# EXTENDED TO MAY 16, 2022

Form **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

Department of the Treasury Internal Revenue Service

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

Department of the Treasury Internal Revenue Service

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021

Open to Public Inspection

B C	heck if pplicable:	C Name of organization UNITED WAY OF LINCOLN AND LANCASTER	2 10 1 1 1	D Employer identific	cation number			
	Address change Name	COUNTY		47 02766	0.4			
	_change	Doing business as	D / !!	47-03766				
	return Final return/	Number and street (or P.O. box if mail is not delivered to street address) 238 S 13 ST	Room/suite	E Telephone number 402-441-	7700			
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	8,005,286.			
	Amende			H(a) Is this a group re	turn			
	Applica	F Name and address of principal officer:MEAGAN LIESVELD		for subordinates	77			
	pending	SAME AS C ABOVE		H(b) Are all subordinates in	cluded? Yes No			
	27-676	mpt status: X 501(c)(3)	or 527		list. See instructions			
		E ► WWW.UNITEDWAYLINCOLN.ORG	o oz.	H(c) Group exemption				
		organization: X Corporation Trust Association Other	I Voor		State of legal domicile: NE			
_	_	Summary	L I cai	oriormation. 1949 IV	State of legal dofficile. 1411			
10		Briefly describe the organization's mission or most significant activities: <b>FUND</b> .	TNG TO	T.OCAT. TMDA	CT DARTNERS			
Activities & Governance	Ī	WHO FOCUS ON ACHIEVING OUTCOMES IN THE T	HREE S	SPECIFIC ARE.	AS			
i.	2 (	Check this box $lacktriangle$ if the organization discontinued its operations or dispos	sed of more	e than 25% of its net as				
ove.	3 1	Number of voting members of the governing body (Part VI, line 1a)		3	27			
ر م	4 1	Number of independent voting members of the governing body (Part VI, line 1b)		4	27			
SS S		otal number of individuals employed in calendar year 2020 (Part V, line 2a)			23			
Ĭţ		otal number of volunteers (estimate if necessary)			1324			
cti	7a7			7a	0.			
۷		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.			
				Prior Year	Current Year			
	8 (	Contributions and grants (Part VIII, line 1h)		7,437,719.	7,771,430.			
ηne	1			0.	0.			
Revenue		Program service revenue (Part VIII, line 2g) nvestment income (Part VIII, column (A), lines 3, 4, and 7d)		76,263.	10,976.			
Be				94,672.	147,874.			
		Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		7,608,654.	7,930,280.			
		Fotal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		5,183,169.	5,670,867.			
,	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	3,070,007.			
	1	Benefits paid to or for members (Part IX, column (A), line 4)		1,139,250.	1,218,959.			
ses	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.			
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)  Fotal fundraising expenses (Part IX, column (D), line 25)  1,015,0	//3	0.	0.			
EXF	1		43.	939,108.	994,169.			
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		7,261,527.	7,883,995.			
	1	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		347,127.	46,285.			
_ 0		Revenue less expenses. Subtract line 18 from line 12						
sets or		T (D ) (D )	B	eginning of Current Year 8,898,406.	End of Year 9,093,320.			
		Total assets (Part X, line 16)		6,411,250.	6,559,879.			
Net Ass Fund Ba	21	Total liabilities (Part X, line 26)		2,487,156.	2,533,441.			
		Net assets or fund balances. Subtract line 21 from line 20		2,407,130.	4,555,441.			
	art II	Signature Block						
		Ities of perjury, I declare that I have examined this return, including accompanying schedule			y knowledge and belief, it is			
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information of w	nich prepare	er nas any knowledge.	2024			
		Signature of officer		NOV. II				
Sig	ın	()		Date				
Hei	re	MEAGAN LIESVELD, EXECUTIVE DIRECTOR  Type or print name and title						
				Data	TI DTIN			
		Print/Type preparer's name  Preparer's signature		Date Check	PTIN			
Paid KRYSTAL L SIEBRANDT, CPA, KRYSTAL L SIEBRANDT, 11/02/21 P00543870								
	parer	Firm's name HBE LLP	1.0	Firm's EIN	47-0677245			
Use	Only	Firm's address 7140 STEPHANIE LANE PO BOX 231	10		00) 400 4040			
		LINCOLN, NE 68542-3110		Phone no. (4	02)423-4343			
Ма	y the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No			

Form	990 (2020) COUNTY 47-0376624 Page 2
Pa	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:  TO IMPROVE LIVES BY MOBILIZING THE CARING POWER OF THE LINCOLN AND  LANCASTER COUNTY COMMUNITY.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No  If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.  (Code: ) (Expenses \$ 735,404 • including grants of \$ 0 •
4a	(Code: ) (Expenses \$ 735,404 · including grants of \$ 735,404 · ) (Revenue \$ 0 · COMMUNITY IMPACT FOCUS AREA: EDUCATION (SEE DETAILED LIST OF PROGRAMS IN THIS FOCUS AREA ON SCHEDULE O) ·
	THIS I GOOD INCLIF ON BOILEDOLL GIVE
	DURING THE 2020-2021 FISCAL YEAR, FUNDED PROGRAMS REPORTED THE FOLLOWING:
	1) 6,414 STUDENTS WERE SERVED BY OUR FUNDED AGENCIES
	2) 1,262 STUDENTS MADE ACADEMIC PROGRESS
	3) 4,646 STUDENTS DEVELOPED AT LEAST ONE POSITIVE ADULT RELATIONSHIP
4b	(Code: ) (Expenses \$ 661,500 · including grants of \$ 661,500 · ) (Revenue \$ 0 ·
40	(Code: ) (Expenses \$ 661,500 · including grants of \$ 661,500 · ) (Revenue \$ 0.0000000000000000000000000000000000
	THIS FOCUS AREA ON SCHEDULE O).
	DURING THE 2020-2021 FISCAL YEAR, FUNDED PROGRAMS REPORTED THE
	FOLLOWING:
	1) 32,942 NIGHTS OF EMERGENCY SHELTER WERE PROVIDED TO THOSE FLEEING
	DOMESTIC VIOLENCE. 2) 80% OF PARTICIPANTS REPORTED THAT THEY KNOW MORE WAYS TO PLAN FOR
	THEIR SAFETY.
	3) 83% OF PARTICIPANTS DEMONSTRATED IMPROVED COPING SKILLS.
4c	(Code:) (Expenses \$ 449,831. including grants of \$ 449,831. ) (Revenue \$ 0.
	COMMUNITY IMPACT FOCUS AREA: INCOME (SEE DETAILED LIST OF PROGRAMS IN
	THIS FOCUS AREA ON SCHEDULE O).
	DURING THE 2020-2021 FISCAL YEAR, FUNDED PROGRAMS REPORTED THE
	FOLLOWING:
	1) 7,791,608 POUNDS OF FOOD WERE DISTRIBUTED.
	2) NUMBER OF POUNDS DISTRIBUTED EQUATES TO 6,493,006 MEALS SERVED.
	3) 9,316 BED NIGHTS WERE PROVIDED TO PEOPLE TRANSITIONING TO STABLE
	HOUSING.
44	Other program services (Describe on Schedule O.)

4d Other program services (Describe on Schedule O.)

(Expenses \$ 4,626,145. including grants of \$

3,824,132.) (Revenue \$

141,813.)

le Total program service expenses

6,472,880.

# UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Form 990 (2020)

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			v
_	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			x
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		x
•	similar amounts as defined in Revenue Procedure 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			x
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
0		8		x
9	Schedule D, Part III  Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	-		<del></del>
3	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		х
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		Х
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	Х	
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		Х
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? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			3.7
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	401	Х	
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Λ	X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
Ь	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
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	175		
.0	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		Х
<b>20</b> a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	<b>20</b> b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	X	l

032003 12-23-20

Page 4

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		163	140
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
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		X
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		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			37
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
р	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			
		25b		X
26	Schedule L, Part I  Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		Х
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		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
_	instructions, for applicable filing thresholds, conditions, and exceptions):  A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
а	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b?If			
	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			7.
0.4	contributions? If "Yes," complete Schedule M	30		X
31 32	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If</i> "Yes," <i>complete Schedule N, Part I</i> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," <i>complete</i>	31		
32	Schedule N, Part II	32		X
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		Х
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	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	25h		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	35b		
00	If "Yes," complete Schedule R, Part V, line 2	36		X
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
Da	Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance	38	X	
ral	tt V Statements Regarding Other IRS Filings and Tax Compliance  Check if Schedule O contains a response or note to any line in this Part V			
	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		169	140
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

032004 12-23-20

### Part V 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 23			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	ns?	2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		За		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	0	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial	account)?	4a		X
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 A	· ·			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa		5b		Х
	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		0-		x
	any contributions that were not tax deductible as charitable contributions?		6a		Λ
D	If "Yes," did the organization include with every solicitation an express statement that such contribut	_	6h		
7	were not tax deductible?  Organizations that may receive deductible contributions under section 170(c).		6b		
7	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a	х	
a b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b	X	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
·	to file Form 8282?		7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	ation file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the			
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.				
а			9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders	110			
	Gross income from other sources (Do not net amounts due or paid to other sources against	11a			
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	•			
а	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the				
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a	· · · · · · · · · · · · · · · · · · ·		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune				,,
	excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				v
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	t income?	16		X
	If "Yes," complete Form 4720, Schedule O.		Гания	990	(0000)

Page 6

Part VI 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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 27			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2	Х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		Х
Sec	tion 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		Х
	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	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
b	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ► NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)	s)s only	/) avail	able
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	nd fina	ncial	
	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			
	MARY ALDRICH-KNIGHT - 402-441-7178			
	238 SOUTH 13TH STREET, LINCOLN, NE 68508			

Page 7

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

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

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- 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.

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

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

(A)  Name and title	(B) Average			(C Pos	<b>C)</b> ition			(D) Reportable	(E) Reportable	<b>(F)</b> Estimated
	hours per week	box	, unle	heck ss pe id a d	rson i	is bot	h an	compensation from	compensation from related	amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) MEAGAN LIESVELD	40.00	1						110 001	•	F 060
EXECUTIVE DIRECTOR				Х				119,971.	0.	7,068.
(2) MARY ALDRICH-KNIGHT	40.00							00.050		- 0
CHIEF FINANCIAL OFFICER				Х				89,053.	0.	5,975.
(3) BRIAN WACHMAN	40.00							44 004		4
FORMER EXECUTIVE DIRECTOR				Х				11,391.	0.	1,530.
(4) BOB BALFANY	1.00	ļ								
DIRECTOR		Х						0.	0.	0.
(5) NANCY BIGGS	1.00	ļ							•	
DIRECTOR		Х						0.	0.	0.
(6) KATE BOLZ	1.00	ļ							•	
DIRECTOR	1 00	Х						0.	0.	0.
(7) BRIAN CHAFFIN	1.00	ļ		l					•	
PRESIDENT ELECT 2021	1 00	Х		Х				0.	0.	0.
(8) JOY CITTA	1.00	ļ							•	
DIRECTOR	1 00	Х						0.	0.	0.
(9) JOHN CONNER	1.00	١,,							0	0
DIRECTOR	1 00	Х						0.	0.	0.
(10) JAMIE DETERDING	1.00	ļ ,,							0	0
DIRECTOR	1 00	Х						0.	0.	0.
(11) CONNIE DUNCAN	1.00	Į.,							0	0
DIRECTOR	1.00	Х						0.	0.	0.
(12) CHARLIE FOSTER	1.00	x						0.	0.	0.
DIRECTOR (13) JOHN GREVING	1.00	^						0.	0.	0.
	1.00	X						0.	0.	0.
DIRECTOR (14) ERIN HART	1.00	^						0.	0.	0.
DIRECTOR	1.00	X						0.	0.	0.
	1.00	^						0.	0.	<u> </u>
(15) BRAD CRAIN DIRECTOR	1.00	X						0.	0.	0.
(16) RHONDA LAHM	1.00	122						0.	0.	
DIRECTOR	1.00	x						0.	0.	0.
(17) ALYSSA MARTIN	1.00	<del>  ^``</del>						0.	0.	<b>J</b>
DIRECTOR	1.00	x						0.	0.	0.
032007 12-23-20	L								•	Form <b>990</b> (2020)

032007 12-23-20

Form 990 (2020) COUNTY 47-0376624 Page 8												
Part VII   Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ighe	st C	Compensated Employe	es (continued)			
(A)	(B)			(0				(D)	(E)		(F)	
Name and title	Average	(do		Pos		than	one	Reportable	Reportable		Estimat	ed
	hours per	box	, unle	ss pe	rson	is bot	h an	compensation	compensation		amount	of
	week	_	cer ar	lu a u	recio	or/trus	l ee)	from	from related		other	
	(list any hours for	or director						the	organizations	CC	ompens	
	related	e or d	tee			sated		organization (W-2/1099-MISC)	(W-2/1099-MISC)	٦,	from th organiza	
	organizations	truste	al trustee		ee/	mpen		(** 27 1000 141100)			and rela	
	below	Individual trustee	Institutional t	_	key employee	Highest compensated employee	æ			1	rganizat	
	line)	Indiv	Instit	Officer	Key e	High	Former					
(18) SUE MARTIN	1.00											
ASSISTANT TREASURER 2021		Х		Х				0.	0	•		0.
(19) ERIC MOOSS	1.00											
VICE PRESIDENT 2021		Х		Х				0.	0	•		0.
(20) PHIL MORGAN	1.00											
DIRECTOR		Х						0.	0	•		0.
(21) BILL MUELLER	1.00											
PRESIDENT - 2020		Х		Х				0.	0	•		0.
(22) APRIL RIMPLEY	1.00											
DIRECTOR		Х						0.	0	•		0.
(23) TIFFANY MURRAY	1.00											
DIRECTOR		Х						0.	0	•		0.
(24) RYAN NELSON	1.00								_			
DIRECTOR		Х						0.	0	•		0.
(25) WALTER POWELL	1.00								_			
DIRECTOR		Х						0.	0	•		0.
(26) BRYAN ROBERTSON	1.00											_
TREASURER - 2021		Х		Х				0.	0		44-5	0.
1b Subtotal								220,415.	0		14,5	<u> 73.</u>
c Total from continuation sheets to Part VI								0.	0		4 4 5	0.
d Total (add lines 1b and 1c)							<u> </u>	220,415.	0	<u>·</u>	14,5	73.
2 Total number of individuals (including but n	ot limited to th	ose	liste	ed al	bove	e) wł	no r	eceived more than \$100	0,000 of reportable			1
compensation from the organization												<u>_</u>
											Yes	No
3 Did the organization list any <b>former</b> officer,			•		•		•		•			Х
line 1a? If "Yes," complete Schedule J for si										3	<u> </u>	+
4 For any individual listed on line 1a, is the su												Х
and related organizations greater than \$150										4		+
5 Did any person listed on line 1a receive or a rendered to the organization? If "Yes," com	-				-			-		5		Х
Section B. Independent Contractors	piete Scriedui	<del>e</del>	Or St	JCII ,	pers	SOII .				<u> </u>	<u>,                                    </u>	122
Complete this table for your five highest con	mnensated in	dene	ande	nt c	onti	racto	ore t	that received more than	\$100,000 of compen	eatio	n from	
the organization. Report compensation for										Satio	#1111O111	
(A)	ine calendar y	cai	CHAI	ng v	VILII	OI W		(B)	ycar.		(C)	
Name and business	address	NO	INC	3				Description of s	ervices	Com	pensatio	on
							$\neg$					
											-	
							٦					
2 Total number of independent contractors (in	ncluding but n	ot li	mite	d to	tho	se li	stec	d above) who received n	nore than			
\$100,000 of compensation from the organiz	zation >					0						
SEE PART VII, SECTION	I A CONT	LIJ	NU2	TP	[0]	N S	SH.	EETS		For	m <b>990</b>	(2020)

