## 990 **990**

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury

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

Internal Revenue Service ▶ Go to www.irs.gov/Form990 for instructions and the latest information. 04/30/2022 For the 2021 calendar year, or tax year beginning 05/01/2021 and ending C Name of organization METRO UNITED WAY INC D Employer identification number Check if applicable: R Doing business as 61-0444680 Address change Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Name change Room/suite 334 East Broadway 502-583-2821 Initial return Final return/terminated City or town, state or province, country, and ZIP or foreign postal code Louisville, KY 40202 G Gross receipts \$ 27.036.174 Amended return  $\mathbf{H}(\mathbf{a})$  Is this a group return for subordinates?  $\square$  Yes  $\ \mathbf{V}$  No Application pending F Name and address of principal officer: Adria Johnson 334 East Broadway, Louisville, KY 40202 **H(b)** Are all subordinates included? Yes No Tax-exempt status: 501(c)(3) 4947(a)(1) or 501(c) ( ) ◀ (insert no.) If "No." attach a list. See instructions. Website: ► www.metrounitedway.org **H(c)** Group exemption number ▶ Form of organization: Corporation Trust L Year of formation: Association 1917 M State of legal domicile: ΚY Part I **Summary** 1 Briefly describe the organization's mission or most significant activities: Metro United Way's mission is to improve lives and our community by engaging people to give, advocate and volunteer. Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets. 3 Number of voting members of the governing body (Part VI, line 1a) . . . . . 3 32 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 32 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 5 83 6 6 6,593 Total unrelated business revenue from Part VIII, column (C), line 12 7a 7a 0 Net unrelated business taxable income from Form 990-T, Part I, line 11 7b 0 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . . . . . . 48,045,932 25,151,453 Revenue 9 Program service revenue (Part VIII, line 2g) 18,739 21,541 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . . . . 568,368 514.560 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) . . . 568,430 85,554 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 49,201,469 25,773,108 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) . . . . . 15,868,103 17,851,532 14 Benefits paid to or for members (Part IX, column (A), line 4) . . . . 0 0 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 6,013,741 6,303,914 Professional fundraising fees (Part IX, column (A), line 11e) . . . . . . 16a 0 0 Total fundraising expenses (Part IX, column (D), line 25) ▶ b 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . . . . . 5,237,357 5,762,233 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 18 27,119,201 29,917,679 19 Revenue less expenses. Subtract line 18 from line 12 . . . . . 22,082,268 -4,144,571 Assets or designation of designation of the designa **Beginning of Current Year End of Year** 20 Total assets (Part X, line 16) 59,596,828 52,656,581 21 Total liabilities (Part X, line 26) . 5,923,739 3,381,842 22 Net assets or fund balances. Subtract line 21 from line 20 53,673,089 49,274,739 Signature Block Part II Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Sign Signature of officer Date Here Phillip Bond, CFO Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN Check | if **Paid** self-employed **Preparer** Firm's name Firm's EIN ▶ Use Only Firm's address ▶ Phone no.

Yes

May the IRS discuss this return with the preparer shown above? See instructions

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Part	Statement of Program Service According Check if Schedule O contains a response		s Part III	
1	Briefly describe the organization's mission:	is a first to any mic in the	<u> </u>	<u> </u>
2	Did the organization undertake any significant prior Form 990 or 990-EZ?			
	If "Yes," describe these new services on Sche			
3	Did the organization cease conducting, or services?			
	If "Yes," describe these changes on Schedule	O.		
4	Describe the organization's program service a expenses. Section 501(c)(3) and 501(c)(4) org the total expenses, and revenue, if any, for each	anizations are required to re	port the amount of grants and allo	
4a	(Code:) (Expenses \$5,687,1	16 including grants of \$	3,770,004 ) (Revenue \$	0 )
	We continued to raise and distribute immediate	crisis funding across our seve	en counties in response to the COVID	pandemic.
4b	(Code:) (Expenses \$4,754,26	33 including grants of \$	3,056,913 ) (Revenue \$	0)
	We provided 250,000+ people with needed service			Community,
	the United Community Care & Coordination Cen	ter, and other MUW-supported	l programs.	
4c	(Code: ) (Expenses \$ 4,188,0	34 including grants of \$	2.804.029 \ (Revenue \$	0)
40	Children in MUW-supported high quality early ca			
	peers. We expanded our youth success network			
	caregivers track their children's developmental		<u> </u>	- F
4d	Other program services (Describe on Schedule	*		
4	(Expenses \$ 9,719,139 including grants		nue \$ 21,541 )	
4e	Total program service expenses ▶	24,348,622		

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Part	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	163 V	INC
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	~	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I </i>	3		/
4	<b>Section 501(c)(3) organizations.</b> 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	,	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5	-	,
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	v	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8		,
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		,
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	10	,	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.			
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	,	
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		,
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII </i>	11c		,
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX </i>	11d		,
e f	Did the organization report an amount for other liabilities in Part X, line 25? <i>If</i> "Yes," <i>complete Schedule D, Part X</i> Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11e	V	,
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	,	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		,
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		~
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	4.41		
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	14b		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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.			
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on	16		·
18	Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	17		<b>'</b>
19	Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18		~
	If "Yes" complete Schedule G. Part III	10		ر ا

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

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . . . .

20a

20b

Part	IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		,
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	<b>V</b>	
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		~
b c	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 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	24d 25a		<i>'</i>
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		~
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? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28a		,
b b	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	28b 28c		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29 30	V	V
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	31		ν ν
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		,
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		_
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	35b 36		_
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		,
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	_	
Part			-	
	Check if Schedule O contains a response or note to any line in this Part V		. Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable   1a   55			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	~	

Part '	Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 2a 83			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	>	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		~
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O .	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		_
b	If "Yes," enter the name of the foreign country ▶			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		~
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	- C.D		
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a		~
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7с		~
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		~
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		~
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	0		
9	Sponsoring organizations maintaining donor advised funds.	8		
	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	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.	40		
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			
С	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		~
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		~
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~
4-	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 49532	4-		
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

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Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No"

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 32 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 1b 32 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 1 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 Did the organization have members, stockholders, or other persons who had the power to elect or appoint 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: 8a 1 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No **10a** Did the organization have local chapters, branches, or affiliates? 10a If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 13 ~ Did the organization have a written document retention and destruction policy? 14 14 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 Other officers or key employees of the organization . . . . . . . . . . . . . . . 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a 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 Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed ► IN, KY 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. ✓ Own website Other (explain on Schedule O) Another's website ☐ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 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 ▶ Phillip Bond, (502)292-6121

Part VI

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

☐ Check this box if neither the organization	n nor any relate	d org	aniz	atic	n c	ompe	nsa	ted any current	officer, director,	or trustee.
				•	C)					
(A)	(B)	Position (do not check more than one						(D)	(E)	(F)
Name and title	Average					is both		Reportable	Reportable	Estimated amount
	hours per week	officer and a director/tru					— <u> </u>	compensation from the	compensation from related	of other compensation
	(list any	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest co	Former	organization (W-2/	organizations (W-2/	from the
	hours for related	vidu	tutio	er	em	nest	ner	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC)	organization and related organizations
	organizations	or all tr	onal		ploy	e con		1000 1420)	1000 1420)	Totaled organizations
	below dotted line)	uste	trus		ee	per				
	dotted line)	ď	stee			Highest compensated employee				
Theresa Reno-Weber	50.00					۵				
President, CEO, and Board Secretary				~				182,391	0	15,645
Adria Johnson	50.00							102/071		10,010
President, CEO, and Board Secretary				~				175,628	0	16,881
David Lopez	50.00							110/020		10,001
Chief Development Officer						1		161,304	0	17,322
Benjamin Donlon	50.00							,,,,,,		,-
Chief Analytics Officer						~		111,041	0	14,785
Melody Murphy	50.00									
Chief Brand Officer						~		101,732	0	18,821
Daryle Unseld	50.00									
Chief Equity & Impact Officer						~		104,560	0	4,950
Phillip Bond	50.00									
Chief Financial Officer				~				147,681	0	-65,801
Lisa Bottorff	0.50									
Director		~						0	0	0
Pat Carver	1.00									
Treasurer		~						0	0	0
Ashley Duncan	0.50									
Director		~						0	0	0
Nicole Durbin	0.50									
Director		~						0	0	0
Mark Eddy	0.50	_								
Director		~						0	0	0
Henry Erk	0.50									
Director		~						0	0	0
Jose Gaztambide	0.50	_								
Director		~						0	0	0

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

				- (	C)					
(4)	(B)	(C) Position				(E)	(F)	(F)		
(A)	(B)			neck	more than one			(D) Reportable	(E)	(F) Estimated amount
Name and title	Average hours	box, unless person is both an officer and a director/trustee)						<u>compensation</u>	Reportable compensation	of other
	per week		_		_		<del></del>	from the	from related	compensation
	(list any hours for	di Vi	stitu	Officer	ey e	ighe	Former	organization (W-2/ 1099-MISC/	organizations (W-2/ 1099-MISC/	from the organization and
	related	dual	rtior	4	Key employee	st c	<u> </u>	1099-NEC)	1099-NEC)	related organizations
	organizations below	֓֞֞֞֞֓֓֟֝֟֝ <u>֚֚</u>	<u>a</u> t		oye	omp				
	dotted line)	Individual trustee or director	Institutional trustee		Ι Φ	ens				
			) H			Highest compensated employee				
Elaine Gravatte	1.00									
Board Chair		~						0	0	0
Keith Hamilton	0.50									
Director		~						0	0	0
Theo Hamilton	0.50									
Director		~						0	0	0
Pat Hargadon	0.50									
Director		~						0	0	0
Natalie Harris	0.50									
Director		~						0	0	0
Jerry Henderson	0.50									
Director		~						0	0	0
Aimee Jewell	0.50									
Director		~						0	0	0
Josh Kornberg	0.50									
Director		~						0	0	0
Stephen Lukinovich	0.50									
Director		~						0	0	0
Ashwin Netto	0.50									
Director		~						0	0	0
Greg Newbern	0.50									
Director		~						0	0	0
Kent Oyler	0.50									
Director		~						0	0	0
Lauren Peter	0.50	1								
Director		~						0	0	0
Judi Petty	0.50	]								
Director		~						0	0	0

