF ST. JOSEPH.

KIWANIS CLUB OF ST. JOSEPH BOARD OF DIRECTORS, ST. JOSEPH SCHOOL DISTRICT PARENTS AS TEACHERS ADVISORY, ST. JOSEPH SCHOOL DISTRICT SCHOOL COUNSELING ADVISORY COUNCIL, MISSOURI WESTERN STATE UNIVERSITY CRAIG SCHOOL OF BUSINESS ADVISORY COMMITTEE, DOWNTOWN MARKETING COMMITTEE.

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

and Independent Contractors

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ALBERS SCOTT

BOARD MEMBER

BOARD MEMBER

BASCH MIKE

CLARK CHRISTOPHER

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		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
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GRAYSON JASON VICE CHAIR	2.00	Х		х				0	0	0	
CAROLUS KATIE	2.00	×		х				0	0	0	

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

	formal-bank	and a director/trustee)						J Organization	(W. 2/1000	organization and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
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CODER ELAINE

BOARD MEMBER

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BOARD MEMBER

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BOARD MEMBER

INSCHO DARRICK

BOARD MEMBER

HURST MIKE

HOLLARS JEREMIAH

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GLENN JAN

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

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

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	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	- (W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOHNSON BEERY BOARD MEMBER	1.00	Х						0	0	0	
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BOARD MEMBER VEALE CYNDE

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BRADLEY RALL

BOARD MEMBER

WYBLE MARK

WILLIAMS MARLIE

WOLLENMAN NICK

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and Independent Contractors

and Independent Contractors (A) Name and Title

LEHMAN BRENNAN

BOARD MEMBER

STROUGH KYLEE

PRESIDENT/CEO

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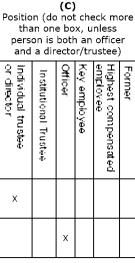
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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

Institutional



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organization and

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organizations

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		the Treasury	► Go to <u>www.irs</u>	<u>.gov/Form990</u> for i	nstructions and	I the latest info	ormation.	Open to Public Inspection
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Pa			for Public Charity State				See instructions.	
1	rgariiz	nization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).						
2		,	escribed in section 170(b)(. , . ,	
3			or a cooperative hospital serv		,			
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7	Ш	name, city,	esearch organization operate and state:	ed in conjunction with	a nospital descri	ibed in Section .	170(D)(1)(A)(III). E	nter the hospital's
5			ation operated for the benefi (iv). (Complete Part II.)	t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6		A federal, s	tate, or local government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7	✓		ation that normally receives a 'O(b)(1)(A)(vi). (Complete		s support from a	governmental u	init or from the genera	al public described in
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9			ural research organization de rant college of agriculture. S					ege or university or a
10		from activit	ation that normally receives: ties related to its exempt fun income and unrelated busin See section 509(a)(2). (Co	ctions—subject to ceres taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its su	ipport from gross
11		An organiza	ation organized and operated	l exclusively to test fo	r public safety. S	See section 509	(a)(4).	
12		more public	ation organized and operated cly supported organizations of through 12d that describes	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a	
а		organizatio	supporting organization oper n(s) the power to regularly a Part IV, Sections A and B.	appoint or elect a majo				
b		Type II. A manageme	supporting organization sup nt of the supporting organiza plete Part IV, Sections A a	ervised or controlled i ation vested in the sar				
c		Type III f	unctionally integrated. A sorganization(s) (see instructi	supporting organizatio				ted with, its
d		Type III n	on-functionally integrated integrated integrated. The organization in You must complete Par	d. A supporting organi n generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar	
e		Check this	box if the organization receiver Type III non-functionally	ved a written determir	ation from the I		pe I, Type II, Type II	I functionally
f	Enter			· · · · · · · · · · · ·	-		<u> </u>	
g	Provi	de the follow	ing information about the su	pported organization(s).			
	(i) N	lame of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
				Yes No				
Tota			tion Act Notice, see the Ir		Cat. No. 11285		Schedule A (Form 9	

Section B. Total Support Calendar year (c) 2018 (a) 2016 **(b)** 2017 (d) 2019 (e) 2020 (or fiscal year beginning in) ▶ 3,257,185 2,930,507 2,879,263 3,263,059 Amounts from line 4. . Gross income from interest, dividends, payments received on 236,395 222,286 239,649 253,651 securities loans, rents, royalties and income from similar sources. . . Net income from unrelated business activities, whether or not the business is regularly carried on. . 1,237 10,842 454 or loss from the sale of capital 1,820

(f) Total 2,430,855 14,760,869 219,868 1,171,849 10 Other income. Do not include gain 330 14,683 assets (Explain in Part VI.). . 11

Total support. Add lines 7 through 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check Section C. Computation of Public Support Percentage

Schedule A (Form 990 or 990-EZ) 2020

14

15

15,947,401 309,305

91.550 %

91.730 %

Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))

15 Public support percentage for 2019 Schedule A, Part II, line 14

16a 33 1/3% support test-2020. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box h 33 1/3% support test-2019. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this 17a 10%-facts-and-circumstances test-2020. 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

h 10%-facts-and-circumstances test—2019. 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