47-0376624 COUNTY Form 990

Part VII Section A. Officers, Directors, Tru	ustees, Key Ei	nplo	oyee	s, a	nd ŀ	ligh	est	Compensated Employ	rees (continued)	
(A)	(B)	Ė	_	((	C)			(D)	(E)	(F)
Name and title	Average				ition		L A	Reportable	Reportable	Estimated
	hours per week (list any hours for related organizations below line)	stee or director	lnstitutional trustee	Officer	Key employee	Highest compensated employee	Former Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensatio from the organization and related organizations
(27) DORIS ROBERTSON	1.00									
DIRECTOR		Х						0.	0.	(
(28) LINDA ROBINSON RUTZ	1.00			l						,
IMMEDIATE PAST PRESIDENT 2020	1	Х		Х				0.	0.	(
(29) TIM SCHLEGELMILCH	1.00									,
DIRECTOR	1 00	Х						0.	0.	(
(30) RUSS SEBEK	1.00									,
DIRECTOR	1 00	Х						0.	0.	(
(31) JAY ROSE	1.00	٠,								,
DIRECTOR	1 00	Х		_		<u> </u>	_	0.	0.	(
(32) MARK STUEVEN	1.00	Ι.,						0.	0.	
DIRECTOR (33) BRETT SUNDBERG	1.00	Х						0.	0.	(
, ,	1.00	x		x				0.	0.	(
SECRETARY - 2021 (34) AVA THOMAS	1.00	^		_				0.	0.	(
	1.00	x						0.	0.	(
DIRECTOR (35) KEVIN WAILES	1.00	^						0.	0.	
PRESIDENT 2021	1.00	Х		x				0.	0.	(
(36) NATALIA WIITA	1.00			<u> </u>				0.	0.	•
DIRECTOR	1:00	Х						0.	0.	(

COUNTY 47-0376624 Page 9 Form 990 (2020) Statement of Revenue Part VIII Check if Schedule O contains a response or note to any line in this Part VIII (B) Revenuè éxcluded Related or exempt Unrelated Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a **b** Membership dues 1b 57,535 c Fundraising events 1c d Related organizations 1d 213,000. e Government grants (contributions) 1e f All other contributions, gifts, grants, and 7,500,895 similar amounts not included above 1f 335,964. g Noncash contributions included in lines 1a-1f 1g 7,771,430. h Total. Add lines 1a-1f. **Business Code** Program Service Revenue 2 a f All other program service revenue g Total. Add lines 2a-2f. Investment income (including dividends, interest, and 10,976. 10,976. other similar amounts) Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents **b** Less: rental expenses ... 6b **c** Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of (i) Securities (ii) Other assets other than inventory 7a b Less: cost or other basis Other Revenue 7b and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$57,535. ofcontributions reported on line 1c). See 81,067. Part IV, line 18 75,006. **b** Less: direct expenses \_\_\_\_\_ 6,061. 6,061. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances 10b **b** Less: cost of goods sold ..... c Net income or (loss) from sales of inventory **Business Code** 11 a ADMINISTRATIVE INCOME 900099 141,813. 141,813. b d All other revenue 141,813. e Total. Add lines 11a-11d

12 032009 12-23-20 7,930,280.

Total revenue. See instructions

141,813.

### 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).

<u> </u>	Check if Schedule O contains a respon	(A)	(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations	F 670 067	F 670 067		
	and domestic governments. See Part IV, line 21	5,670,867.	5,670,867.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	227 005	E2 174	140 071	44 740
	trustees, and key employees	237,985.	53,174.	140,071.	44,740
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	746 601	155 202	125 040	455 400
7	Other salaries and wages	746,621.	155,293.	135,848.	455,480
8	Pension plan accruals and contributions (include	24 101	10 120	2 026	21 162
	section 401(k) and 403(b) employer contributions)	34,121. 127,780.	10,132. 36,114.	2,826. 21,112.	21,163 70,554
9	Other employee benefits		-	,	
10	Payroll taxes	72,452.	15,055.	19,967.	37,430
11	Fees for services (nonemployees):				
а	Management				
b	Legal	10 161		10.464	
	Accounting	10,464.		10,464.	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch 0.)	79,568.	32,768.	7,604.	39,196
12	Advertising and promotion	349,968.	214,273.	560.	135,135
13	Office expenses	4,763.	1,227.	834.	2,702
14	Information technology				
15	Royalties				
16	Occupancy	111,157.	28,318.	18,294.	64,545
17	Travel	3,973.	718.	215.	3,040
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,663.	250.	453.	1,960
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	14,688.	3,790.	2,386.	8,512
23	Insurance	7,166.	1,823.	1,177.	4,166
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 0.)				
а	PROGRAM INITIATIVES	204,688.	204,688.		
b	MEMBERSHIP DUES	112,225.	27,497.	20,156.	64,572
С	MISCELLANEOUS	31,440.	6,734.	3,018.	21,688
d	EQUIPMENT RENTAL AND MA	18,786.	3,369.	2,073.	13,344
е	All other expenses	42,620.	6,790.	9,014.	26,816
25	Total functional expenses. Add lines 1 through 24e	7,883,995.	6,472,880.	396,072.	1,015,043
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				

		1 01111 330 (
ance Sheet	Bal	Part X

Га	ιλ	Balance Sheet					
		Check if Schedule O contains a response or	note to any lir	ne in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	•			5,043,943.	1	5,534,250.
	2	Savings and temporary cash investments			1,300,514.	2	1,303,494.
	3	Pledges and grants receivable, net		2,287,999.	3	2,066,652.	
	4	Accounts receivable, net		118,843.	4	101,566.	
	5	Loans and other receivables from any currer					
		trustee, key employee, creator or founder, su					
		controlled entity or family member of any of		5			
	6	Loans and other receivables from other disq	·				
		under section 4958(f)(1)), and persons descr				6	
ets	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			100 715	8	42.000
•	9	Prepaid expenses and deferred charges			100,715.	9	43,990.
	10a	Land, buildings, and equipment: cost or other		226 602			
		basis. Complete Part VI of Schedule D		226,692.	46 202		12 260
	l	Less: accumulated depreciation		183,324.	46,392.	10c	43,368.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, li			12		
	13	Investments - program-related. See Part IV, I		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		8,898,406.	15	9,093,320.	
	16 17	Total assets. Add lines 1 through 15 (must end accounts payable and accrued expenses	95,358.	16 17	216,894.		
	18			1,915,347.	18	1,905,408.	
	19	Grants payable		275,885.	19	199,111.	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
S	22	Loans and other payables to any current or the					
Liabilities		trustee, key employee, creator or founder, su					
apil		controlled entity or family member of any of				22	
Ë	23	Secured mortgages and notes payable to ur		_		23	
	24	Unsecured notes and loans payable to unrel		_	213,000.	24	0.
	25	Other liabilities (including federal income tax		_			
		parties, and other liabilities not included on li					
		of Schedule D			3,911,660.	25	4,238,466.
	26	Total liabilities. Add lines 17 through 25			6,411,250.	26	6,559,879.
		Organizations that follow FASB ASC 958,	check here	X			
ĕ		and complete lines 27, 28, 32, and 33.					
alan	27	Net assets without donor restrictions			2,487,156.	27	2,533,441.
I Be	28	Net assets with donor restrictions		28			
Ĕ		Organizations that do not follow FASB AS	C 958, check	here 🕨 🔲			
F.		and complete lines 29 through 33.					
ts c	29	Capital stock or trust principal, or current fur			29		
sse	30	Paid-in or capital surplus, or land, building, o			30		
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulate		0 405 454	31	0 500 444	
Š	32	Total net assets or fund balances			2,487,156.	32	2,533,441.
	33	Total liabilities and net assets/fund balances			8,898,406.	33	9,093,320.

Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7,93		
2	Total expenses (must equal Part IX, column (A), line 25)	2	7,88	3,9	<u>95.</u>
3	Revenue less expenses. Subtract line 2 from line 1	3			85.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	2,48	7,1	56.
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	2,53	3,4	41.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		. 2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d 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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separat	e basis,			
	consolidated basis, or both:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of th	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si				
	Act and OMB Circular A-133?	-	. 3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		. 3b		
			Form	990	(2020)

032012 12-23-20

#### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COLIMITY

Employer identification number 17-0376621

_		COON						7-0370024
Ра	rt I	Reason for Public (	Charity Status.	All organizations must c	omplete th	nis part.) S	See instructions.	
The	organ	ization is not a private found	ation because it is: (	For lines 1 through 12, c	heck only	one box.)		
1		A church, convention of ch	urches, or association	on of churches described	d in <b>sectio</b>	n 170(b)(1	1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii).	Attach Schedule E (Form	n 990 or 99	90-EZ).)		
3		A hospital or a cooperative	hospital service orga	anization described in <b>se</b>	ection 170	(b)(1)(A)(ii	ii).	
4		A medical research organiz						the hospital's name,
		city, and state:	·					
5		An organization operated for	or the benefit of a co	llege or university owned	d or operat	ted by a g	overnmental unit describ	ned in
•		section 170(b)(1)(A)(iv). (C			. с. сро.а			
6		A federal, state, or local gov		aontal unit described in a	saction 17	70/h)/1)/A)	(v)	
	X	An organization that norma	-					Loublic described in
′		· ·	•	illiai part or its support i	ioiii a gov	emmema	unit or from the general	public described in
		section 170(b)(1)(A)(vi). (Co	•	dVAVoi) (Commiste Davi				
8	H	A community trust describe						
9		An agricultural research org						
		or university or a non-land-g	rant college of agric	ulture (see instructions).	Enter the	name, city	y, and state of the collec	ge or
		university:						
10		An organization that norma	lly receives (1) more	than 33 1/3% of its supp	port from (	contributio	ons, membership fees, a	nd gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions;	and (2) no	more than	n 33 1/3% of its support	from gross investment
		income and unrelated busing	ness taxable income	(less section 511 tax) from	om busine	sses acqu	ired by the organization	after June 30, 1975.
		See section 509(a)(2). (Cor	nplete Part III.)					
11	Щ	An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50	)9(a)(4).	
12		An organization organized a	and operated exclusi	ively for the benefit of, to	perform t	the functio	ons of, or to carry out the	e purposes of one or
		more publicly supported or	ganizations describe	ed in <b>section 509(a)(1)</b> o	r section :	509(a)(2).	See <b>section 509(a)(3).</b> (	Check the box in
		lines 12a through 12d that	describes the type o	f supporting organizatio	n and com	plete lines	s 12e, 12f, and 12g.	
а		Type I. A supporting orga	nization operated, s	upervised, or controlled	by its sup	ported org	ganization(s), typically by	y giving
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority	of the dire	ctors or trustees of the	supporting
		organization. You must c		• • • •				•
b		Type II. A supporting orga			tion with it	s support	ed organization(s), by ha	avina
		control or management o	· ·					-
		organization(s). You mus					g	
c		Type III functionally inte			in connec	tion with a	and functionally integrat	ed with
Ū		its supported organization					• •	ou man,
d		Type III non-functionally						ization(s)
u		that is not functionally int					• • • • • •	* *
		requirement (see instructi	-	* *	•		•	liveriess
_		¬ ' ` `	•	•				
е		Check this box if the orga					a type i, type ii, type iii	
	C.a.k.a	functionally integrated, or	* *	nally integrated support	ing organia	zation.		
T		er the number of supported o	-	-l				,
9		vide the following information  i) Name of supported	i about the supporte	(iii) Type of organization	(iv) Is the orga	nization listed	(v) Amount of monetary	(vi) Amount of other
	,	organization	()	(described on lines 1-10	in your governi Yes	ng document? <b>No</b>	support (see instructions)	support (see instructions)
				above (see instructions))	163	NO	, ,	· · · · · · · · · · · · · · · · · · ·

#### Schedule A (Form 990 or 990-EZ) 2020 COUNTY Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
1	Gifts, grants, contributions, and						_	
	membership fees received. (Do not							
	include any "unusual grants.")	7,232,886.	7,173,841.	7,258,131.	7,437,719.	7,771,430.	36,874,007.	
2	Tax revenues levied for the organ-						_	
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	7,232,886.	7,173,841.	7,258,131.	7,437,719.	7,771,430.	36,874,007.	
	The portion of total contributions							
	by each person (other than a							
	governmental unit or publicly							
	supported organization) included							
	on line 1 that exceeds 2% of the							
	amount shown on line 11,							
	column (f)							
6	Public support. Subtract line 5 from line 4.						36,874,007.	
	ction B. Total Support						, ,	
Cale	ndar year (or fiscal year beginning in)	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total	
	Amounts from line 4	7,232,886.	7,173,841.	7,258,131.	7,437,719.	7,771,430.	36,874,007.	
	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,							
	and income from similar sources	27,033.	55,028.	105,583.	76,263.	10,976.	274,883.	
9	Net income from unrelated business	-	-	-	-	-	<u> </u>	
	activities, whether or not the							
	business is regularly carried on							
10	Other income. Do not include gain							
	or loss from the sale of capital							
	assets (Explain in Part VI.)	216,596.	197,671.	245,004.	198,289.	222,880.	1,080,440.	
11	<b>Total support.</b> Add lines 7 through 10						38,229,330.	
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		
13	First 5 years. If the Form 990 is for the	•	,			501(c)(3)		
	organization, check this box and stor							
Sec	ction C. Computation of Publ							
14	Public support percentage for 2020 (	line 6, column (f), c	livided by line 11,	column (f))		14	96.45 %	
15	Public support percentage from 2019	Schedule A, Part	II, line 14			15	96.45 %	
16a	33 1/3% support test - 2020. If the	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or n	nore, check this bo		
	stop here. The organization qualifies	as a publicly supp	orted organization				<b>▶</b> X	
b	33 1/3% support test - 2019. If the	organization did no	t check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box	
	and <b>stop here.</b> The organization qualifies as a publicly supported organization							
17a	10% -facts-and-circumstances tes	J					,	
	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 to	est. The organization	on qualifies as a pu	ublicly supported o	organization		▶□	
b	10% -facts-and-circumstances tes	t - <b>2019.</b> If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or	
	more, and if the organization meets the	he facts-and-circur	nstances test, che	ck this box and <b>st</b>	<b>op here.</b> Explain ir	n Part VI how the		
	organization meets the facts-and-circ	umstances test. Th	ne organization qu	alifies as a publicly	y supported organ	ization	▶∐	
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions							

Schedule A (Form 990 or 990-EZ) 2020

### 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. If the organization fails to qualify under the tests listed below, please complete Part II.)