Part VII Section A. Officers, Directors, 1	rustees,	Key I	Emį	plo	yee	s, an	d F	lighest Compe	nsated Em	oloyees	(continued)	
				(0	C)							
(A)	(B)	١,,			ition			(D)	(E)		(F)	
Name and title	Average	,				e than o is both		Reportable	Reportable	Estir	nated amount	
	hours					or/trust		compensation	compensation		of other	
	per week (list any	or Inc	Ing	♀	6	en Hi	Fo	from the organization (W-2/	from related organizations (M		mpensation from the	
	hours for	Individual to	stitu:	Officer	y er	ghes	Former	1099-MISC/	1099-MISC/		anization and	
	related organizations	lual	tion	,	l pic	st cc	-	1099-NEC)	1099-NEC)	relate	d organizations	
	below	Individual trustee or director	al tr		Key employee	mp						
	dotted line)	tee	Institutional trustee			Highest compensated employee						
			Φ			ted						
Marty Pollio	0.50											
Director		1						0		0	0	
Holly Prather	0.50											
Director		~						0		0	0	
Carlos Rivas	0.50											
Director		~						0		0	0	
Krish Sastry	0.50											
Director		~						0		0	0	
Holly Schifano	0.50											
Director		~						0		0	0	
Kelly Schulz	0.50											
Director		~						0		0	0	
Seema Sheth	0.50											
Director		~						0		0	0	
Woo Smith	0.50											
Director		~						0		0	0	
Tommy Wallace	0.50											
Director		~						0		0	0	
Kristen Williams	0.50											
Director		~						0		0	0	
Nicole Yates	0.50											
Director		~						0		0	0	
1b Subtotal							<b></b>	984,337		0	22,603	
c Total from continuation sheets to Part	VII, Section	n A					▶					
d Total (add lines 1b and 1c)							<b>&gt;</b>	984,337		0	22,603	
2 Total number of individuals (including but		d to th	ose	list	ted	above	e) w	ho received mor	e than \$100,0	000 of		
reportable compensation from the organi	zation 🟲							7				
											Yes No	
3 Did the organization list any former of							mpl	loyee, or highes	st compensa	ted		
employee on line 1a? If "Yes," complete S											· ·	
4 For any individual listed on line 1a, is the												
organization and related organizations	_	an \$	150,	000	)? [	f "Ye	s,"	complete Sched	dule J for su	ıch		
individual			•	•		•				· 4	<i>'</i>	
5 Did any person listed on line 1a receive of												
for services rendered to the organization	? If "Yes," c	compl	ete	Scr	nedu	ıle J f	or s	such person .		. 5	<i>'</i>	
Section B. Independent Contractors											<b></b>	
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.												
compensation from the organization. Repo	ort compen	Isatioi	וסז ר	rtne	ca	ienda	r ye	ar ending with or	within the or	ganizatio	n's tax year.	
(A)								(B)		(C)		
Name and business add							Description of services			Compensation		
Center for Women & Families, 927 South 2nd Street, Louisvil				le, KY 40203				erate 211 call cen		536,168		
UPIC Solutions, 334 Beechwood Road, Fort Mitche	II, KY 4101	7						ovide data manag			195,964	
Nimbus, PO Box 43911, Louisville, KY 40253							Str	rategic Marketing	Support \$		190,681	

Total number of independent contractors (including but not limited to those listed above) who

received more than \$100,000 of compensation from the organization ▶

#### Part VIII Statement of Revenue

		Check if Schedule O	contains a re	spon	se or note to an	y line in this Pa	rt VIII		🗆
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts,	1a	Federated campaigns		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues .		1b	0				
عَ ۾	С	Fundraising events .		1c	0				
rs,	d	Related organizations		1d	0				
اعًا ق	е	Government grants (co	ontributions)	1e	3,739,548				
ns, Sir	f	All other contributions,	gifts, grants,						
er.		and similar amounts not i	included above	1f	21,411,905				
혈된	g	Noncash contributions							
E G		lines 1a-1f		1g	\$ 179,013				
g g	h	Total. Add lines 1a-1f	f		▶	25,151,453			
					Business Code				
<u>c</u> e	2a	Rental income			531120	14,732	14,732	0	0
و چ	b	Administrative services	S		541200	6,809	6,809	0	0
gram Ser Revenue	С								
ameve	d								
Program Service Revenue	е								
P.	f	All other program serv	ice revenue .			0	0	0	0
	g	Total. Add lines 2a-2f				21,541			
	3	Investment income (i	_						
		other similar amounts)				201,949	0	0	201,949
	4	Income from investme	nt of tax-exem	pt bo	nd proceeds ►	0	0	0	0
	5	Royalties				0	0	0	0
		_	(i) Real		(ii) Personal				
	6a		6a	0	0				
	b		6b	0	0				
	C		3c	0	0				
	_d	Net rental income or (I		•		0	0	0	0
	7a	Gross amount from	(i) Securiti	es	(ii) Other				
		sales of assets other than inventory 7	1,57!	5,677	0				
4	h	Less: cost or other basis	7a 1,57.						
Revenue	D		7b 1.26:						
Ş.	•			3,066	0				
	c d			2,611		312,611	0	0	312,611
Other	8a	Gross income from	1	•		312,011	0	0	312,011
₹	oa	events (not including \$	nululaising						
		of contributions repo	rted on line						
		1c). See Part IV, line 1		8a					
	b	Less: direct expenses		8b					
	С	Net income or (loss) fr		g eve	nts <b>&gt;</b>				
	9a	Gross income from	m gaming						
		activities. See Part IV,	line 19 .	9a					
	b	Less: direct expenses		9b					
	С	Net income or (loss) fr	rom gaming ac	tivitie	es <b>&gt;</b>				
	10a	Gross sales of inve							
		returns and allowance	es	10a					
	b	Less: cost of goods so		10b					
	С	Net income or (loss) fr	rom sales of in	vento	1				
sn					Business Code				
e e	11a	Subcontract work for C		catio		34,223	34,223	0	0
scellaneo Revenue	b	Miscellaneous reimbur	rsements		900099	51,331	51,331	0	0
€ Se	C	A II . II							
Miscellaneous Revenue	d			•		0	0	0	0
	e	Total. Add lines 11a-1		•	<u> •</u>	85,554	40-0	_	
	12	Total revenue. See in	ISTRUCTIONS .		🗩 🛚	25.773.108	107.095	0	514.560

### Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a response	or note to any line	in this Part IX .	<del></del>	<u> </u>
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21 .	17,851,532	17,851,532		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and				
	foreign individuals. See Part IV, lines 15 and 16	0	0		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors,				
	trustees, and key employees	420,688	136,731	147,226	136,731
6	Compensation not included above to disqualified	120,000	100,701	117/220	100/101
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	4,491,028	1,891,321	779,401	1,820,306
8	Pension plan accruals and contributions (include	4,471,020	1,071,021	777,401	1,020,000
	section 401(k) and 403(b) employer contributions)	537,342	178,701	161,229	197,412
9	Other employee benefits	484,938	210,262	94,441	180,235
10	Payroll taxes	369,918	149,439	72,497	147,982
11	Fees for services (nonemployees):	307,710	147,437	12,471	147,702
··· a	Management	0	0	0	0
b	Legal	6,549	543	5,279	727
c	Accounting	59,900	0	59,900	0
d	Lobbying	0	0	0	0
e	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column				
	(A), amount, list line 11g expenses on Schedule O.) .	528,608	467,363	37,993	23,252
12	Advertising and promotion	596,495	247,449	89,010	260,036
13	Office expenses	700,709	417,462	86,024	197,223
14	Information technology	2,310,055	2,105,728	54,434	149,893
15	Royalties	0	0	0	0
16	Occupancy	331,367	136,416	46,840	148,111
17	Travel	19,144	8,400	570	10,174
18	Payments of travel or entertainment expenses				·
	for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings .	311,308	188,671	27,392	95,245
20	Interest	0	0	0	0
21	Payments to affiliates	594,157	237,663	95,065	261,429
22	Depreciation, depletion, and amortization .	239,311	95,725	38,289	105,297
23	Insurance	44,078	17,412	9,972	16,694
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
а	Membership dues	20,359	7,611	5,107	7,641
b	Miscellaneous expenses	193	193	0	0
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	29,917,679	24,348,622	1,810,669	3,758,388
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 ŠOP 98-2 (ASC 958-720)				