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

Support Schedule for Organizations Described in Section 509(a)(2)										
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If										
the organization fails to qualify under the tests listed below, please complete Part II.)										
Section A. Public Support										
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
	(or fiscal year beginning in) ► Gifts, grants, contributions, and		` '	``		` '				
1	membership fees received. (Do not									
	include any "unusual grants.") .									
2	Gross receipts from admissions,									
	merchandise sold or services									
	performed, or facilities furnished in									
	any activity that is related to the									
_	organization's tax-exempt purpose									
3	Gross receipts from activities that are not an unrelated trade or business									
	under section 513									
4	Tax revenues levied for the									
	organization's benefit and either paid									
	to or expended on its behalf									
5	The value of services or facilities									
	furnished by a governmental unit to									
_	the organization without charge									
6	Total. Add lines 1 through 5									
/a	Amounts included on lines 1, 2, and 3 received from disqualified persons									
h	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.									
	Add lines 7a and 7b.									
8	Public support. (Subtract line 7c									
	from line 6.)									
36	ection B. Total Support		1	1	1	T	Τ			
	Calendar year	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total			
9	(or fiscal year beginning in) ► Amounts from line 6									
	Gross income from interest,									
L0a	dividends, payments received on									
	securities loans, rents, royalties and									
	income from similar sources									
b	Unrelated business taxable income									
	(less section 511 taxes) from									
	businesses acquired after June 30, 1975.									
_	Add lines 10a and 10b.									
с 11	Net income from unrelated business									
11	activities not included in line 10b,									
	whether or not the business is									
	regularly carried on.									
12	Other income. Do not include gain or									
	loss from the sale of capital assets									
	(Explain in Part VI.)									
13	Total support. (Add lines 9, 10c, 11, and 12.).									
14	First 5 years. If the Form 990 is for the	ne organization's	first, second, third	l, fourth, or fifth t	ax vear as a secti	on 501(c)(3) orga	nization.			
	check this box and stop here	-			•	() ()	· —			
-				<u> </u>			· · · · • · · ·			
	ection C. Computation of Public S Public support percentage for 2020 (lin			column (f))		1 4 = 1				
15						15				
16										
Se	ection D. Computation of Invest									
17	Investment income percentage for 202	-		-		17				
18	Investment income percentage from 2019 Schedule A, Part III, line 17									
	9a 331/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not									
	more than 33 1/3%, check this box and									
	33 1/3% support tests—2019. If the									
U	not more than 33 1/3%, check this box	-			·					
20	· · · · · ·	-	-							
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	.9a, or 19b, check	this box and see	instructions	. ▶ ⊔			

Page 4

5a

5b 5c

6

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

amendment to the organizing document).

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

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

organization's organizing document?

provide detail in Part VI.

answer line 10b below.

6

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,				
	describe the designation. If historic and continuing relationship, explain.	1			
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).				
	III Section 303(a)(1) (i) (2).	2			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and				
	3c below.				
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the				
	determination.				
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes?				

	m section ses (a)(1) or (2).	2			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and				
	3c below.	3a			
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the				
	determination.				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	hecked box 12a or 12b in Part I, answer lines 4b and 4c below.				

	the public support tests under section 509(a)(2)? If res, describe in Part VI when and now the organization made the					
	determination.	3b				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?					
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.					
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you					
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.					
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported					
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.					
С	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					
	the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.					
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported					

С	d the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?						
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use.						
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you						
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.						
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported						
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.						
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support						
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.						
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b						

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

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

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

Was the organization controlled directly or indirectly at any time during the tax year by one or more disgualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

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

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

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

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pā	rt IV Supporting Organizations (continued)			
			Yes	No
11	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 lines 11b and 11c below, the governing body of a supported organization?	11a		
h	A family member of a person described in 11a above?	11a		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in Part	11c		
	VI.			
5	ection B. Type I Supporting Organizations		Yes	No
1	Did the officers, 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 Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1	163	140
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.			
_	ection C. Type II Supporting Organizations			
	ection c. Type 11 Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations			
			Yes	No
1	d the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's x year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the rm 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing cuments in effect on the date of notification, to the extent not previously provided?			
_		1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).			
3	By reason of the relationship described in line 2 above, did the organization's supported organizations have a significant	2		
3	voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.	3		
S	ection 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):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. Complete line 3 below.			
	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer lines 2a and 2b 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 Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
	b Did the activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the			
	organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI .	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard.	3b		

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt use assets 2 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see 4 instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 6 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 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 4 5 5 Income tax imposed in prior year 6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

1	Amounts paid to supported organizations to accomplish exempt purposes	1	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in Part VI). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive ($provide$ $details$ in $Part VI$). See instructions	8	
		1	I

7 Total annual distributions. Add lines 1 through 6.	7			
8 Distributions to attentive supported organizations to what details in Part VI). See instructions	8			
9 Distributable amount for 2020 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2020				

8 Distributions to attentive supported organizations to wh details in Part VI). See instructions	8			
9 Distributable amount for 2020 from Section C, line 6			9	
10 Line 8 amount divided by Line 9 amount			10	
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributi Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.				
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e				
g Applied to underdistributions of prior years				
h Applied to 2020 distributable amount				

2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
b From 2016		
c From 2017		
d From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
h Applied to 2020 distributable amount		
 Carryover from 2015 not applied (see instructions) 		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI .		

g Applied to underdistributions of prior years	
h Applied to 2020 distributable amount	
i Carryover from 2015 not applied (see instructions)	
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.	
4 Distributions for 2020 from Section D, line 7:	
\$	
Applied to underdistributions of prior years	
b Applied to 2020 distributable amount	
c Remainder. Subtract lines 4a and 4b from line 4.	
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.	
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater	

b Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.		
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.		
7 Excess distributions carryover to 2021. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2016		
b Excess from 2017		
c Excess from 2018		

d Excess from 2019.

e Excess from 2020.