Calendar year (or fiscal year beginning in) (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total  1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")  2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 through 5  7 a Amounts included on lines 1, 2, and 3 received from disqualified persons bit exceed the greater of \$5,000 or 1% of the amount on line 3 for the year  c Add lines 7a and 7b  8 Public support. (Subteatlies 7s tomline 5)  Section B. Total Support  Calendar year (or fiscal year beginning in) (a) 2016 (b) 2017 (c) 2018 (d) 2019 (e) 2020 (f) Total	Section A. Public Support	ted below, please com	nplete Part II.)				
1 Giffs, grants, contributions, and membership feer received. (Di not include any "unusual grants,").  Gross receipts from admissions, merchandities acid or services performed, or facilities furnished in any activity that is related to the organization's tax-evempt purpose.  3 Gross receipts from admissions, merchandities such is tax-evempt purpose.  3 Gross receipts from admissions, merchandities acid or services performed, or facilities through of the properties of the pro		n) (a) 2016	(b) 2017	(a) 2019	(4) 2010	(a) 2020	(f) Total
membership fees received. (Do not include any funcsular grants.)  2 Gross neelpts from admissions, membradities odd or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross neelpts from admissions 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  5 The value of services or facilities furnished in a service or facilities furnished by a governmental unit to the organization's benefit and either paid to or expended on its behalf 5  5 The value of services or facilities furnished by a governmental unit to the organization without charge 6  6 Total. Add lines 1 through 5  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts included on lines 1, 2, and 3 received from disqualified persons by Amounts recluded on lines 1, 2, and 3 received from disqualified persons by Amounts recluded on lines 1, 2, and 3 received from disqualified persons by Amounts recluded on lines 1, 2, and 3 received from disqualified persons by Amounts recluded on lines 1, 2, and 3 received from disqualified persons by Amounts recluded in lines 1, 2, and 3 received from disqualified persons by Amounts recluded in lines 1, 2, and 3 received from organization than the services of the services		(a) 2016	(b) 2017	(0) 2016	(a) 2019	(e) 2020	(I) Total
include any 'unusual grants.")  Gross recipits from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's travewenty purpose  3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levies for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 through 5  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons business or the services of received from the hard disqualified persons business or the services of received from the hard disqualified persons business or the services of the services	, • , , , , , , , , , , , , , , , , , ,	act					
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merchandise sold or services per- formed, or facilities furnished in  any activity that is related to the  organization's tave-empt purpose  3 Gross receipts from activities that  are not an unrelated trade or bus- insess under section 513  4 Tax revenues level for the organ- ization's benefit and ether paid to  or expended on its behalf  5 The value of services or facilities  6 Total. Add lines 1 through 5  7 A mounts included on lines 1, 2, and  3 received from disqualified persons  10 A mounts included on lines 1, 2, and  3 received from disqualified persons  10 A mounts included on lines 2 and received  10 Included on lines 1, 2, and  3 received from disqualified persons  10 A mounts included on lines 2 and received  10 Included on lines 2 Included  11 Included on lines 2 Included  12 Included  13 Included  14 Included  15 Included  16 Included  17 Included  18 Included  18 Included  18 Included  18 Included  19 Included  19 Included  19 Included  10 I	•						
formed, or facilities furnished in any activity that is related to the organization's tax exempt purpose of 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 furnished by a governmental unit to the organization without charge of Total. Add lines 1 through 5.  7.a Amounts included on lines 1, 2, and 3 received from disqualified persons and received from disqualified persons by a meants included on lines 1, 2, and 3 received from disqualified persons that exceed the yearer of \$5,000 or 1% of the services of the services of the year of Add lines 70 and 70 by Amounts from line 8.  8. Public support support, supporting systems is section 8. Total Support (appropriate systems is a section 50 to 11 axes) from businesses activities not included to lines 2 and 3 received from line 8.  9. Amounts from line 8.  9. Amounts from line 8.  9. Amounts from line 8.  10. Gross income from interest. dividends, payments received on securities loans, rents, royalties, and income from similar sources. In the form unrelated business acquired after lune 90, 1975 or 4 and 10 by 11. Net income from unrelated business acquired after lune 90, 1975 or 4 and 10 by 11. Net income not not the business is regularly carried on 10 income from similar sources. In the form 900 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.  15. Public support percentage for 2020 (in e. 8, column (f), divided by line 13, column (fi) 17 9.  16. Public support percentage for 2020 (in e. 8, column (f), divided by line 13, column (fi) 17 9.  17. Investment income percentage for 2020 (in e. 6) and 10 to the down on line 14 and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The orga	·						
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3 Gross receipts from activities that are not an unrelated trade or business under section 513  4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf  5 The value of services or facilities furnished by a governmental unit to the organization without charge  6 Total. Add lines 1 through 5  7 A Amounts included on lines 1, 2, and 3 received from disqualified persons but exceeded to lines 2 and 3 received from disqualified persons but exceeded by getting the second of the second persons but exceeded by getting the second of the							
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thon other than disqualified persons that exceed the greater of \$5.000 or 156 of the amount on line 13 for the year  c. Add lines 7 a and 7 b.  8 Public support. (Subprott)  Socion B. Total Support  2 Amounts from line 6.  9 Amounts from line 6.  10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources b. Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975  c. Add lines 10a and 10b.  1Net income from unrelated business acquired after June 30, 1975  c. Add lines 10a and 10b.  1Net income from unrelated business are section of the sect	3 received from disqualified pers	ons					
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16 Public support percentage from 2019 Schedule A, Part III, line 15  Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization    In the computation of the properties of the computation of the properties of t				column (f))		15	%
Section D. Computation of Investment Income Percentage  17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						<del>                                     </del>	
17 Investment income percentage for 2020 (line 10c, column (f), divided by line 13, column (f))  18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						1 .0 1	,,,
18 Investment income percentage from 2019 Schedule A, Part III, line 17  19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization  b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	•					17	%
19a 33 1/3% support tests - 2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization						h +	
more than 33 1/3%, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization							
b 33 1/3% support tests - 2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							<b>▶</b>
line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization							 and

032023 01-25-21

### 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

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b** Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (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 Part VI.
- 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 or 990-EZ).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 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 Part VI.
- 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.)

	Yes	No
1		
2		
3a		
OI-		
3b		
3с		
4a		
4b		
4c		
5a		
5b 5c		
3C		
6		
7		
8		
9a		
9b		
9с		
40-		
10a		
10b		

Pa	rt IV Supporting Organizations (continued)			<u> </u>
	(domandod)		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		
	A 35% controlled entity of a person described in line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion 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 <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove 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		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in 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		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how	_		
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in 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			
800	supported organizations played in this regard. tion E. Type III Functionally Integrated Supporting Organizations	3		
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yeafsee instructions)	•		
a	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.			
b	The organization is the parent of each on its supported organizations. Complete line 3 below.  The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	otruotio	201	
с 2	Activities Test. Answer lines 2a and 2b below.	Struction	Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of		162	INO
а	the supported organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify</b>			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement,	∠a		
D	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		
2		ZIJ		
3	Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
а	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 <b>Part VI.</b>	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	Ja		
J	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

032025 01-25-21

Schedule A (Form 990 or 990-EZ) 2020 COUNTY

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	anizations						
1	Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.								
	All other Type III non-functionally integrated supporting organizations must complete Sections A through E.								
Sect	ion 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							
Sect	ion 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	Discount claimed for blockage or other factors								
	(explain in detail in Part VI):								
2	Acquisition indebtedness applicable to non-exempt-use assets	2							
3	Subtract line 2 from line 1d.	3							
4	Cash deemed held for exempt use. Enter 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	ion 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	Distributable Amount. Subtract line 5 from line 4, unless subject to								
	emergency temporary reduction (see instructions).	6							
7	Check here if the current year is the organization's first as a non-functionally	v intear	ated Type III supporting orga	anization (see					

Schedule A (Form 990 or 990-EZ) 2020

instructions).