Part X Balance Sheet

3 Pledges and grants receivable, net 4 Accounts receivable, net 5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1), and persons described in section 4958(c)(3)(B). 7 Notes and loans receivable, net 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10 Less: accumulated depreciation 11 Investments—publicly traded securities 12 Investments—other securities. See Part IV, line 11 13 Investments—other securities. See Part IV, line 11 14 Intangible assets 15 Other assets. See Part IV, line 11 16 Total assets. See Part IV, line 11 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Escrow or custodial account liability. Complete Part IV of Schedule D 22 Loans and other payable to unrelated third parties 23 Secured mortgages and notes payable to unrelated third parties 24 Unsecured notes and loans payable to unrelated third parties 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D 26 Total liabilities. Add lines 17 through 25 26 Total liabilities. Add lines 17 through 25 27 Net assets without donor restrictions 28 Page 27 Restrictions 38 07,957,469 38 1,763,398 38 1,763,339 4 1,520,331 5 1,520,331 5 2,03,815 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			Check if Schedule O contains a response or	note	to any line in this Par	tX		
2   Savings and temporary cash investments   12,210,472   2   6,055,925   3   Pledges and grants receivable, net   8,888,128   3   7,763,396   4   Accounts receivable, net   1,520,341   5   Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons   0   5   0   0   0   0   0   0   0   0								
3   Pledges and grants receivable, net   230.485   4   1,520,341		1	Cash—non-interest-bearing			0	1	0
Accounts receivable, net   230,485   4   1,520,341		2	Savings and temporary cash investments		[	12,210,472	2	6,055,925
trustee, key employee, creator or formed officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		3	Pledges and grants receivable, net		[	8,888,128	3	7,763,396
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		4	Accounts receivable, net		[	230,485	4	1,520,341
Section   Comparison   Compa		5	trustee, key employee, creator or founder, subst	antial	contributor, or 35%		_	
under section 4958(f)(1)), and persons described in section 4958(c)(3)(8) . 0 6 0 7 Notes and loans receivable, net . 0 7 0 0 8 10 0 7 0 0 0 8 10 0 0 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		6				U	o o	0
7 Notes and loans receivable, net   0   7   0   0						0	6	0
8 Inventories for sale or use	'n	7			` ` ` ` ` ` _		_	
10a	šets							
10a	Ass							
b Less: accumulated depreciation 10b 5,326,753 2,038,152 10c 2,110,118 11 Investments — publicity traded securities 36,229,591 11 35,206,801 12 Investments — publicity traded securities			Land, buildings, and equipment: cost or other			0	9	0
11   Investments – publicly traded securities   36,229,591   11   35,206,801   12   Investments – other securities. See Part IV, line 11   13   0   0   14   Intangible assets   14   0   0   15   0   15   0   15   0   16   15   0   16   15   0   16   15   0   16   15   0   16   16   16   16   16   16   16								
12   Investments – other securities. See Part IV, line 11   13   10   13   10   14   13   10   14   14   15   15   15   16   15   15   16   15   16   16			· ·					2,110,118
13   Investments — program-related. See Part IV, line 11   14   14   16   15   15   15   16   16   16   16					-	36,229,591		35,206,801
14					-			0
15 Other assets. See Part IV, line 11   16 Total assets. Add lines 1 through 15 (must equal line 33)   59,596,828   16   52,656,581     17 Accounts payable and accrued expenses   3,132,805   17   1,940,618     18 Grants payable   16,365,589   18   1,343,817     19 Deferred revenue   0 19   0     20 Tax-exempt bond liabilities   0 20   0     21 Escrow or custodial account liability. Complete Part IV of Schedule D   0 21   0     22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons   0 22   0     23 Secured mortgages and notes payable to unrelated third parties   0 23   0     24 Unsecured notes and loans payable to unrelated third parties   0,073,500   24   0     25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D   80,845   25   97,407     26 Total liabilities. Add lines 17 through 25   5,923,739   26   3,381,842     27 Net assets with donor restrictions   38,073,297   27   37,957,469     28 Net assets with donor restrictions   38,073,297   27   37,957,469     29 Capital stock or trust principal, or current funds   29   30   20   30     29 Capital stock or trust principal, or current funds   30   30   31   31   31   32   32   30   30   30   31   33   30   30   31   30   30			, 0					0
16			•					0
17								0
18    Grants payable   1,636,589   18	_							
19    Deferred revenue			· ·					
Tax-exempt bond liabilities								
21 Escrow or custodial account liability. Complete Part IV of Schedule D						0		
22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			·			0		
trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 0 22 0 0 23 0 0 24 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					0	21	0	
Unsecured notes and loans payable to unrelated third parties	lities	22	trustee, key employee, creator or founder, substa	contributor, or 35%				
Unsecured notes and loans payable to unrelated third parties	abi		controlled entity or family member of any of thes	e pers	sons	0	22	0
Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D		23				0	23	0
parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D						1,073,500	24	0
26 Total liabilities. Add lines 17 through 25		25	parties, and other liabilities not included on lines	17–2	4). Complete Part X			
Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.  Net assets without donor restrictions								· · · · ·
and complete lines 27, 28, 32, and 33.  27 Net assets without donor restrictions		26				5,923,739	26	3,381,842
Net assets without donor restrictions	Seor			ck he	re ▶ ☑			
Net assets with donor restrictions Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds Total net assets or fund balances Total liabilities and net assets/fund balances  Net assets with donor restrictions 15,599,792 28 11,317,270 29 29 30 31 32 49,274,739 32 59,596,828 33 52,656,581	alai	27	Net assets without donor restrictions		[	38,073,297	27	37,957,469
Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.  29 Capital stock or trust principal, or current funds	ñ	28	Net assets with donor restrictions		[			11,317,270
29 Capital stock or trust principal, or current funds	Fund							
Paid-in or capital surplus, or land, building, or equipment fund	ō	29					29	
Statistical Part of the Computation of the Comput	ets						_	
32 Total net assets or fund balances	SS						_	
<b>33</b> Total liabilities and net assets/fund balances	τA					53.673.089		49.274.739
	Š							

Form 990 (2021) Page **12** 

Part	XI Reconciliation of Net Assets			
	Check if Schedule O contains a response or note to any line in this Part XI			V
1	Total revenue (must equal Part VIII, column (A), line 12)		25,77	3,108
2	Total expenses (must equal Part IX, column (A), line 25)		29,91	7,679
3	Revenue less expenses. Subtract line 2 from line 1		-4,14	4,571
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4	53,673,08		
5	Net unrealized gains (losses) on investments		-1,61	8,529
6	Donated services and use of facilities			0
7	Investment expenses			0
8	Prior period adjustments			0
9	Other changes in net assets or fund balances (explain on Schedule O)		1,36	4,750
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			
	32, column (B))		49,27	4,739
Part	XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			
			Yes	No
1	Accounting method used to prepare the Form 990:  Cash Accrual Other			
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		~
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or			
	reviewed on a separate basis, consolidated basis, or both:			
	Separate basis Consolidated basis Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	~	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
_	Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of			
С	the audit, review, or compilation of its financial statements and selection of an independent accountant? .	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain on		~	
	Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the			
Ja	Single Audit Act and OMB Circular A-133?	3a	~	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		•	
D	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.	3b	~	
	The state of the s	JU	•	

Form **990** (2021)

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

### **Public Charity Status and Public Support**

OMB No. 1545-0047

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

► Attach to Form 990 or Form 990-EZ.

► Attach to Form 990 or Form 990-EZ.

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

Open to Public

Inspection **Employer identification number** Name of the organization METRO UNITED WAY INC 61-0444680 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) ☐ A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12a, Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving а the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. b Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV. Sections A and D. and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . Provide the following information about the supported organization(s). (iii) Type of organization (i) Name of supported organization (ii) EIN (iv) Is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing support (see other support (see above (see instructions)) document? instructions) instructions) Yes No (A) (B) (C) (D)

(E)
Total

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . 33,051,570 27,433,872 23,894,734 28,048,932 25,151,453 137.580.561 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . 0 0 0 0 0 0 The value of services or facilities furnished by a governmental unit to the organization without charge . . . . 0 0 0 0 0 Total. Add lines 1 through 3. . . . 4 33,051,570 27,433,872 23.894.734 28,048,932 25,151,453 137.580.561 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . 37,005,852 Public support. Subtract line 5 from line 4 100,574,709 Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 **(b)** 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 7 Amounts from line 4 . . . . . . 27,433,872 33,051,570 23,894,734 28,048,932 25,151,453 137,580,561 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . 182,883 256,939 199,291 159,041 201,949 1,000,103 Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 0 0 0 0 0 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . . 965,672 74,652 102,178 134,858 568,430 85,554 **Total support.** Add lines 7 through 10 11 139,546,336 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 162.271 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) Section C. Computation of Public Support Percentage 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) . . . . . 72.07 % Public support percentage from 2020 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . 15 331/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization . . . . . . . . . . . . . . . . . . 331/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2021. 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 10%-facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II.)

<u> </u>	in the organization rails to quality	under the te	sts listed beit	Jw, piease co	inplete Fait	11.)	
	on A. Public Support						
	dar year (or fiscal year beginning in)	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
_	sold or services performed, or facilities						
	furnished in any activity that is related to the						
_	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
	•						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3						
	received from disqualified persons .						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000						
	or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
8	<b>Public support.</b> (Subtract line 7c from						
Coot:	on B. Total Support						
		(-) 0047	(I-) 0040	(-) 0010	(-I) 0000	(-) 000d	(6) T-+-1
	dar year (or fiscal year beginning in)  Amounts from line 6	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	<b>(e)</b> 2021	(f) Total
9							
10a	Gross income from interest, dividends, payments received on securities loans, rents,						
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less						
D	section 511 taxes) from businesses						
	acquired after June 30, 1975						
_	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included on line 10b, whether						
	or not the business is regularly carried on						
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First 5 years. If the Form 990 is for the	organization'	s first. second	. third. fourth.	or fifth tax ve	ar as a sectic	n 501(c)(3)
	organization, check this box and stop he	J			•		` ` ` `
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8	3, column (f), c	divided by line	13, column (f))		15	%
16	Public support percentage from 2020 Sch					16	%
Secti	on D. Computation of Investment In					-	
17	Investment income percentage for 2021 (	line 10c, colur	nn (f), divided b	by line 13, colu	ımn (f))	17	%
18	Investment income percentage from 2020					18	%
19a	331/3% support tests-2021. If the organ	ization did not	check the box	on line 14, a	nd line 15 is m	ore than 331/39	%, and line
	17 is not more than $33^{1}/_{3}\%$ , check this box	and <b>stop here</b>	. The organization	on qualifies as	a publicly supp	orted organizat	ion . 🕨 🗌
b	331/3% support tests-2020. If the organize						
	line 18 is not more than 331/3%, check this I	oox and <b>stop h</b>	nere. The organi	ization qualifies	as a publicly s	upported orgar	nization 🕨 🗌
20	Private foundation If the organization di	d not check a	hay on line 1/	10a or 10h	shock this hov	and cap inetru	ctions -

#### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

CCII	on 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 <b>Part VI</b> 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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2			
3а	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 <b>Part VI</b> when and how 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 <b>Part VI</b> what controls the organization put in place to ensure such use.	3c			
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.	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b			
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 <b>Part VI</b> what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)				
	purposes.	4c			
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 <b>Part VI</b> , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	F			
b	Type I or Type II only. Was any added or substituted supported organization part of a class already	5a			
_	designated in the organization's organizing document?	5b			
6	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI.</b>	5c			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7			
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).				
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in <b>Part VI.</b>	9a			
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b			
С	Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI.</b>	9c			
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated				
	supporting organizations)? If "Yes," answer line 10b below.				
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b			

Part IV Supporting Organizations (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization. 2 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No 1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. Complete **line 2** below. The organization is the parent of each of its supported organizations. *Complete line 3 below.* С The organization supported a governmental entity. Describe in **Part VI** how you supported a governmental entity (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b 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 Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

Schedule A (Form 990 or 990-EZ) 2021

Part	Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying instructions. All other Type III non-functionally integrated supporting organ			
Sect	on A-Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B-Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	on C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-functional		ntegrated Type III suppo	rting organization
•	(see instructions).	ally I	integrated Type III Suppo	Tilling Organization

Secti	on D-Distributions				Current Year
1	Amounts paid to supported organizations to accomplish	1			
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted		
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required-	–provide details in <b>Part</b>	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 whic	h the organization is res	ponsive		
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Secti	on E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2021	ıs	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b					
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from Section D, line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2021 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.				
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
С	Excess from 2019				
d	Excess from 2020				
е	Excess from 2021				

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

Page **8** 

Part VI	<b>Supplemental Information.</b> 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.)
	A, Part II, Line 10 - These amounts represent miscellaneous reimbursements that help offset expenses incurred for various
	ssions, along with other minor expenses such as the use of Metro United Way postage and copier machines by others.

Schedule A (Form 990 or 990-EZ) 2021

#### **SCHEDULE C** (Form 990 or 990-EZ)

### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

	nation E01(a)(4) (E) ar (6) area	mizationa, Complete Dort III			
	ection 501(c)(4), (5), or (6) orga of organization	Inizations: Complete Part III.		Employer iden	tification number
					ntification number
Part	O UNITED WAY INC	e organization is exempt unde	or coation FO1/a		61-0444680
1 2 3 Part 1 2 3 4a b	Provide a description of definition of "political campaign activit Volunteer hours for political campaign activit Volunteer hours for political Complete if the Enter the amount of any of Enter the amount of any of the organization incurred Was a correction made? If "Yes," describe in Part I-C Complete if the	f the organization's direct and incompaign activities."  y expenditures. See instructions cal campaign activities. See instructions eorganization is exempt under excise tax incurred by the organization ed a section 4955 tax, did it file For	ctions er section 501(or managers under m 4720 for this years section 501(or managers under m 4720 for this years section 501(or managers under m 4720 for this years section 501(or managers under m 4720 for this years section 501(or managers under m 4720 for this years section 501(or managers under m 4720 for this years where section 501(or managers under m 4720 for this years where wh	mpaign activities in Part	IV. See instructions for
1		ly expended by the filing organiz			
2	Enter the amount of the 527 exempt function acti	filing organization's funds contributies	uted to other org	anizations for section ▶ \$	
3	line 17b	experioritures. Add lines 1 and 2. 		▶ \$	Yes No
5	Enter the names, address organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, on ontributions received that were pro- fund or a political action committed	mber (EIN) of all se enter the amount p mptly and directly	ection 527 political organi paid from the filing organi delivered to a separate p	zations to which the filin zation's funds. Also enter political organization, suc
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Page **2** 

Part II-A		Complete if the organization section 501(h)).	Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).							
Α	Check •	if the filing organization belor address, EIN, expenses, and				liated group memb	er's name,			
В	Check ▶	<ul><li>if the filing organization chec</li></ul>	ked box A and '	'limited control" pr	ovisions apply.					
		Limits on Lob	bying Expendit	ures		(a) Filing	(b) Affiliated			
		(The term "expenditures" m	neans amounts	paid or incurred.	)	organization's totals	group totals			
•	la Total	lobbying expenditures to influence	e public opinion	(grassroots lobbyi	ng)					
	<b>b</b> Total	lobbying expenditures to influence	e a legislative bo	ody (direct lobbying	g)					
	<b>c</b> Total	lobbying expenditures (add lines	la and 1b) .							
	<b>d</b> Othe	r exempt purpose expenditures .								
	e Total	exempt purpose expenditures (ad	d lines 1c and 1	d)						
	f Lobb	ying nontaxable amount. Enter	the amount fr	rom the following	table in both					
		amount on line 1e, column (a) or (b) is	: The lobbying	nontaxable amoun	t is:					
		ver \$500,000		nount on line 1e.	-101					
		\$500,000 but not over \$1,000,000		15% of the excess	over \$500.000.					
		\$1,000,000 but not over \$1,500,000		10% of the excess						
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000.									
	Over \$17,000,000 \$1,000,000.									
	g Grassroots nontaxable amount (enter 25% of line 1f)									
	-	ract line 1g from line 1a. If zero or I	•							
		ract line 1f from line 1c. If zero or le								
	j If the	ere is an amount other than zero	on either line	1h or line 1i, did	•		Yes No			
	(So	me organizations that made a se See the	ection 501(h) ele e separate insti	ructions for lines	e to complete all 2a through 2f.)	of the five columi	ns below.			
		Lobbyin	g Expenditures	During 4-Year Av	/eraging Period □	I I				
	Ca	alendar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	<b>(d)</b> 2021	(e) Total			
2	2a Lobb	ying nontaxable amount								
		ying ceiling amount % of line 2a, column (e))								
	<b>c</b> Total	lobbying expenditures								
	<b>d</b> Gras	sroots nontaxable amount								
		sroots ceiling amount % of line 2d, column (e))								
	f Gras	sroots lobbying expenditures								

Schedule C (Form 990 or 990-EZ) 2021

Part	Complete if the organization is exempt under section 501(c)(3) and has NOT (election under section 501(h)).	filed	Form	5768		
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	iption of the lobbying activity.	Yes	No	Am	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?	~				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	~				
С	Media advertisements?		~			
d	Mailings to members, legislators, or the public?		~			
е	Publications, or published or broadcast statements?		<b>'</b>			
f	Grants to other organizations for lobbying purposes?	~			86	5,000
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	~			35	5,582
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		~			
i	Other activities?		~			
j	Total. Add lines 1c through 1i				121	,582
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		~			
b	If "Yes," enter the amount of any tax incurred under section 4912		_			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	\(-\				
Part I	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	)(5), (	or sec	tion		
	30 I(0)(0).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	163	NO
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization make only in-nouse lobbying experiantales of \$2,000 of less in the control of the property of the organization agree to carry over lobbying and political campaign activity expenditures from the			3		
Part I	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" O	)(5), c	or sec	tion	ne 3	, is
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb	ying				
_	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions	•	5			
Part	• • • • • • • • • • • • • • • • • • • •					
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up lis	t); Part	II-A, IIr	nes 1	and
	lule C, Part II-B, Line 1 - Lobbying state government to provide adequate funding for childcare and other	ctiviti	es to h	elp chil	dren	lo
be rea	dy to succeed in school, beginning with kindergarten.					

## SCHEDULE D (Form 990)

#### **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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

METRO UNITED WAY INC 61-0444680 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . . 1 0 2 Aggregate value of contributions to (during year) . 0 0 3 Aggregate value of grants from (during year) . . 600,000 0 4 Aggregate value at end of year . . . . . . . 4.543.595 0 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . ✓ Yes □ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ✓ Yes 
☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) . . . . 2c Number of conservation easements included in (c) acquired after 7/25/06, and not on a 2d Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 tax year ► Number of states where property subject to conservation easement is located ▶ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items. If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: 