Schedule A (Form 990 or 990-EZ) 2	nedule A (Form 990 or 990-EZ) 2020 Page 8					
Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).							
		Facts And Circumstances Test					
990 Sched	dule A, Supplemen	tal Information					
	<u> </u>						
Ret	turn Reference	Explanation					
	A, PART II, LINE 10, ON OF OTHER	GROSS FUNDRAISING REVENUE - OTHER INCOME - 2016 AMOUNT: \$ 1,237. 2017 AMOUNT: \$ 10,842. 2 18 AMOUNT: \$ 454. 2019 AMOUNT: \$ 1,820. 2020 AMOUNT: \$ 330.	20				

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

As Filed Data -

DLN: 93493134058151

OMB No. 1545-0047

2020

Supplemental Financial Statements

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

Open to Public

Department of the Treasury

(Form 990)

Interi	nal Revenue Service	<u>1990</u> for instructions and the latest infor	matio	n.	nspection
	ame of the organization ITED WAY OF GREATER ST JOSEPH		-	ployer identificatio	n number
				0547802	
-	Organizations Maintaining Donor Advi Complete if the organization answered "Ye		r Acc	ounts.	
	Complete if the organization answered Te	(a) Donor advised funds		(b) Funds and other	er accounts
1	Total number at end of year				
2	Aggregate value of contributions to (during year)				
3	Aggregate value of grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor adviso	ure in writing that the assets held in donor ad	lviced (funds are the	
•	organization's property, subject to the organization's ex			_	☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and do	onor advisors in writing that grant funds can	be use		cso
	charitable purposes and not for the benefit of the donor	r or donor advisor, or for any other purpose o			
	private benefit?				☐ Yes ☐ No
Pa	Conservation Easements.				
	Complete if the organization answered "Ye				
1	Purpose(s) of conservation easements held by the organ				
	Preservation of land for public use (e.g., recreation	, <u> </u>		rically important land	d area
	Protection of natural habitat	Preservation of a c	ertifie	d historic structure	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the for	m of a	a conservation	
	easement on the last day of the tax year.		.]	Held at the End	of the Year
а	Total number of conservation easements		2a		
b	,		2b		
C	Number of conservation easements on a certified histori	c structure included in (a)	2c		
d	Number of conservation easements included in (c) acqui structure listed in the National Register	ired after 7/25/06, and not on a historic	2d		
3	Number of conservation easements modified, transferre	ed released extinguished or terminated by	the or	ganization during th	e
_	tax year ▶	, a, released, extinguished, or committee by		gamzadan aanng an	•
4	Number of states where property subject to conservation	on easement is located b			
			. 6: . 1 .	_	
5	Does the organization have a written policy regarding the and enforcement of the conservation easements it holds		or viola	ations,	□ No
	Staff and volunteer hours devoted to monitoring, inspec	sting bandling of violations, and enforcing of	-nn		
6	Starr and volunteer flours devoted to monitoring, hisper	cting, flanding of violations, and emorting co	JIISEI V	ation easements du	ing the year
_	Amount of expenses incurred in monitoring, inspecting,	handling of violations, and enforcing conserv	vation	escements during t	he year
7	► \$	manding of violations, and enforcing conserv	vation	easements during t	ne year
8	Does each conservation easement reported on line 2(d)	a shove satisfy the requirements of section 1	70(h)(.	4)(R)(i)	
	and section 170(h)(4)(B)(ii)?		70(11)(-	Yes	□ No
9	In Part XIII, describe how the organization reports cons	servation easements in its revenue and expe	nse sta		
_	balance sheet, and include, if applicable, the text of the	footnote to the organization's financial state			
	the organization's accounting for conservation easemen			miles Accete	
Pa	rt III Organizations Maintaining Collections Complete if the organization answered "Ye		er Sir	milar Assets.	
1a	If the organization elected, as permitted under FASB AS		nt and	balance sheet works	s of art,
	historical treasures, or other similar assets held for pub		erance	of public service, p	rovide, in
	Part XIII, the text of the footnote to its financial statem If the organization elected, as permitted under FASB AS		nd hala	ance sheet works of	art
b	historical treasures, or other similar assets held for pub following amounts relating to these items:				
	(i) Revenue included on Form 990, Part VIII, line 1			▶ \$	
	(ii)Assets included in Form 990, Part X				
2	If the organization received or held works of art, historical following amounts required to be reported under FASB	ASC 958 relating to these items:	_	•	
а	, ,			· —	
b	Assets included in Form 990, Part X			. ▶\$	

Cat. No. 52283D

Schedule D (Form 990) 2020

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

d Equipment .

Par	t II	Organizations M	aintaining Colle	ections of Art, H	istori	cal Tı	reasi	ures, or Other	Similar A	ssets (cor	ntinued)
3		ing the organization's acq ms (check all that apply):		, and other records,	check a	any of	the fo	ollowing that are a	a significant (use of its c	ollection
а		Public exhibition			d		Loan	or exchange pro	grams		
b		Scholarly research			е		Othe	er			
С		Preservation for future	e generations								
4		ovide a description of the rt XIII.	organization's colle	ections and explain h	ow the	y furth	her th	e organization's e	xempt purpo	se in	
5		iring the year, did the org sets to be sold to raise fui								☐ Yes	□ No
Pa	rt I	Escrow and Cust Complete if the or X, line 21.			n 990	, Part	IV,	ine 9, or report	ed an amou		
1a		the organization an agent cluded on Form 990, Part								☐ Yes	□ No
b	If	"Yes," explain the arrange	ement in Part XIII a	and complete the fol	lowing	table:			Α	mount	
c	Ве	ginning balance						1c			
d	Ad	ditions during the year .						1d			
е		stributions during the yea									
f		ding balance						1.5			
2-		-							- Lilitura		
2a		d the organization include								_	∐ No
b		"Yes," explain the arrange		Check here if the ex	planati	on has	beer	provided in Part	XIII		
Pe	rt \	Endowment Fun Complete if the or		ered "Yes" on Forr	n 990	Part	TV I	ine 10			
		complete il tile of	gamzation anotic	(a) Current year		rior yea		(c) Two years back	(d) Three ye	ars back (e) Four years back
1 a	Beg	inning of year balance .	[5,416,046		4,135	5,988	4,133,62	3,	,637,880	3,058,776
b	Con	tributions		101,899		491	1,424	194,133	3	105,518	422,700
c	Net	investment earnings, gair	ns, and losses	642,328		788	3,634	-141,770		440,227	156,404
d	Gra	nts or scholarships									
е		er expenditures for faciliti programs	es	93,783				50,000		50,000	
f	Adn	ninistrative expenses .	[
g	End	of year balance	[6,066,490		5,416	5,046	4,135,988	3 4,	,133,625	3,637,880
2	Pro	ovide the estimated perce	ntage of the currer	nt year end balance ((line 1	g, colu	mn (a	ı)) held as:	•	•	
а		ard designated or quasi-e	-	24.570 %	•		`	•			
h	Pe	rmanent endowment >	72.020 %								
c		*****	410 %								
٠		e percentages on lines 2a		d equal 100%							
3а	Ar	e there endowment funds ganization by:			on that	t are h	eld ar	nd administered fo	or the		Yes No
		Unrelated organizations								3a(i	
	(ii) Related organizations								3a(i	i) No
b	If	"Yes" on 3a(ii), are the re	lated organizations	listed as required o	n Sche	dule R	? .			3b	
4	De	escribe in Part XIII the inte	ended uses of the o	organization's endow	ment f	unds.					
Pa	rt V	, ,									
		Complete if the or	7					1			
	Des	scription of property	(a) Cost or othe (investmen		or other	pasis (otner)	(c) Accumulated	uepreciation	(d)	Book value
		d					33,400	<u> </u>			33,400
b	Buil	dings				84	44,739		614,902		229,837
c	Leas	sehold improvements									