Schedule A (Form 990 or 990-EZ) 2020 COUNTY

47-0376624 Page 7

Pa	rt V Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continu	ued)	7 037002
	ion D - Distributions		Ţoonam.	1	Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ıs	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in <b>Part VI</b> )		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive	•		
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2020 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2020	ns	Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2020 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2020				
а	From 2015				
b	From 2016				
С	From 2017				
d	From 2018				
е	From 2019				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2020 distributable amount				
i	Carryover from 2015 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2020 from Section D,				
	line 7:				
а	Applied to underdistributions of prior years				
b	Applied to 2020 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2020, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2020. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2021. Add lines 3j				
_	and 4c.				
8	Breakdown of line 7:				
	Excess from 2016				
	Excess from 2017				
	Excess from 2018				
	Excess from 2019				
е	Excess from 2020				

Schedule A (Form 990 or 990-EZ) 2020

# UNITED WAY OF LINCOLN AND LANCASTER

Schedule A	(Form 990 or 990-EZ) 2020 <b>COUNTY</b>	47-0376624 Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, line 10; Part II, line 17a of 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 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 Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additing (See instructions.)	or 17b; Part III, line 12; 1 and 2; Part IV, Section C, V, Section B, line 1e; Part V,

#### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

Pa			imilar Funds or <i>I</i>	Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 6. <b>(a)</b> Donor advised	funds	(b) Funds and other accounts
1	Total number at end of year			
2	Aggregate value of contributions to (during year)			
3	Aggregate value of grants from (during year)			
4	Aggregate value at end of year			
5	Did the organization inform all donors and donor advisors in w	vriting that the assets hel	d in donor advised fu	nds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ad	dvisors in writing that gra	nt funds can be used	only
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any	other purpose confe	erring
	impermissible private benefit?			Yes No
Pa	t II Conservation Easements. Complete if the org.	anization answered "Yes	" on Form 990, Part I\	/, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).		
	Preservation of land for public use (for example, recreat	tion or education)	Preservation of a hist	orically important land area
	Protection of natural habitat		Preservation of a cert	tified historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifi	ied conservation contribu	tion in the form of a c	onservation easement on the last
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
	Total acreage restricted by conservation easements			2b
С	Number of conservation easements on a certified historic stru	ucture included in (a)		2c
d	Number of conservation easements included in (c) acquired a			
	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or to	erminated by the orga	nization during the tax
	year ▶			
4	Number of states where property subject to conservation eas			
5	Does the organization have a written policy regarding the peri		on, handling of	
	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations, an	d enforcing conservat	ion easements during the year
	<b></b>			
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and enf	orcing conservation e	asements during the year
_	<b>\$</b>			
8	Does each conservation easement reported on line 2(d) above	•		
_	and section 170(h)(4)(B)(ii)?			
9	In Part XIII, describe how the organization reports conservation		·	
	balance sheet, and include, if applicable, the text of the footn	ote to the organization's	financial statements t	hat describes the
Da	organization's accounting for conservation easements.  † III   Organizations Maintaining Collections of	Art Historiaal Tra	anuraa ar Othar	Similar Assats
Га	Complete if the organization answered "Yes" on Form	•	asures, or Other	Sillilai Assets.
				alamaa alaaat wada
па	If the organization elected, as permitted under FASB ASC 956	,		
	of art, historical treasures, or other similar assets held for pub	·		ance of public
	service, provide in Part XIII the text of the footnote to its finan			
D	If the organization elected, as permitted under FASB ASC 956			
	art, historical treasures, or other similar assets held for public	exhibition, education, or	research in furtherand	ce of public service,
	provide the following amounts relating to these items:			<b>.</b> .
	(i) Revenue included on Form 990, Part VIII, line 1			
_				
2	If the organization received or held works of art, historical trea			, provide
	the following amounts required to be reported under FASB AS	-		<b>•</b> •
a	Revenue included on Form 990, Part VIII, line 1			
b	Assets included in Form 990, Part X			🗩 💲

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

	t III Organizations Maintaining C	ollections of A	rt, His	torical Tr	easures,	or Othe	Similar A	ssets(contin	nued)
3	Using the organization's acquisition, accession	on, and other record	ls, chec	k any of the	following that	at make siç	gnificant use o	of its	
	collection items (check all that apply):								
а	Public exhibition	d		Loan or exc	hange progr	am			
b	Scholarly research	е							
С	Preservation for future generations			-					
4	Provide a description of the organization's co	llections and explain	n how th	nev further t	he organizat	ion's exem	npt purpose in	Part XIII.	
5	During the year, did the organization solicit or								
	to be sold to raise funds rather than to be ma							Yes	☐ No
Pai	t IV Escrow and Custodial Arrang							t IV, line 9, or	
	reported an amount on Form 990, Par			-					
1a	Is the organization an agent, trustee, custodia	an or other intermed	diary for	contribution	ns or other as	sets not i	ncluded		
	on Form 990, Part X?							Yes	☐ No
b	If "Yes," explain the arrangement in Part XIII a	and complete the fo	llowing 1	table:					
								Amount	1
С	Beginning balance						1c		
	Additions during the year								
	Distributions during the year								
f	Ending balance								
2a	Did the organization include an amount on Fo							Yes	No No
b	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	kplanatio	on has been	n provided or	Part XIII			
Pai	t V Endowment Funds. Complete if	the organization an	swered	"Yes" on Fo	orm 990, Par	t IV, line 10	).		
		(a) Current year	(b) P	rior year	(c) Two yea	rs back (d	d) Three years b	ack <b>(e)</b> Four	years back
1a	Beginning of year balance								
b	Contributions								
С	Net investment earnings, gains, and losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
	End of year balance								
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1	g, column (a	a)) held as:	•		•	
а	Board designated or quasi-endowment	•	%						
b	Permanent endowment	%							
С	Term endowment	<del></del>							
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%.							
За	Are there endowment funds not in the posses	ssion of the organiza	ation tha	at are held a	and administe	ered for the	e organization	1	
	by:							Ī	Yes No
	(i) Unrelated organizations							3a(i)	
	(ii) Related organizations								
b	If "Yes" on line 3a(ii), are the related organiza	tions listed as requir	red on S	chedule R?	)			3b	
4	Describe in Part XIII the intended uses of the	organization's endo	wment	funds.				<u> </u>	
Pai	t VI Land, Buildings, and Equipm	ent.							
	Complete if the organization answered	d "Yes" on Form 990	), Part I\	/, line 11a. S	See Form 990	D, Part X, li	ne 10.		
	Description of property	(a) Cost or o	ther	(b) Cost	t or other	(c) Acc	cumulated	(d) Bool	value
		basis (investr	nent)	basis	(other)	depr	reciation		
1a	Land								
b	Buildings								
С	Leasehold improvements								
d	Equipment			22	6,692.	1	83,324.	4	3,368.
е	Other								
	. Add lines 1a through 1e. (Column (d) must ed		X, colur	nn (B), line	10c.)		<b>&gt;</b>	4:	3,368.