chedu	e D (Form 990) 2021								Page <b>2</b>
Part	Organizations Maintaining	Collections of	Art. Hist	orical T	reasures	. or Ot	her Similar A	ssets (co	
3	Using the organization's acquisition, collection items (check all that apply):								
а	☐ Public exhibition		d [	Loan	or exchang	e progr	am		
b	☐ Scholarly research		e [						
С									
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.								
5	During the year, did the organization assets to be sold to raise funds rather							ilar · 🔲 <b>Ye</b> :	s 🗌 No
Part	IV Escrow and Custodial Arra	angements.							
	Complete if the organization 990, Part X, line 21.	answered "Yes"	on Forn	n 990, F	art IV, line	e 9, or	reported an a	mount on	Form
1a	Is the organization an agent, trustee	, custodian or oth	er interm	ediary fo	r contribut	ions or	other assets i	not	
	included on Form 990, Part X?							. 🗌 Ye	s 🗌 No
b	If "Yes," explain the arrangement in Pa	art XIII and comple	ete the fol	lowing ta	ıble:				
								Amount	
C	Beginning balance					10	;		
d	<b>5</b> .					1d	1		
е	Distributions during the year					1e	_		
f	Ending balance					1f			
2a	Did the organization include an amoun							-	s   No
	If "Yes," explain the arrangement in Pa	art XIII. Check here	e if the ex	planatior	nas been	provide	ed on Part XIII		
Par	Endowment Funds.  Complete if the organization	answered "Ves"	' on Forn	n 000 E	ort IV line	. 10			
	Complete if the organization	(a) Current year	(b) Prio		(c) Two year		(d) Three years ba	ok (a) Four	years back
1a	Beginning of year balance	27,495,488		,754,749		19,554	4,710,4		2,718,006
b	Contributions	246,306		,154,577		62,236	802,5		1,825,755
C	Net investment earnings, gains, and	240,300	20	,134,377	<u>'</u>	02,230	002,3	07	1,023,733
	losses	-288,936	1	,689,618		27,715	371,5	28	281,058
d	Grants or scholarships	0		0		0	0.5.2/0	0	0
е	Other expenditures for facilities and								
	programs	1,243,574		103,456	1	54,756	164,9	54	114,346
f	Administrative expenses	0		0		0		0	0
g	End of year balance	26,209,284	27	,495,488	5,7	54,749	5,719,5	54	4,710,473
2	Provide the estimated percentage of t	•		e (line 1g	, column (a	i)) held i	as:		
а	Board designated or quasi-endowment		<u>.</u> %						
b		13_%							
С	Term endowment ► 8.72 %	0	2007						
20	The percentages on lines 2a, 2b, and Are there endowment funds not in the			ation the	t are hold	and ad	ministered for	tha	
Sa	organization by:	•	_					[	Yes No
	(i) Unrelated organizations							. 3a(i)	<i>'</i>
	( )							. 3a(ii)	
b	If "Yes" on line 3a(ii), are the related o	•	•					. 3b	
4	Describe in Part XIII the intended uses		n's endo	wment fu	ınds.				
Part	VI Land, Buildings, and Equip Complete if the organization		' on Forn	n 990. F	art IV. line	e 11a.	See Form 990	). Part X. I	ine 10.
	Description of property	(a) Cost or ot	her basis	(b) Cost o	r other basis	(c)	Accumulated epreciation	(d) Book	
1a	Land	, , , , ,	0		403,218				402 210
b	Buildings	•	0		5,134,250		3,573,490		403,218 1,560,760
C	Leasehold improvements		0		0		0		0
	•								

0

0

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

1,866,712

32,691

**d** Equipment

146,140

2,110,118

0

1,720,572

. . ▶

32,691

Part VII	Investments – Other Securities.  Complete if the organization answered "Yes" on Form 990, Part I	V line 11h See F	orm 990 Part V line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial	derivatives		
. ,	eld equity interests		
(3) Other			
(A)			
(B)			
(C)			
(D) (E)			
(F)			
(G)			
(H)			
	mn (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 I	V, line 11c. See Fo	orm 990, Part X, line 13.
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	mn (b) must equal Form 990, Part X, col. (B) line 13.) .		
Part IX	Other Assets.		
I dit ix	Complete if the organization answered "Yes" on Form 990, Part I	V. line 11d. See F	orm 990. Part X. line 15.
	(a) Description	,	(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)	was the same to same the was 150 part V and 150 line 150		
Part X	mn (b) must equal Form 990, Part X, col. (B) line 15.)		
Part A	Complete if the organization answered "Yes" on Form 990, Part I line 25.	V, line 11e or 11f.	See Form 990, Part X,
1.	(a) Description of liability		(b) Book value
(1) Federal in			(b) Book value
	s due custodian funds		97,407
(3)	3 due custodian funds		77,407
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 25.)		97,407
	uncertain tax positions. In Part XIII, provide the text of the footnote to the organ		
organization's	s liability for uncertain tax positions under FASB ASC 740. Check here if the text	of the footnote has b	een provided in Part XIII . 🔲

Schedule D (Form 990) 2021 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 19,909,204 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 2 Net unrealized gains (losses) on investments . . . . . . 2a -1 618 529 Donated services and use of facilities 0 h Recoveries of prior year grants . . . . 0 Other (Describe in Part XIII.) . . . . . 0 Add lines 2a through 2d . . . . . . 2e -1,618,529 3 3 Subtract line **2e** from line **1** . . . . . 21,527,733 Amounts included on Form 990. Part VIII. line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 4b 4.245.375 Add lines 4a and 4b 4c 4,245,375 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) 5 25,773,108 Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Part XII Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . . . 25,672,304 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 2a 0 Prior vear adjustments 2b 0 Other losses . . . . . . . . . 2c 0 Other (Describe in Part XIII.) . . . . . 0 Add lines 2a through 2d . . . 2е 0 3 3 Subtract line 2e from line 1 . . . . . . . . 25,672,304 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 4a Other (Describe in Part XIII.) . . . . . . . . . . . . . . . 4b 4.245.375 Add lines **4a** and **4b** . . . . . . . . . . . 4c 4.245.375 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 5 29,917,679 Supplemental Information. Schedule D, Part V, Line 4 - Metro United Way intends to use the net income from its endowment funds for purposes approved by its Board of Directors and in accordance with the intentions of the donors who provided the funds. Schedule D, Part XII, Line 4b - Donor designated contributions

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

## SCHEDULE I (Form 990)

#### Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

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

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990.

Name of the organization **Employer identification number** METRO UNITED WAY INC 61-0444680 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990. Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of valuation 1 (a) Name and address of organization (b) EIN (c) IRC section (d) Amount of cash (e) Amount of (g) Description of (h) Purpose of grant (book, FMV, appraisal, or government (if applicable) grant noncash assistance noncash assistance or assistance other) (1) Sch I, Stmt 1 (10)(11)(12)112 2

Schedule I (Form 990) 2021 Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed. (a) Type of grant or assistance (c) Amount of (e) Method of valuation (book, (b) Number of (d) Amount of (f) Description of noncash assistance recipients cash grant noncash assistance FMV, appraisal, other) 3 5 6 Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information. Schedule I, Part I, Line 2 - Agencies are awarded grants to support specific programs or to accomplish specific objectives. Agencies are subjected to a program review of their finances and their track record in achieving their exempt purposes. Most agencies are also required to submit an annual or end of year grant report detailing the specific accomplishments of their supported program or initiative.

**METRO UNITED WAY INC** 

Form: **Schedule I (2021)** EIN: **61-0444680** 

Page: 1 Part II, Line 1

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
Name and address	2 Not 1 Fatherhood and Families 1600 West St Catherine Street	26-2914155	76,966	
IRC code section Method of valuation	Louisville, KY 40210 501(C)(3)			
Desc. of Non-Cash Asst. Purpose of grant	Parent and Child Time Programming			
Name and address	A Hand Up Community Resource Center PO Box 16066	82-4185771	16,336	
IRC code section Method of valuation Desc. of Non-Cash Asst.	Louisville, KY 40256 501(C)(3)			
Purpose of grant	Financial Literacy Project			
Name and address	Academy Of Music Production Ed & Development LLC 4425 Greenwood Avenue Louisville, KY 40211	47-1113120	78,421	
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(C)(3)			
Purpose of grant	To support youth programming			
Name and address  IRC code section	ACE Project Inc 2336 Standard Avenue Louisville, KY 40210	83-3117851	26,843	
Method of valuation Desc. of Non-Cash Asst.	501(C)(3)			
Purpose of grant	Ace Place Program			
Name and address	Adelante Hispanic Achievers Inc 4801 Southside Drive Louisville, KY 40214	20-2267012	9,415	
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(C)(3)			
Purpose of grant	After school tutoring, mentoring and enrichment programs			
Name and address	American Red Cross PO Box 1675 Louisville, KY 40201	53-0196605	950,835	
IRC code section Method of valuation Desc. of Non-Cash Asst.	501(C)(3)			
Purpose of grant	Fund raising partnership payments			
Name and address  IRC code section	Americana Community Center Inc 4801 Southside Dr Louisville, KY 40214 501(C)(3)	61-1251306	146,775	
Method of valuation				

Schedule I, Part IV, Statem	nent 1		METRO UNITED WAY INC
Desc. of Non-Cash Asst.			
Purpose of grant	After school programming and family education		
Name and address	Awake Ministries	26-4436314	20,833
	PO Box 1302		
	Shelbyville, KY 40066		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Provide emergency assistance		
Name and address	Backside Learning Center	37-1803514	28,835
	South 4th Street		
	Louisville, KY 40208		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Family education programming		
Name and address	Big Brothers Big Sisters	61-6057856	106,406
	1519 Gardiner Ln B		
	Louisville, KY 40218		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Youth mentoring		
Name and address	Black Community Development Corporation	61-1233868	104,168
	678 S 38th Street		
	Louisville, KY 40211		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	The EDge Afterschool Program		
Name and address	Blue River Services	35-1101603	16,092
	PO Box 547		
	Corydon, IN 47112		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Childcare and residential youth services		
Name and address	Boy Scouts Of America Lincoln Heritage Council Inc	61-0445839	17,499
	PO Box 36273		
	Louisville, KY 40233		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	providing programs for young people that build character.		
Name and address	Boys & Girls Clubs Of Kentuckiana	61-0568789	185,917
	1516 Story Ave	2. 2200.00	, <del>-</del> · ·
	Louisville, KY 40206		
IRC code section	501(C)(3)		
Method of valuation	( N-7		
Desc. of Non-Cash Asst.			
Purpose of grant	Youth services		
Name and address	Boye And Cirle Club Of Harrison County	35-1983078	5 252
ivaine and address	Boys And Girls Club Of Harrison County	35-1983078	5,252