61,939

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

4,751

267,988

57,188

Part VII	Investments—Other Securities. Complete if the organization answered "Yes" on Form 990,	Part IV	ine 11h	See Form 990	Part X line	a 12
	(a) Description of security or category (including name of security)	(b) Book value			d of valuati	on:
	I derivatives					
(B)						
(C)						
(D)						
(E)						
(F)						
(G)						
(H)						
(I)						
Total. (Colum	n (b) must equal Form 990, Part X, col. (B) line 12.)	>				
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 990,	Part IV, I	ine 110	c. See Form 990,	Part X, lin	e 13.
	(a) Description of investment			(b) Book value	(c) Met	hod of valuation: nd-of-year market value
(1)						
(2)						
(3) (4)						
(5)						
(6)						
(7)						
(8)						
(9)						
(10)						
	n (b) must equal Form 990, Part X, col.(B) line 13.)					
Part IX	Other Assets.	Dowt IV liv		C F 000 D-	+ V U = 4 F	
	Complete if the organization answered 'Yes' on Form 990, I (a) Description	Part IV, III	ie IIu	. See Form 990, Pa		(b) Book value
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7) (8)						
(9)						
(10)						
	mn (b) must equal Form 990, Part X, col.(B) line 15.)				•	
Part X		Part IV liv	20 110	or 11f Soo Form	•	V line 25
1. (1) Federal	(a) Description of liabilit		ie iie	Of THE See FORM	990, Fait	(b) Book value
(2)						
(3)						
(4)						
(5)						
(6)						
(7)						
(8)						
(9)						
	n (b) must equal Form 990, Part X, col.(B) line 25.)			•		
	or uncertain tax positions. In Part XIII, provide the text of the footno		_			·

2

а

b

e

b

C 5

1

2

C

d

е 3

b

5

Part XIII

See Additional Data Table

4

Part XII

3

4

Schedule D (Form 990) 2020

Page 4

664,081

47,194

2,970,968

2,472,422

126,631

59,749

2,405,540

2,345,791

2,923,774

Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments Donated services and use of facilities Other (Describe in Part XIII.)

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

Subtract line **2e** from line **1** Investment expenses not included on Form 990, Part VIII, line 7b .

Add lines **4a** and **4b**

Total expenses and losses per audited financial statements

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

Subtract line 2e from line 1

Add lines **4a** and **4b**

Supplemental Information

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 . . .

Donated services and use of facilities . .

Prior year adjustments

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

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

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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

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

4a 4b

2a

2b

2c

2d

4a

4b

Explanation

2a

2b

2c

2d

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

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

537,450

126,631

47,194

126,631

47,194 12.555

2e

3

4c

5

3 4c 5

2e

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

Schedule D (Form 990) 2020

chedule D (Form 990) 2020	Page 5
Part XIII Supplemental Inform	nation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2020

Additional Data

Software ID: Software Version:

EIN: 44-0547802

Name: UNITED WAY OF GREATER ST JOSEPH

Supplemental Informati

Supplemental Information	T
Return Reference	Explanation
PART V, LINE 4:	SUCCESS BY 6 ENDOWMENT - THE FUNDS IN THIS ACCOUNT WILL BE USED TO SUPPORT THE SUCCESS BY 6 INITIATIVE. FUNDS IN THIS ACCOUNT INCLUDE DONOR RESTRICTED FUNDS. A TOTAL RETURN INVESTM ENT PHILOSOPHY WILL BE USED. UP TO 4% ANNUALLY OF THE 3-YEAR ROLLING AVERAGE OF THE TOTAL MARKET VALUE (MARKET VALUE TO BE DETERMINED AS OF THE LAST BUSINESS DAY OF THE PRECEDING Y EAR) OF THE ACCOUNT, CAN BE USED THE FOLLOWING YEAR AT THE UNITED WAY BOARD OF DIRECTORS. O DISCRETION. DISTRIBUTIONS WILL NEED TO BE APPROVED BY THE UNITED WAY BOARD OF DIRECTORS. O PERATING ENDOWMENT - THE FUNDS IN THIS ACCOUNT WILL BE USED TO REPLENISH ANY SMALL LOSSES SUSTAINED DURING NORMAL OPERATIONS. A TOTAL RETURN INVESTMENT PHILOSOPHY WILL BE USED. UP TO 4% OF THE 3-YEAR ROLLING AVERAGE OF THE TOTAL MARKET VALUE (MARKET VALUE TO BE DETERMIN ED AS OF THE LAST BUSINESS DAY OF THE PRECEDING YEAR), CAN FLOW INTO THE UNITED WAY OPERAT IONS FOR THE FOLLOWING YEAR OR BE USED AS THE BOARD DEEMS REASONABLE. DISTRIBUTIONS WILL N EED TO BE APPROVED BY THE UNITED WAY BOARD OF DIRECTORS. CRYSTAL CIRCLE ENDOWMENT - FUNDS IN THIS ACCOUNT INCLUDE PERMANENTLY RESTRICTED DONOR FUNDS. A TOTAL RETURN INVESTMENT PHIL OSOPHY WILL BE USED. UP TO 4% OF THE 3-YEAR ROLLING AVERAGE OF THE TOTAL MARKET VALUE (MAR KET VALUE TO BE DETERMINED AS OF THE LAST BUSINESS DAY OF THE PRECEDING YEAR) CAN FLOW INT O THE ANNUAL CAMPAIGN THE FOLLOWING YEAR TO FULFILL PERPETUAL CRYSTAL CIRCLE GIFTS FROM THE DONOR(S). DISTRIBUTIONS WILL NEED TO BE APPROVED BY THE UNITED WAY BOARD OF DIRECTORS. UNITED WAY ENDOWMENT - INVESTED AS A PART OF GENERAL RESERVES, THE UNITED WAY ENDOWMENT INCLUDES PERMANENTLY RESTRICTED DONOR FUNDS. UP TO 4% OF THE 3-YEAR ROLLING AVERAGE OF THE TO