	OF LINCOLN AN		
Schedule D (Form 990) 2020 COUNTY		47-	-0376624 Page
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(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)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"		e 11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15.)	<b>&gt;</b>	
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	e 11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2) CUSTODIAL FUNDS			13,771
(3) CAMPAIGN DESIGNATIONS			1,638,768
(4) OPERATIONS PAYABLE			1,571,392
(5) COMMUNITY COLLABORATIVES	PAYABLE		1,014,535

(1) Federal income taxes	
(2) CUSTODIAL FUNDS	13,771.
(3) CAMPAIGN DESIGNATIONS	1,638,768.
(4) OPERATIONS PAYABLE	1,571,392.
(5) COMMUNITY COLLABORATIVES PAYABLE	1,014,535.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	4,238,466.

<sup>2.</sup> Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

	UNITED WAY OF LINCOLN AND LANCASTER		
Sche	edule D (Form 990) 2020 COUNTY	47-	0376624 Page 4
Pai	rt XI Reconciliation of Revenue per Audited Financial Statements With Revenue	per Returr	١.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	5,792,901
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d 75,0	06.	
е	Add lines 2a through 2d	2e	75,006
3	Subtract line 2e from line 1	3	5,717,895
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а			
b	Other (Describe in Part XIII.) 4b 2,212,3	385.	
С	Add lines <b>4a</b> and <b>4b</b>		2,212,385
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	7,930,280
Pai	rt XII Reconciliation of Expenses per Audited Financial Statements With Expense	s per Retu	rn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.		
1	Total expenses and losses per audited financial statements	1	5,746,616
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а			
b	, ,		
С	Other losses 2c		
d	Other (Describe in Part XIII.)	06.	
е	Add lines 2a through 2d		75,006
3	Subtract line 2e from line 1	3	5,671,610
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а			
b	Other (Describe in Part XIII.)  4b 2,212,3	385.	0 040 00-
С	Add lines 4a and 4b	4c	2,212,385

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

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

#### PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. AS SUCH, INCOME EARNED IN THE PERFORMANCE OF THEIR EXEMPT PURPOSE IS NOT SUBJECT TO INCOME TAX. ANY INCOME EARNED THROUGH UNRELATED BUSINESS ACTIVITIES IS SUBJECT TO INCOME TAX AT NORMAL CORPORATE RATES. FOR THE YEAR ENDED JUNE 30, 2021, THE ORGANIZATION HAD NO TAX LIABILITY ON UNRELATED BUSINESS ACTIVITY. THE ORGANIZATION BELIEVES IT HAS APPROPRIATE SUPPORT FOR ANY TAX POSITIONS TAKEN, AND AS SUCH, DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT ARE MATERIAL TO THE FINANCIAL STATEMENTS.

#### PART XI, LINE 2D - OTHER ADJUSTMENTS:

7,883,995.

Schedule D (Form 990) 2020 COUNTY	47-0376624 Page 5
Part XIII   Supplemental Information (continued)	
DIRECT FUNDRAISING EXPENSE	75,006.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATIONS	1,953,463.
PROVISION FOR UNCOLLECTIBLE PLEDGES	258,922.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	2,212,385.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
DIRECT FUNDRAISING EXPENSE	75,006.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATIONS	1,953,463.
PROVISION FOR UNCOLLECTIBLE PLEDGES	258,922.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	2,212,385.

#### **SCHEDULE G**

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

#### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

UNITED WAY OF LINCOLN AND LANCASTER

OMB No. 1545-0047

2020

Open to Public Inspection

COUNTY	WAI OF DINCOUN AND	ПА	IVCA	.51EK		47-0376	624
Part I Fundraising Activities required to complete this par	Complete if the organization answe	red "Y	es" or	n Form 990, Part IV,	line 17	7. Form 990-EZ	filers are not
1 Indicate whether the organization rais a	sed funds through any of the following and solicitate and solicitate and solicitate are solicitated. Solicitated and solicitate are solicitated and solicitated are solicitated and solicitated are solicitated and solicitated are solicitated and solicitated and solicitated are solicitated and solicitated are solicitated and solicitated and solicitated are solicitated and solicitate	ion of ion of fundra (includerofess	non-g gover ising o ding o	overnment grants nment grants events fficers, directors, true undraising services?	stees,	Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribu	Did aiser ustody trol of utions?	(iv) Gross receipts from activity	to (o	Amount paid r retained by) undraiser ed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
「otal			<b>•</b>				
3 List all states in which the organization or licensing.			utions	s or has been notified	d it is	exempt from re	egistration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2020

		lle G (Form 990 or 990-EZ) 2020 COUNTY				0376624 Page 2
Pa	ırt	<b>Fundraising Events.</b> Complete if the of fundraising event contributions and grant g				
			(a) Event #1	<b>(b)</b> Event #2	(c) Other events	(d) Total events
			HELPING	MING BEGE	1	(add col. (a) through
			HANDS AUCTIO (event type)	(event type)	(total number)	col. <b>(c)</b> )
une			(CVGITE typo)	(event type)	(total Hambor)	
Revenue	1	Gross receipts	58,500.	35,127.	34,700.	128,327.
	2	Less: Contributions	45,402.	12,133.		57,535.
	3	Gross income (line 1 minus line 2)	13,098.	22,994.	34,700.	70,792.
	4	Cash prizes				
ses	5	Noncash prizes				
xpen	6	Rent/facility costs		1,452.	9,378.	10,830.
Direct Expenses	7	Food and beverages	3,900.		2,301.	6,201.
	8	Entertainment		0 404	01.6	10 225
	9 10	Other direct expenses			816.	18,335. 35,366.
	11	•				35,426.
Pa	rt	<b>III Gaming.</b> Complete if the organization				
	_	\$15,000 on Form 990-EZ, line 6a.	1	(b) Pull tabs/instant		(d) Total gaming (add
nue			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						
_	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes%	
	6	Volunteer labor	∟ No	∟∟ No	L No	
	7	Direct expense summary. Add lines 2 throug	h 5 in column (d)		<b>&gt;</b>	
	8	Net gaming income summary. Subtract line	7 from line 1, column (d)		<b>&gt;</b>	
	ls t	ter the state(s) in which the organization cond the organization licensed to conduct gaming a No," explain:	activities in each of these			Yes No
		ere any of the organization's gaming licenses r 'Yes," explain:			year?	Yes No
	- ''	Yes," explain:				

#### UNITED WAY OF LINCOLN AND LANCASTER

Sch	edule G (Form 990 or 990-EZ) 2020 COUNTY	17-03	76	624	Page 3
11	Does the organization conduct gaming activities with nonmembers?		$\overline{}$	Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed				
	to administer charitable gaming?			Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:				
	The organization's facility	-	За		%
	An outside facility		3b		——————————————————————————————————————
	Enter the name and address of the person who prepares the organization's gaming/special events books and record		J		70
14	cinter the fiame and address of the person who prepares the organization's gaming/special events books and record	5.			
	Name				
	Address >				
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Ε		Yes	☐ No
b	olf "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amou	nt			
	of gaming revenue retained by the third party > \$				
С	If "Yes," enter name and address of the third party:				
	Name				
	Address >				
16	Gaming manager information:				
	Name				
	Gaming manager compensation ▶ \$				
	Description of services provided				
	☐ Director/officer ☐ Employee ☐ Independent contractor				
	Mandatory distributions:				
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	Г	_		
	retain the state gaming license?	L		Yes	└── No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the			
	organization's own exempt activities during the tax year 🕨 \$				
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v);	and Part I	II, lir	nes 9,	9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.				