Cahadula I Davi IV Statem			METRO LIMITED WAY INC
Schedule I, Part IV, Staten	600 East Chestnut St		METRO UNITED WAY INC
	Corydon, IN 47112		
IRC code section	501(C)(3)		
Method of valuation	(-/(-/		
Desc. of Non-Cash Asst.			
Purpose of grant	Supporting youth programming		
Name and address	Bridge Kids International	84-1681205	34,236
	501 West Kenwood Drive		
	Louisville, KY 40214		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Youth development and cultural promotion		
Name and address	Bridging the Gap Learning Academy	47-3322565	93,750
	1368 So 28th St		
IDO and another	Louisville, KY 40211		
IRC code section Method of valuation	501(C)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Bridging the Gap Learning Academy Program		
		04.405.4570	05.040
Name and address	Bullitt County Housing First 131 Garner Way	61-1854572	25,810
	Mt Washington, KY 40047		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Addresses homelessness in Bullitt County.		
Name and address	Bullitt County Public Schools	61-6001357	43,188
	1040 Highway 44 East		
	Shepherdsville, KY 40165		
IRC code section			
Method of valuation			
Desc. of Non-Cash Asst.  Purpose of grant	Support Teen Aged Parenting Program		
Name and address	California Area Family Development Center Inc	61-0668916	71,836
	1705 South 13th Street		
IRC code section	Louisville, KY 40210 501(C)(3)		
Method of valuation	301(0)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Childcare services and developmental programs		
Name and address	Center For Lay Ministries	31-0903413	28,242
	213 E Maple St		,
	Jeffersonville, IN 47131		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Provides emergency assistance		
Name and address	Center For Non-Profit Excellence	20-0040424	5,159
	323 W Broadway Suite 501		
	Louisville, KY 40202		
IRC code section	501(C)(3)		
Method of valuation			

Schedule I, Part IV, Statement 1			METRO UNITED WAY INC
Desc. of Non-Cash Asst.	December to the control of the		
Purpose of grant	Research, training and consultation		
Name and address	Center For Women & Families	61-0444846	145,445
	PO Box 2048		
IRC code section	Louisville, KY 40201 501(C)(3)		
Method of valuation	301(0)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Emergency and crisis assistance		
Name and address	Centro Latino Of Shelbyville Inc	02-0628043	33,804
	121 Main St		
	Shelbyville, KY 40065		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Immigrant programming		
Name and address	Change Today Change Tomorrow	84-3715550	35,000
	2803 South Floyd Street Suite 2A		
	Louisville, KY 40209		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Feed the West Program		
Name and address	Children Shouldn't Hunger	81-1022081	85,168
	1229 South Shelby Street		
	Louisville, KY 40202		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst. Purpose of grant	The Akoma Fellowship Program		
Name and address	Clark Co Youth Shelter	31-1126065	5,934
	PO Box 886		
IRC code section	Clarksville, IN 47131 501(C)(3)		
Method of valuation	301(0)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Provides 24-hour residential care for adolescents in crisis situations.		
Name and address	Communities In School Clark County	32-0015379	87,482
Haile alla addiess	1406 Fredrick St	32-0013378	01,402
	Jeffersonville, IN 47130		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	After school wrap-around support		
Name and address	Community Action of Southern Indiana	61-0660969	20,000
	201 East 15th Street		
	Jeffersonville, IN 47130		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Books for children and minority health initiative		

Schedule I, Part IV, Statem	ent 1		METRO UNITED WAY INC
ochedule i, i ait iv, otatem	PO Box 556		METRO ONTIED WAT INO
	LaGrange, KY 40031		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Emergency assistance		
Name and address	Community Coordinated Child Care Inc	23-7160437	180,736
	960 South Third Street		
	Louisville, KY 40203		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Assists assessed in Inserting and assistant for shilldens		
Purpose of grant	Assists parents in locating and paying for childcare.		
Name and address	Concordia Lutheran Church	61-0461819	44,977
	1127 East Broadway		
	Louisville, KY 40204		
IRC code section	501(C)(3)		
Method of valuation  Desc. of Non-Cash Asst.			
Purpose of grant	Doner designations		
Name and address	Council On Developmental Disabilities Inc	61-0476686	67,028
	1151 South Third Street		
IRC code section	Louisville, KY 40203		
Method of valuation	501(C)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Advocacy and support		
Name and address	Decode Project Inc	83-2280075	21,428
	2509 Portland Avenue		
	Louisville, KY 40212		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Literacy Mentors		
Name and address	Doors To Hope	75-3124022	9,073
	4333 Hazelwood Avenue		
	Louisville, KY 40215		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	After select total a		
Purpose of grant	After school tutoring		
Name and address	Dorman Preschool Center	61-0620554	86,700
	PO Box 853		
IDO and another	Shelbyville, KY 40066		
IRC code section  Method of valuation	501(C)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Childcare		
		A. A	
Name and address	Elderserve Inc	61-6024140	90,780
	411 E Muhammad Ali Blvd		
IRC code section	Louisville, KY 40202		
Method of valuation	501(C)(3)		
motilod of valuation			

Schedule I, Part IV, Statem	nent 1		METRO UNITED WAY INC
Desc. of Non-Cash Asst.			
Purpose of grant	Social services for seniors		
Name and address	Elevate Inc	20-5644799	9,131
	13701 Forest Bend Circle		
	Louisville, KY 40245		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Croup montaring for youth		
Purpose of grant	Group mentoring for youth		
Name and address	Evolve 502	83-1877240	48,668
	334 E Broadway		
IRC code section	Louisville, KY 40202 501(C)(3)		
Method of valuation	301(0)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Removing the persistent barriers to college education		
Name and address	Family And Children'S Place	61-0549561	449,456
	PO Box 3784	0. 00.000.	. 10, 100
	Louisville, KY 40201		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Provides services for children and families affected by abuse, neglect and violence.		
Name and address	Family Health Centers Of Southern Indiana	35-1842342	32,115
	1301 Akers Avenue		
	Jeffersonville, IN 47130		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.  Purpose of grant	Pharmactical supplies and volutneer recruitment and training		
	<u>·</u>		
Name and address	Family Scholar House Inc	61-1285124	44,125
	403 Reg Smith Circle Louisville, KY 40208		
IRC code section	501(C)(3)		
Method of valuation	301(0)(0)		
Desc. of Non-Cash Asst.			
Purpose of grant	Support for single parents		
Name and address	Global Game Changers Children'S Education	46-3268917	14,826
	201 East Main Street		
	Louisville, KY 40202		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Youth after school services		
Name and address	Goodwill Of Southern Indiana	35-1019658	114,948
	PO Box 2488		
IDO and and	Clarksville, IN 47131		
IRC code section	501(C)(3)		
Method of valuation Desc. of Non-Cash Asst.			
Purpose of grant	Childcare services and developmental programs		
- arpose or grant	ormadare dervices and developmental programs		

Schedule I, Part IV, Statem	ent 1	METRO UNITED WAY INC		
Name and address	Greater Louisville United Labor Picnic Inc 3000 Fern Valley Road Louisville, KY 40213	61-1387836	8,471	
IRC code section  Method of valuation	501(C)(4)			
Desc. of Non-Cash Asst.				
Purpose of grant	Designation			
Name and address  IRC code section	Harrison Co Community Services PO Box 308 Corydon, IN 47112 501(C)(3)	35-1378568	33,718	
Method of valuation  Desc. of Non-Cash Asst.	301(0)(3)			
Purpose of grant	Emergency assistance			
Name and address	Highland Park Community Development Corporation PO Box 16661 Louisville, KY 40256	80-0162257	20,126	
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)			
Purpose of grant	Out of school time programs for youth.			
Name and address	Hjw Career And Financial Literacy Institute PO Box 71 Shelbyville, KY 40066	20-3329409	20,516	
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)			
Purpose of grant	Financial stability efforts in Shelby and Oldham Counties			
Name and address	Home Of The Innocents 1100 E Market Street Louisville, KY 40203	61-0445834	20,237	
IRC code section	501(C)(3)			
Method of valuation  Desc. of Non-Cash Asst.				
Purpose of grant	Childcare center			
Name and address	Hoosier Hills Pact 35 N Public Square Salem, IN 47167	23-7351004	6,997	
IRC code section	501(C)(3)			
Method of valuation  Desc. of Non-Cash Asst.				
Purpose of grant	Victims services			
Name and address	Hope Health Clinic	46-5509958	23,178	
	1025 Sanibel Way LaGrange, KY 40031			
IRC code section Method of valuation	501(C)(3)			
Desc. of Non-Cash Asst.				
Purpose of grant	Hope Health Clinic			
Name and address	Hope Southern Indiana 702 E Market Street	35-1128300	96,801	
IRC code section	New Albany, IN 47150 501(C)(3)			

Schedule I, Part IV, Statem	ent 1		METRO UNITED WAY INC
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Retired and senior volunteer program		
Name and address	HopeBuss	83-2485907	15,000
	3131 South 2nd Street		
	Louisville, KY 40208		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Support violence response events		
Name and address	House Of Ruth Inc	61-1231355	7,920
	607 E St Catherine St		
	Louisville, KY 40203		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Housing and basic needs assistance		
Name and address	Jewish Community Of Louisville	61-0445859	17,571
	3600 Dutchmans Lane		
	Louisville, KY 40205		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Services for seniors		
Name and address	Jewish Family And Career Services	61-0444704	82,661
	3587 Dutchmans Lane		
	Louisville, KY 40205		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Family counseling		
Name and address	Kentucky Chamber of Commerce	61-1290625	10,000
	464 Chenault Road		
	Frankfort, KY 40601		
IRC code section	501(C)(6)		
Method of valuation			
Desc. of Non-Cash Asst.	Address stiminal justice issues in Kentucky		
Purpose of grant	Address criminal justice issues in Kentucky		
Name and address	Kentucky Youth Advocates Inc	61-0929390	62,513
	11001 Bluegrass Pkwy Ste 100		
	Louisville, KY 40299		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Variable access advisors v		
Purpose of grant	Youth case advocacy		
Name and address	Kids Center For Pediatric Therapies	61-0492378	47,743
	982 Eastern Pkwy Box 6		
IDO I	Louisville, KY 40217		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Outpotions repoblished on for children		
Purpose of grant	Outpatient rehabilitation for children		