TAL MARKET VALUE (MARKET VALUE TO BE DETERMINED AS OF THE LAST BUSINESS DAY OF THE PRECEDI NG YEAR), CAN FLOW INTO THE OPERATING ENDOWMENT ACCOUNT FOR THE FOLLOWING YEAR.

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION IS TAX-EXEMPT UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND HA S BEEN DETERMINED NOT TO BE A PRIVATE FOUNDATION. THEREFORE, NO INCOME OR EXCISE TAXES HAV E BEEN PROVIDED FOR IN THE FINANCIAL STATEMENTS. THE ORGANIZATION FOLLOWS THE STANDARD FOR EVALUATING UNCERTAIN TAX POSITIONS AND HAS DETERMINED NO LIABILITY SHOULD BE RECORDED FOR UNCERTAIN TAX POSITIONS.

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	RETURN OF PRIOR YEAR GRANTS AND ALLOCATIONS 12,555.

s

efile GRAPHIC print - DO NOT PROCESS As Filed Data
Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I

(Form 990)

Department of the

Internal Revenue Service Name of the organization

Treasury

Grants and Other Assistance to Organizations,

Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

► Go to <u>www.irs.gov/Form990</u> for the latest information.

OMB No. 1545-0047

LULUOpen to Public

DLN: 93493134058151

Inspection

Employer identification number

WALOU GREATER ST 303EFTI						44-0547802		
Part I General Informa	ation on Grants	and Assistance				•		
Does the organization main the selection criteria used to	tain records to sub o award the grants	stantiate the amount of or assistance?	the grants or assistance,	the grantees' eligibility	for the grants or assistanc	e, and	☑ Yes ☐ No	
Describe in Part IV the orga							E 163 E 18	
Grants and Other A that received more t	Assistance to Dom han \$5,000. Part II	nestic Organizations at can be duplicated if ad	ind Domestic Governme ditional space is needed.	ents. Complete if the o	rganization answered "Yes"	on Form 990, Part IV, I	ine 21, for any recipient	
(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 noncash assistance	(h) Purpose of grant or assistance	
1) See Additional Data								
2)								
3)								
4)								
5)								
5)								
7)								
3)								
9)								
10)								
11)								
12)								
2 Enter total number of section	on 501(c)(3) and g	overnment organization	s listed in the line 1 table			>	17	
Enter total number of other	organizations liste	d in the line 1 table .				<u> ▶ _</u>	17	
or Paperwork Reduction Act Notice	e, see the Instructio	ns for Form 990.		Cat. No. 50055	5P	!	Schedule I (Form 990) 2020	

(1) FLOOD RELIEF

(3) SCHOLARSHIPS

(5) TRANSPORTATION

(4) DENTAL ASSISTANCE

(2) COVID-19

(5)

(6)

(7)

Part IV

PART I, LINE 2:

Return Reference

Schedule I (Form 990) 2020

Part III

78,423

658

1,672

280

49

INOT ONLY REVIEWED BY THE UNITED WAY STAFF, BUT BY COMMUNITY VOLUNTEERS ON A YEARLY BASIS.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

196

Explanation

24,358 FAIR MARKET VALUE 11,073 FAIR MARKET VALUE

THE UNITED WAY MONITORS GRANT FUNDS BY REQUIRING GRANT RECIPIENTS TO SUBMIT TO THE UNITED WAY BUDGET FORMS ON AN ANNUAL BASIS. GRANT

RECIPIENTS MUST ALSO SUBMIT ANNUAL OUTCOME REPORTS DETAILING THEIR ACCOMPLISHMENTS. MONTHLY FINANCIAL STATEMENTS ARE ALSO REQUIRED PRIOR ITO A RELEASE OF AN AGENCY'S MONTHLY ALLOCATION. GRANTEES MUST ALSO PROVIDE TO THE UNITED WAY A YEAR-END REPORT AND AN UP-TO-DATE AUDIT CONDUCTED BY A PROFESSIONAL INDEPENDENT AUDITOR. OTHER SPECIFIC FINANCIAL MATERIALS MAY BE REQUESTED, AS NECESSARY. THIS INFORMATION IS

SUPPLIES

SUPPLIES

Schedule I (Form 990) 2020

(f) Description of noncash assistance

Page **2**

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

Additional Data

ST JOSEPH, MO 64507 **BOY SCOUTS-PONY EXPRESS**

1704 BUCKINGHAM ST JOSEPH, MO 64506

COUNCIL

Software ID: Software Version:

44-0546279

EIN: 44-0547802

Name: UNITED WAY OF GREATER ST JOSEPH

(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	

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

GENERAL OPERATING

ICOSTS

(f) Method of valuation (q) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance other) GENERAL OPERATING BIG BROTHERS AND BIG 43-6068464 501C3 28,525 ICOSTS

80,658

SISTERS 1202 SOUTH 28TH ST

501C3

(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 if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government OPERATING

Icosts

CATHOLIC CHARITIES 902 EDMOND STE 204 ST JOSEPH, MO 64501	43-0887779	501C3	68,649		GENERAL OF COSTS

CHILDREN'S MERCY HOSPITAL 44-0605373 501C3 26.460 GENERAL OPERATING

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

2401 GILLHAM RD KANSAS CITY, MO 64108

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government COMMUNITY MICCIONG 00 0100470 EA1C2 24 272 CENEDAL **OPERATING**

PROGRAM

CORPORATION	90-01004/9	50103	21,2/3		COSTS
CORPORATION					100515
700 OLIVE ST					
ST JOSEPH, MO 64501					
					1

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

ST JOSEPH, MO 64501

501C3 FAMILY GUIDANCE CENTER 44-0666362 218.117 GENERAL OPERATING 724 NORTH 22ND ST COSTS AND MED AID

(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 if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 44-0545910 501C3 303.686 INTERFAITH COMMUNITY IGENERAL OPERATING SERVICES COSTS AND COVID-19 200 CHEROKEE RELIEF

200 CHEROKEE
ST JOSEPH, MO 64504

LEGAL AID OF WESTERN 43-0824638 501C3 50,847

MISSOURI GENERAL OPERATING COSTS

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

106 SOUTH 7TH ST 4TH FLR ST JOSEPH, MO 64501

(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 (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government NORTHWEST MISSOURT 43-1496809 50103 142 475 IGENERAL OPERATING STS, FLOOD RELIEF,

ICOSTS AND BOOTH

CENTER

110111111120111120001112	10 1 10000	55165	, . , . ,	l .	
COMMUNITY SERVICES					COST
1203 NORTH 6TH ST					AND (
ST JOSEPH, MO 64501					

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

622 MESSANIE

ST JOSEPH, MO 64501

COVID-19 RELIEF. 501C3 63.077 SALVATION ARMY 44-0545998 GENERAL OPERATING

(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 (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) 43-0896903 501C3 6.098 GENERAL OPERATING SPECIALTY INDUSTRIES OF ST JOSEPH INC ICOSTS

3801 SOUTH | FONARD RD ST JOSEPH, MO 64503 ST JOSEPH SAFETY AND 44-0548468 501C3 55.236 IGENERAL OPERATING

HEALTH COUNCIL ICOSTS 118 SOUTH 5TH LOWER LEVEL

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

ST JOSEPH, MO 64501

(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 if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-1615018 501C3 61.255 THE CENTER GENERAL OPERATING

ISENSORY ROOM

902 EDMOND STE 203 ST JOSEPH, MO 64501

UNITED CEREBRAL PALSY OF NORTHWEST MISSOURI

GENERAL OPERATING COSTS AND ADULT

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

3303 FREDERICK AVE

ST JOSEPH, MO 64506

(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 if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

GENERAL OPERATING

COSTS AND COVID-19

RELIEF

YMCA	44-0552491	501C3	87,105		GENERAL OPERATING
315 SOUTH 6TH					COSTS
ST 10SEPH MO 64501					

180,036

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

501C3

31 JUSEPH, MU 04301

44-0552219

YWCA

304 NORTH 8TH

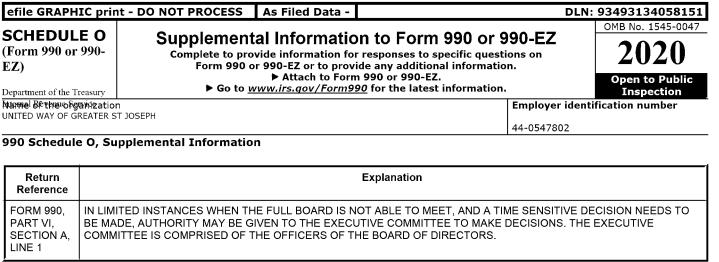
ST JOSEPH, MO 64501

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (c) IRC section organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 23-7116216 501C3 51.829 BARTLETT CENTER IGENERAL OPERATING 409 SOUTH 18TH COSTS AND ST JOSEPH, MO 64501 TEMERGENCY CASH

IFLOW

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493134058151 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) **2020** ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization **Employer identification number** UNITED WAY OF GREATER ST JOSEPH 44-0547802 **Types of Property** (d) (a) (b) (c) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art . . Art—Historical treasures Art—Fractional interests Books and publications 5,682 RETAIL VALUE Clothing and household goods Cars and other vehicles 7 Boats and planes . . Intellectual property . . . 34,312 FAIR MARKET VALUE Securities—Publicly traded . Χ 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . Securities—Miscellaneous . Qualified conservation contribution—Historic structures **14** Oualified conservation contribution—Other . . Real estate—Residential . Real estate—Commercial . 17 Real estate—Other . . Collectibles . . . 18 2,104 RETAIL VALUE 19 Food inventory . . . Χ 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . . 23 Scientific specimens . . Archeological artifacts . 29,194 RETAIL VALUE **PROTECTIVE** X 5 25 Other ► (EQUIPMENT) 2 24,358 RETAIL VALUE BUILDING Χ Other ▶ (SUPPLIES OTHER Χ 408 RETAIL VALUE Other ▶ (SUPPLIES 27 28 Other ▶ (_____ Number of Forms 8283 received by the organization during the tax year for contributions 0 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 isn't 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 nonstandard contributions? 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Nο **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J Schedule M (Form 990) (2020)

Schedule M (Form 990) (2020)	Page 2
is reporting in Part I, co	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization lumn (b), the number of contributions, the number of items received, or a combination of both. Also ny additional information.
Return Reference	Explanation
PART I, COLUMN (B):	THE FIGURE REPRESENTS THE NUMBER OF DONORS IN EACH CATEGORY.
	Schedule M (Form 990) (2020)



Return Explanation

FORM 990, PART VI, SECTION A, LINE 6

Return Explanation

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

THE GENERAL MEMBERSHIP ELECTS THE BOARD OF DIRECTORS AT THE ANNUAL MEETING. TERMS OF BOARD MEMBERS BEING ELECTED EACH YEAR. THE BOARD MEMBERS DURING THE YEAR IF A VACANCY SHOULD OCCUR.