Schedule I, Part IV, Statem	ent 1		METRO UNITED WAY INC
Name and address  IRC code section  Method of valuation	Legal Aid Society Inc 425 W Muhammad Ali Blvd Louisville, KY 40202 501(C)(3)	61-0537626	47,241
Desc. of Non-Cash Asst.			
Purpose of grant	Family advocacy		
Name and address	LHome 11269 Berry Boulevard Louisville, KY 40215	45-4127209	8,333
Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Financial Navigator Program		
Name and address	Lifespan Resources Inc PO Box 995 New Albany, IN 47151	35-1306887	41,138
IRC code section  Method of valuation  Desc. of Non-Cash Asst.  Purpose of grant	501(C)(3)  Transportation services		
Name and address	Lighthouse Academy At Newburg 5312 Shepherdsville Road Louisville, KY 40228	61-1362760	28,336
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Out of school time programs for youth.		
Name and address	Louisville Asset Building Coalition 334 East Broadway Louisville, KY 40202	61-0444680	50,537
IRC code section  Method of valuation  Desc. of Non-Cash Asst.  Purpose of grant	501(C)(3)  Financial education and tax services		
Name and address	Louisville Central Community Ctrs 1300 W Muhammad Ali Blvd Louisville, KY 40203	61-0590743	153,088
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant Name and address	Childcare and workforce solutions  Louisville Jefferson County Metro Government 710 W Ornsby Suite 201	32-0049006	9,167
IRC code section Method of valuation Desc. of Non-Cash Asst. Purpose of grant	Louisville, KY 40203  Financial coaching		
Name and address	Louisville Urban League 1535 W Broadway Louisville, KY 40203 501(C)(3)	61-0444771	80,786

Schedule I, Part IV, Statem	ent 1		METRO UNITED WAY INC
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Financial independence and youth services		
Name and address	Maryhurst Inc	31-1542209	60,906
	1015 Dorsey Lane		
	Louisville, KY 40223		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Decidential vente are success		
Purpose of grant	Residential youth programs		
Name and address	MOLO Village CDC	27-5347893	26,836
	1407 W Jefferson Suite120		
IDC and anotion	Louisville, KY 40201		
IRC code section  Method of valuation	501(C)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Education and NTI Hub		
		04 0007004	
Name and address	Multi Purpose Caa PO Box 305	61-0867061	5,099
	Shelbyville, KY 40065		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Services for seniors		
Name and address	NAFC Education Foundation Inc	20-2552199	5,771
	2813 Grantline Road		
	New Albany, IN 47150		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Early education programs		
Name and address	Neighborhood House	61-0445842	73,396
	201 N 25th Street		
	Louisville, KY 40212		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst. Purpose of grant	Youth development		
	·		
Name and address	New Century Fellowship Christian Church	47-1310903	15,650
	1875 Farnsley Road Louisville, KY 40216		
IRC code section	501(C)(3)		
Method of valuation	301(0)(0)		
Desc. of Non-Cash Asst.			
Purpose of grant	Employability Management		
Name and address	New Directions Housing Corp	61-0715630	111,700
	1000 E Liberty Street	01 01 10000	111,100
	Louisville, KY 40204		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Youth services		

Schedule I, Part IV, Stateme	ent 1		METRO UNITED WAY INC
Name and address	Oldham County Public Schools 6165 W Hwy 146 Crestwood, KY 40014	61-6001306	38,620
IRC code section  Method of valuation	501(C)(3)		
Desc. of Non-Cash Asst.	W. II.		
Purpose of grant	Youth services		
Name and address	Oldham County Health Department 1786 Commerce Pkwy La Grange, KY 40031	61-1035072	21,899
IRC code section  Method of valuation  Desc. of Non-Cash Asst.			
Purpose of grant	Protecting and promote community health and safety		
Name and address	Oldham County Public Library 308 Yager Avenue La Grange, KY 40031	61-0595340	5,934
IRC code section  Method of valuation  Desc. of Non-Cash Asst.  Purpose of grant	Early education programs		
		64 4044400	60.400
Name and address	Operation Care Inc PO Box 1393 Shelbyville, KY 40066	61-1211189	60,422
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Emergency shelter and transitional housing		
Name and address	Options Unlimited 205 Castlerock Drive Shepherdsville, KY 40165	61-1127049	8,867
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Student transition/employment programs		
Name and address	Our Place Drug & Alcohol Education Services Inc PO Box 8 Mount St Francis, IN 47146	31-1202976	7,616
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Youth services		
Name and address	Personal Counseling Services 1205 Applegate Lane Clarksville, IN 47129	31-0919635	33,583
IRC code section	501(C)(3)		
Method of valuation  Desc. of Non-Cash Asst.			
Purpose of grant	Mental health counseling		
Name and address	Play Cousins Inc	82-2811602	122,774
IRC code section	401 Northwestern Pkwy Louisville, KY 40212 501(C)(3)	32 23.133E	,

Schedule I, Part IV, Statem	nent 1		METRO UNITED WAY INC
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Early childhood developmental screening		
Name and address	Prichard Committee For Academic Excellence 271 W Short St Suite 202 Lexington, KY 40507	61-1026214	21,272
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Advocacy		
Name and address	Rauch Inc 845 Park Place	35-1011521	36,984
IRC code section	New Albany, IN 47150		
Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Early intervention programs for children and adults		
Name and address	Robert Jamison Ministries Inc 1716 Theresa Avenue Louisville, KY 40216	27-4782044	21,948
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Project Inspire		
Name and address	Salt And Light Community Development 3960 Cane Run Road Louisville, KY 40211	46-2341396	5,034
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Danas dasimastica		
Purpose of grant	Donor designation		
Name and address	Salvation Army Louisville 216 W Chestnut Street Louisville, KY 40202	58-0660607	88,516
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Emorgoney conjetence		
Purpose of grant	Emergency assistance		
Name and address	Salvation Army Southern Indiana 2300 Green Valley Rd New Albany, IN 47151	58-0660607	55,796
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Housing pilot partnership		
Name and address	Seven Counties Services 101 W Muhammad Ali Blvd Louisville, KY 40202	31-0939757	26,318
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Crisis and information center		

Schedule I, Part IV, Stateme	ent 1		METRO UNITED WAY INC
Name and address	Shelby County Public Schools 1155 Main Street Shelbyville, KY 40065	61-6001356	74,453
IRC code section Method of valuation			
Desc. of Non-Cash Asst.  Purpose of grant	Early education programs		
Name and address	Shepherdsville First Church Of The Nazarene	61-1278159	6,948
	213 North Maple Street Shepherdsville, KY 40165	61-12/6159	0,940
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Donor designation		
Name and address	Skillz 4 Life	47-2287725	140,993
	204 East Jacob Street Louisville, KY 40203		7,000
IRC code section  Method of valuation	501(C)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	OST and Trauma Resilience and EC Ed and K Readiness		
Name and address	Sowing Seeds With Faith 1300 W Muhammad Ali Blvd Louisville, KY 40203	81-4862518	5,756
IRC code section  Method of valuation  Desc. of Non-Cash Asst.	501(C)(3)		
Purpose of grant	Youth program services		
Name and address	Spalding University 981 S Third Street	61-0444780	38,000
IRC code section	Louisville, KY 40203 501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Leverage Project		
Name and address	St Benedict Center 946 S 25th Street Louisville, KY 40210	61-0719980	38,939
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	After eah call and automorphisms		
Purpose of grant	After school and summer programming	04.0054500	40.007
Name and address	St George'S Scholar Institute 1508 W Kentucky Street Louisville, KY 40210	61-0651560	49,607
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Out of school time programs for youth.		
Name and address	Summerbridge Louisville Inc 902 South Shelby Street Louisville, KY 40203	31-1695835	12,500
IRC code section	501(C)(3)		

Schedule I, Part IV, Statem	nent 1		METRO UNITED WAY INC
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Youth programming		
Name and address	TECH-Nique	83-2267785	35,000
namo ana adaroso	10415 Vantage Road	00 2201100	33,333
	Louisville, KY 40299		
IRC code section	501(C)(3)		
Method of valuation	301(0)(3)		
Desc. of Non-Cash Asst.	To be also a Fator and a second in the Occasion Observed Days Occasion International		
Purpose of grant	Technology Entrepreneurship to Create Change Boss Summer Internship Program		
Name and address	<del>-</del>	24 0002720	04.074
Name and address	The Arthur S Kling Center Inc	31-0993739	21,371
	219 West Ormsby Ave		
	Louisville, KY 40203		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	A senior center that serves older adults both directly and through links to		
	other providers.		
Name and address	The De Paul School	61-0711082	17,000
	1925 Duker Avenue		,
	Louisville, KY 40205		
IRC code section	501(C)(3)		
	301(0)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Designation		
Name and address	The Food Literacy Project	20-5014424	88,059
	9001 Limehouse Land		
	Louisville, KY 40222		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
	Depar designation		
Purpose of grant	Donor designation		
Name and address	Tiger Strike Martial Arts Academy Inc	82-2820508	23,294
	2812 Crums Lane		
	Louisville, KY 40216		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Youth program services		
Name and address	Tri-County Community Action Agency	61-0856637	12,149
Name and address	1015 Dispatchers Way	01 0000007	12,140
	•		
IDO and a section	LaGrange, KY 40031		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Senior day services and senior telecare		
Name and address	Turnaround Resource Center	61-1127221	18,691
	PO Box 7		
	Lebanon Junction, KY 40150		
IRC code section	501(C)(3)		
Method of valuation	\-/\-/		
Desc. of Non-Cash Asst.			
Dogo. Or Non-Odali Maal.			