Return Explanation
Reference

LINE 11B

FORM 990,	THE FORM 990 IS PREPARED BY AN INDEPENDENT ACCOUNTING FIRM. A COMPLETED FORM 990 IS REVIEWED BY
PART VI,	THE BOARD OF DIRECTORS AT A REGULAR MEETING PRIOR TO THE FILING WITH THE INTERNAL REVENUE SERVICE. $\;\;$
SECTION B,	

Return

Reference	·
FORM 990,	THE UNITED WAY OF GREATER ST JOSEPH REGULARLY AND CONSISTENTLY MONITORS AND ENFORCES
PART VI,	COMPLIANCE WITH ITS CONFLICT OF INTEREST POLICY BY: 1) MAINTAINING RECORDS OF THE CONFLICT OF
SECTION B,	INTEREST FORMS COMPLETED AND SIGNED EACH YEAR BY BOARD MEMBERS AND KEY STAFF; 2) REQUIRING
LINE 12C	MEMBERS TO DISCLOSE ANY DUALITY OR CONFLICT OF INTEREST ON ANY MATTER COMING TO A VOTE BY THE
	BOARD, PRIOR TO THAT VOTE BEING TAKEN. A MEMBER DISCLOSING A CONFLICT OF INTEREST MAY NOT VOTE ON
	THE MATTER AND THE MINUTES OF THE MEETING MUST REFLECT THAT A DISCLOSURE WAS MADE AND THAT THERE
	WAS AN ABSTENTION BY THAT MEMBER.

Explanation

Return

Reference	·
FORM 990, PART VI, SECTION B, LINE 15A	THE PROCESS FOR DETERMINING THE COMPENSATION OF THE PRESIDENT AND CEO OF THE UNITED WAY OF GREATER ST JOSEPH INCLUDES THE FOLLOWING STEPS: 1) THE PRESIDENT COMPLETES A SELF EVALUATION FORM THAT ENUMERATES THE GOALS AND ACCOMPLISHMENTS OF THE YEAR. THIS FORM IS SUBMITTED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. 2) THE EXECUTIVE COMMITTEE AND ANY BOARD MEMBER WHO WOULD LIKE TO PARTICIPATE MEETS WITH THE PRESIDENT AND REVIEWS THE PRESIDENT'S ACCOMPLISHMENTS FOR THE YEAR, MONITORING PROGRESS TOWARDS GOALS. 3) THE EXECUTIVE COMMITTEE CONSIDERS THE UNITED WAY WORLDWIDE SALARY SURVEY OF COMPARABLE UNITED WAYS AND OTHER NONPROFIT ORGANIZATIONS IN THE REGION. ALL MOTIONS ARE RECORDED IN EXECUTIVE COMMITTEE MINUTES. 4) THE EXECUTIVE COMMITTEE PRESENTS INFORMATION ON THE ENTIRE EVALUATION TO THE BOARD OF DIRECTORS, ALONG WITH A SALARY RECOMMENDATION FOR THE PRESIDENT. THE BOARD THEN REVIEWS THE INFORMATION PROVIDED AND ASKS ADDITIONAL QUESTIONS IF DESIRED. THE BOARD OF DIRECTORS MUST APPROVE THE RECOMMENDATION OR MAKE THEIR OWN RECOMMENDATION ON THE COMPENSATION OF THE PRESIDENT AND CEO. THE RECOMMENDATION IS VOTED ON BY THE BOARD AND RECORDED IN THE MINUTES OF THE DECEMBER BOARD MEETING. FORM 990, PART VI, SECTION B, LINE 15B: NO OTHER COMPENSATED INDIVIDUALS MEET THE IRS DEFINITION OF OFFICER OR KEY EMPLOYEE.

Explanation

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC AT THE UNITED WAY OF GREATER ST. JOSEPH OFFICE AT 118 S 5TH ST., ST. JOSEPH, MO 64501. ANY INDIVIDUAL OR ORGANIZATION WHO WOULD LIKE TO SEE THESE DOCUMENTS MAY DO SO THROUGH AN APPOINTMENT. THE PHONE NUMBER FOR THE UNITED WAY OF GREATER ST. JOSEPH IS (816)364-2381.

990 Schedule O, Supplemental Information Return Explanation Reference

FORM 990. RETURN OF PRIOR YEAR AWARDS 12,555. PART XI.

LINE 9:

Return Reference	Explanation
FORM 990 PAGE 2 PART III LINE 4B PROGRAM DESCRIPTION CONTINUED	FLOOD OF 2020 ON MONDAY, JULY 20, HEAVY RAINS CONTRIBUTED TO SIGNIFICANT FLOODING IN SOUTH ST. JOSEPH. MORE THAN 200 HOMES WERE IN THE PATH OF FLOOD WATERS AND MOST HAD SIGNIFICANT DAMAGE. UNITED WAY TOOK A LEADERSHIP ROLE IN HELPING THOSE EFFECTED BY COORDINATING AGENC IES, ORGANIZATIONS, CHURCHES AND VOLUNTEERS; CONNECTING THOSE IMPACTED WITH RESOURCES TO R ECOVER; AND HELPING DIRECTLY WITH FINANCIAL ASSISTANCE TO MEET UNMET NEEDS. UNITED WAY PAR TNERED WITH INTERSERY, ST. JOSEPH HABITAT FOR HUMANITY, COMMUNITY ACTION PARTNERSHIP, CATH OLIC CHARITIES, THE SALVATION ARMY AND AMERICAN RED CROSS, ALONG WITH LOCAL CHURCHES, ORGA NIZATIONS AND REGIONAL DISASTER RELIEF TEAMS TO ASSIST FAMILIES AND INDIVIDUALS IMPACTED B Y FLOODING. ASSISTANCE VARIED FROM MEETING IMMEDIATE NEEDS SUCH AS SHELTER, FOOD AND CLOTH ING TO MUCKING OUT HOMES, PROVIDING BUILDING SUPPLIES, REPLACING AND REPAIRING FURNACES AN D SUPPLYING KITCHEN CABINETS. FLOOD RELIEF EFFORTS WERE THE RESULT OF INTER-AGENCY COORDIN ATION AND TEAMWORK LEAD BY UNITED WAY. VOLUNTEERS FROM MISSOURI BAPTIST DISASTER RELIEF WE RE ON THE GROUND FOR MORE THAN ONE MONTH MUCKING OUT HOMES. THE CITY OF ST. JOSEPH AND BUC HANAN COUNTY PROVIDED DUMPSTERS, PORTA POTTIES AND OTHERS ITEMS. CREEK CLEAN UP WAS COMPLE TED BY TEAMS ORGANIZED BY CHRIS KOWALEWYCZ. INTERSERY, ALONG WITH LOCAL CHURCHES AND VOLUN TEERS, SERVED THOUSANDS OF MEALS. THE KEYS CHRISTIAN FELLOWSHIP HOSTED SEVERAL DISTRIBUTION DAYS WHERE FAMILIES COULD CONNECT WITH RESOURCES SUCH AS CHURCHES OF CHRIST DISASTER REL F, HOLY ROSARY CREDIT UNION, UNITED WAY AND PICK UP HOUSEHOLD AND BUILDING SUPPLIES. THE IBEW LOCAL 545 DONATED \$25,000 TO HIRE UNION ELECTRICAL CONTRACTORS TO HELP WITH ELECTRIC AL REPAIRS IN FLOODED HOMES. INTERSERY, COMMUNITY ACTION PARTNERSHIP, UNITED WAY, ST. JOSE PH HABITAT FOR HUMANITY, JOURNEY BAPTIST CHURCH, THE KEYS CHRISTIAN FELLOWSHIP, GRACE EVAN GELICAL CHURCH, LONG-TERM RECOVERY COMMUNITY ACTION PARTNERSHIP, UNITED WAY, ST. JOSE PH HABITAT FOR HUMANITY, JOURNEY BAPTIST CHURCH, THE KE

Return Reference	Explanation
FORM 990 PAGE 2 PART III LINE 4B PROGRAM DESCRIPTION CONTINUED	RT TO INDIVIDUALS, FAMILIES AND ORGANIZATIONS AS THEY NAVIGATED NEW NEEDS AND CHALLENGES C REATED BY THE PANDEMIC. THE UNITED WAY COVID-19 RELIEF FUND WAS ESTABLISHED IN MARCH 2020 TO PROVIDE ASSISTANCE TO INDIVIDUALS AND FAMILIES, AGENCIES AND COMMUNITIES THROUGHOUT THE GREATER ST. JOSEPH AREA THAT HAVE BEEN IMPACTED BY COVID-19. UNLIKE EVER BEFORE, UNITED WAY STAFF AND VOLUNTEERS HAD TO TRIAGE THE REQUESTS, FOCUSING ON BASIC HUMAN NEEDS AND THIN GS THAT WOULD RESULT IN IMMEDIATE PERSONAL DISRUPTION AND AGENCIES THAT SERVED COMMUNITIES BEING DIRECTLY AFFECTED BY COVID-19. THE UNITED WAY COVID-19 RELIEF FUND WAS ESTABLISHED AS A RESPONSE TO GENEROUS COMMUNITY MEMBERS WHO WANTED A WAY TO HELP THEIR NEIGHBORS. TO D ATE, UNITED WAY HAS ASSISTED MORE THAN TWO DOZEN FAMILIES WITH ASSISTANCE IN PAYING RENT, UTILITIES AND OTHER HOUSEHOLD EXPENSES TO HELP THEM AVOID FURTHER DISRUPTION TO THEIR STAB ILITY FOLLOWING INCOME INTERRUPTION BECAUSE OF THE PANDEMIC. ASSISTANCE WAS PROVIDED AFTER ALL OTHER RESOURCES-LOCAL, STATE AND FEDERAL- HAD BEEN ACCESSED AND EXHAUSTED. THROUGH T HE UNITED WAY COVID-19 RELIEF FUND, GRANTS WERE AWARDED TO EASTERSEALS AND ST. JOSEPH HABI TAT FOR HUMANITY TO PURCHASE PPE SO THER PROVIDED CONTINUE TO SERVE CLIENTS AND OPERATE IN A SAFE MANNER (VERY EARLY ON BEFORE OTHER RESOURCES BECAME WIDELY AVAILABLE). UNITED WAY ALS O PURCHASED PPE AND SUPPLIES FOR PARTINER AGENCIES, OTHER NON-PROFIT AGENCIES AND LOCAL CHI LDCARE PROVIDERS. IN AN EFFORT TO PREVENT FINANCIAL BARRIERS BECOMING A REASON A STUDENT C ANNOT PARTICIPATE IN INTERSERV'S VIRTUAL CLASSROOM OR REMOTE LEARNING PROGRAM, UNITED WAY PROVIDED A GRANT THROUGH THE UNITED WAY COVID-19 RELIEF FUND TO REIMBURSE INTERSERY FOR UP TO \$12,000. UNITED WAY STAFF ALSO CONNECTED LOCAL CHILDCARE PROVIDERS AND NON-PROFIT AGENCIES -58 TO RESOURCES THAT ALLOWED THEM TO CONTINUE TO SERVE OUR COMMUNITY, PROVIDE QUALITY OR RE AND KEEP STAFF EMPLOYED. SESOURCES INCLUDED: -2,300 DISTILES OF HAND SANTIZER THROUGH D ONATIONS FROM MOSAIC, ALTEC AND HOLLADAY DISTILL