Schedule I, Part IV, Staten	nent 1		METRO UNITED WAY INC
Purpose of grant	Help lift up and encourage persons self worth and life skill successes		
Name and address	United Crescent Hill Ministry	51-0166794	5,234
	150 State Street		
	Louisville, KY 40206		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	After cohool youth programs		
Purpose of grant	After school youth programs		
Name and address	United Way Of Greater Cincinnati Inc	31-0537502	20,467
	2400 Reading Rd		
IRC code section	Cincinnati, OH 45202 501(C)(3)		
Method of valuation	501(0)(5)		
Desc. of Non-Cash Asst.			
Purpose of grant	Donor designations		
		24 4400705	<i>E</i> 400
Name and address	United Way of Kentucky Inc 334 E Broadway Ste 325 PO Box 4653	31-1106795	5,100
	Louisville, KY 40204		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Provides support services for United Ways in the state of Kentucky		
Name and address	Uspiritus Inc	61-0471572	14,089
Name and address	2125 Goldsmith Lane	01-04/13/2	14,003
	Louisville, KY 40218		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Provides residential and outpatient treatment for children and youth with		
	emotional disabilities.		
Name and address	Visually Impaired Preschool Services Inc	61-1061973	14,672
	1906 Goldsmith Lane		
	Louisville, KY 40218		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Early intervention programs for visually impaired students		
Name and address	Wellspring	31-1020023	23,366
	PO Box 1927		
	Louisville, KY 40201		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Martal bank bank and the state Penting and accompany to be and a		
Purpose of grant	Mental health crisis stabilization and supportive housing		
Name and address	Wesley House Community Services	61-0449663	90,832
	5114 Preston Highway		
	Louisville, KY 40213		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Employment convice councelling and youth brigade		
Purpose of grant	Employment service counselling and youth brigade		
Name and address	Ymca Of Greater Louisville Inc	61-0444843	213,550

Schedule I, Part IV, Staten	nent 1		METRO UNITED WAY INC
	545 South 2nd Street		
	Louisville, KY 40202		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Childcare programs		
Name and address	Young Adult Development In Action Inc	61-1374470	5,072
	714 South Clay		
	Louisville, KY 40203		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Workforce development		
Name and address	Youth Build - Young Adult Development In Action	61-1374470	9,055
	800 South Preston Street PO Box 638		
	Louisville, KY 40203		
IRC code section	501(C)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			

Purpose of grant

Youth program services

### **SCHEDULE J** (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Compensation Information

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

Open to Public Inspection

61-0444680

**METRO UNITED WAY INC** 

Employer identification number

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

Schedule J (Form 990) 2021

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

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

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

Note: The sum of columns (B)(I)-(III) to	. 000	(B) Breakdown of W-2 ar			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(i)–(D)	in column (B) reported as deferred on prior Form 990
Theresa Reno-Weber, President,	(i)	182,202	0	2,081	9,098	4,655	198,036	0
CEO, and Board Secretary	(ii)	0	0	0	0	0	0	0
Adria Johnson, President, CEO,	(i)	175,013	0	1,538	8,682	7,276	192,509	0
and Board Secretary	(ii)	0	0	0	0	0	0	0
David Lopez, Chief Development	(i)	161,009	0	1,758	7,525	8,334	178,626	0
Officer 3	(ii)	0	0	0	0	0	0	0
	(i)							
4	(ii)							
	(i)							
5	(ii)							
	(i)							
6	(ii)							
	(i)							
7	(ii)							
-	(i)							
8	(ii)							
	(i)							
9	(ii)							
_	(i)							
10	(ii)							
	(i)							
11	(ii)							
•••	(i)							
12	(ii)							
-12	(i)							
13	(ii)							<del></del>
	(i)							
14	(ii)							
17	(i)							
15	(ii)							
10	(i)							
16	(ii)							
16	1.17							

Schedule J (Form 990) 2021 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Schedule J, Part II - Theresa Reno-Weber resigned from Metro United Way effective July 30, 2021. She was replaced as President and Chief Executive Officer by Adria Johnson on August 1, 2021.

## **SCHEDULE M** (Form 990)

# **Noncash Contributions**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

► Attach to Form 990.

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

Name of the organization Employer identification number **METRO UNITED WAY INC** 61-0444680

Part	Types of Property							
		(a) Check if applicable	<b>(b)</b> Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			
1	Art—Works of art							
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded		13	179 013	Market Value			
10	Securities—Closely held stock .		- 13	177,010	Warket Value			
11	Securities—Partnership, LLC,							
	or trust interests							
12	Securities-Miscellaneous							
13	Qualified conservation							
	contribution—Historic							
	structures							
14	Qualified conservation							
	contribution—Other							
15	Real estate – Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()							
27	Other ► ()							
28	Other ► (							
29	Number of Forms 8283 received	by the ord	ganization during the tax v	ear for contributions for				
	which the organization completed				29	0		
							Yes	No
30a	During the year, did the organization	tion receive	by contribution any prope	erty reported in Part I. lines	1 through			
	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					30a		~
b	If "Yes," describe the arrangemen		<del>-</del> ·					
31	Does the organization have a		otance policy that require	es the review of anv no	onstandard			
	_					31	~	
32a	Does the organization hire or use	e third part	ies or related organization	s to solicit, process, or se	ell noncash			
		•	•			32a	~	
b	If "Yes," describe in Part II.							
33	If the organization didn't report an	amount in	column (c) for a type of pro	perty for which column (a) i	s checked.			
-	describe in Part II.		( )	, , ,	,			

Schedule M (Form 990) 2021 Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information. Schedule M, Part I, Line 32b - Some donors contribute publicly traded stock to Metro United Way. Metro United Way's policy is to sell the contributed stock immediately and value the gift at the fair market value on the date ownership of the stock is transferred from the donor to Metro United Way.

### **SCHEDULE O** (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for the latest information. Open to Public Inspection

Name of the organization	Employer identification number
METRO UNITED WAY INC	61-0444680
Form 990, Part III, Line 1 - At Metro United Way, we envision a community in which everyone can access ed	ducation that inspires and
equips, economic mobility that meets needs and builds futures, and health that provides strength and hop	
empowers communities to advance equity and share opportunities for all. We make connections that creat	
education, pathways out of poverty to prosperity, and addressing urgent, short-term needs. With the help of	
advocates across the seven counties we serve, this past year we were able to make an impact on our com	
dayoutos doloss the seven countries the servey this past your the field able to make an impact on our confi	
Form 990, Part VI, Section B, Line 11b - The IRS Form 990 is reviewed by Harding, Shymanski & Company	P.S.C the independent
accounting firm that conducted Metro United Way's most recent audit. It is also reviewed by the Metro Unit	
behalf of the Board of Directors. A copy of the 990 is provided to every member of the Board of Directors p	
	9
Form 990, Part VI, Section B, Line 12c - All members of the Metro United Way Board of Directors, and all er	nployees of Metro United Way
are required to disclose any potential conflicts of interest on an annual basis. In addition, all employees me	
committees on which they serve. These disclosures are reviewed by both the Chief Executive Officer (CEC	
Human Resources. Metro United Way employees are prohibited from serving on boards or committees of a	
either funded or actively involved with Metro United Way without the prior permission of the CEO. The CEO	
the Metro United Way Board of Directors to serve on such boards or committees.	Simustrosomo pormission nom
the meno officer way board of birectors to serve on such boards of committees.	
Form 990, Part VI, Section B, Line 15 - Compensation for Metro United Way's Chief Executive Officer is app	roved by independent persons
on the Board of Directors, including the Board Chair, the Board Treasurer and the Chair of the Metro United	
Committee. Prior to approving compensation, a review of compensation data from comparable sources is	
discussions are contemporaneously documented. Compensation for the Chief Financial Officer is determined.	
compensation data from comparable sources, annual performance evaluations for these key positions, and	
compensation data from comparable sources, affidal performance evaluations for these key positions, and	d consultation, if fiecessary.
Form 990, Part VI, Section C, Line 19 - Metro United Way makes its governing documents and conflict of in	terest policy available upon
request. Its IRS Form 990 and financial statements are available on Metro United Way's website.	
Form 990, Part VII, Section A, Line 1a - Theresa Reno-Weber resigned from Metro United Way effective July	/ 30, 2021. She was replaced as
President and Chief Executive Officer by Adria Johnson on August 1, 2021.	·
Form 990, Part XI, Line 9 - Pension related changes other than net periodic pension expense. This represent	nts the "Net Effect of Adoption of
Recognition Provision of FAS 158".	
×	

Schedule O, Statement 1 METRO UNITED WAY INC

Form: Form 990 (2021)

EIN: **61-0444680** 

Part III, Line 4d

Page: 2

#### **Other Program Services Accomplishments**

Activity Code	Description	Expense	Grants	Revenue
	Grants to not-for-profit organizations as a result of donor contributions to the Metro United Campaign that were designated to those organizations.	5,558,002	5,558,002	0
	We launched an innovative guaranteed income pilot - YaLift! - that has proven results in other communities. More than 7,000 people have participated in the MUW Racial Wealth Gap simulations and Beyond Buzzwords speaker series on diversity, equity, and inclusion. We invested in 19 Black-led social justice organizations as part of our new Black L.O.V.E. Philanthropic Partnership. We continued our financial training and workforce development efforts in Louisville's lower income neighborhoods.	4,161,137	1,498,553	21,541
Total:		9,719,139	7,056,555	21,541