# UNITED WAY OF LINCOLN AND LANCASTER

Schedule G	G (Form 990 or 990-EZ)	COUNTY			47-0376624	Page 4
Part IV	G (Form 990 or 990-EZ)  Supplemental Info	mation (continued)	·	·	 	
						_
						_

#### SCHEDULE I (Form 990)

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

**2020** 

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

Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization UNITED WA	Employer identification number $47-0376624$						
Part I General Information on Grants a	nd Assistance						
Does the organization maintain records criteria used to award the grants or assi     Describe in Part IV the organization's pro	stance?						
Part II Grants and Other Assistance to					anization answered "	Yes" on Form 990, Part	t IV, line 21, for any
recipient that received more than  1 (a) Name and address of organization or government	\$5,000. Part II car (b) EIN	(c) IRC section (if applicable)	tional space is need (d) Amount of cash grant	ded.  (e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
AMERICAN RED CROSS OF SOUTHEAST NEBRASKA CHAPTER - 4600 VALLEY RD STE 300 - LINCOLN, NE 68510	47-0376573	501(C)(3)	14,439.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN RED CROSS OF SOUTHEAST NEBRASKA CHAPTER - 4600 VALLEY RD STE 300 - LINCOLN, NE 68510	47-0376573	501(C)(3)	30,000.	0.			PROGRAM OPERATING COST
ARC OF LINCOLN 6500 HOLDREGE ST, SUITE 2 LINCOLN, NE 68505	47-0498629	501(C)(3)	7,091.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ARC OF LINCOLN 6500 HOLDREGE ST, SUITE 2 LINCOLN, NE 68505	47-0498629	501(C)(3)	9,000.	0.			PROGRAM OPERATING COST
ASIAN COMMUNITY AND CULTURAL CENTER - 144 N 44 - LINCOLN, NE 68504	47-0807501	501(C)(3)	4,829.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ASIAN COMMUNITY AND CULTURAL CENTER - 144 N 44 - LINCOLN, NE 68504  2 Enter total number of section 501(c)(3) a		501(C)(3)	22,500.	0.			program operating cost  61.

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

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

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS LINCOLN							
6201 HAVELOCK AVE							DONOR DESIGNATED FOR
LINCOLN, NE 68507-1236	47-0794732	501(C)(3)	10,336.	0.			GENERAL SUPPORT
BIG BROTHERS BIG SISTERS LINCOLN							
6201 HAVELOCK AVE LINCOLN, NE 68507-1236	47-0794732	501(C)(3)	60,000.	0.			PROGRAM OPERATING COST
BKD FOUNDATION							
910 E ST. LOUIS ST , STE 400							DONOR DESIGNATED FOR
SPRINGFIELD, MO 65806	43-1866948	501(C)(3)	6,200.	0.			GENERAL SUPPORT
,			1				
BOYS & GIRLS CLUBS OF							
LINCOLN/LANCASTER COUNTY - PO BOX							DONOR DESIGNATED FOR
22344 - LINCOLN, NE 68542	20-8677226	501(C)(3)	20,012.	0.			GENERAL SUPPORT
BOYS & GIRLS CLUBS OF							
LINCOLN/LANCASTER COUNTY - PO BOX							
22344 - LINCOLN, NE 68542-2344	20-8677226	501(C)(3)	30,000.	0.			PROGRAM OPERATING COST
BRYAN FOUNDATION							DOMOR REGIONALES FOR
1600 S 48TH ST	22 7005720	E01/Q\/2\	0 200	0			DONOR DESIGNATED FOR
LINCOLN, NE 68506-1283	23-7005720	501(C)(3)	9,388.	0.			GENERAL SUPPORT
CASA FOR LANCASTER COUNTY							
1141 H ST, STE C							DONOR DESIGNATED FOR
LINCOLN, NE 68508	47-0833799	501(C)(3)	11,089.	0.			GENERAL SUPPORT
CASA FOR LANCASTER COUNTY							
1141 H ST, STE C							
LINCOLN, NE 68508	47-0833799	501(C)(3)	18,900.	0.			PROGRAM OPERATING COST
				<del>.</del>			
CATHOLIC SOCIAL SERVICES OF							
SOUTHERN NEBRASKA - 2241 O ST -							DONOR DESIGNATED FOR
LINCOLN, NE 68510-1122	47-0751554	501(C)(3)	91,514.	0.		1	GENERAL SUPPORT

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC SOCIAL SERVICES OF SOUTHERN NEBRASKA - 2241 O ST - LINCOLN, NE 68510-1122	47-0751554	501(C)(3)	58,200.	0.			PROGRAM OPERATING COST
CATHOLIC SOCIAL SERVICES OF SOUTHERN NEBRASKA - 2241 O ST - LINCOLN, NE 68510-1123	47-0751555	501(C)(3)	2,500.	0.			PROGRAM OPERATING COST -
CBOL - HOUSE FOR NEW LIFE 233 S 13TH ST, SUITE 1900 LINCOLN, NE 68508	47-0707083	501(C)(3)	17,085.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CEDARS YOUTH SERVICES 6601 PIONEERS BLVD, STE 1 LINCOLN, NE 68506-5260	47-0551975	501(C)(3)	66,325.	0.			COMMUNITY COLLABORATION COMMUNITY RESPONSE INITIATIVE
CEDARS YOUTH SERVICES 6601 PIONEERS BLVD, STE 1 LINCOLN, NE 68506-5260	47-0551975	501(C)(3)	33,876.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CEDARS YOUTH SERVICES 6601 PIONEERS BLVD, STE 1 LINCOLN, NE 68506-5260	47-0551975	501(c)(3)	294,825.	0.			PROGRAM OPERATING COST
CEDARS YOUTH SERVICES 6601 PIONEERS BLVD, STE 1 LINCOLN, NE 68506-5260	47-0551975	501(C)(3)	4,000.	0.			PROGRAM OPERATING COST - IMPACT INITIATIVE
CENTER FOR PEOPLE IN NEED, INC. 3901 N 27TH ST, UNIT 1 LINCOLN, NE 68521-4177	06-1669552	501(C)(3)	21,790.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CENTER FOR PEOPLE IN NEED, INC. 3901 N 27TH ST, UNIT 1 LINCOLN, NE 68521-4177	06-1669552	501(C)(3)	40,788.	0.			PROGRAM OPERATING COST

(a) Name and address of organization or government	( <b>b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY IMPACT 1035 N 33RD ST LINCOLN, NE 68503	47-0800906	501(C)(3)	22,276.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CITY IMPACT 1035 N 33RD ST LINCOLN, NE 68503	47-0800906	501(C)(3)	26,000.	0.			PROGRAM OPERATING COST
COMBINED HEALTH AGENCIES DRIVE (CHAD) - 212 S 74TH ST, STE 205 - OMAHA, NE 68114	23-7162972	501(C)(3)	509,558.	0.			FEDERATION % OF DOLLARS
COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS COUNTY - 210 O ST - LINCOLN, NE 68508-2322	47-0491162	501(C)(3)	184,966.	0.			COMMUNITY COLLABORATION COMMUNITY RESPONSE INITIATIVE
COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS COUNTY - 210 O ST - LINCOLN, NE 68508-2322	47-0491162	501(C)(3)	9,063.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS COUNTY - 210 O ST - LINCOLN, NE 68508-2322	47-0491162	501(C)(3)	162,000.	0.			PROGRAM OPERATING COST
COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS COUNTY - 210 O ST - LINCOLN, NE 68508-2322	47-0491162	501(C)(3)	5,100.	0.			PROGRAM OPERATING COST -
COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS COUNTY - 210 O ST - LINCOLN, NE 68508-2322	47-0491162	501(C)(3)	90,000.	0.			COMMUNITY CARES RESPONSI & RECOVERY GRANT
COMMUNITY ACTION PARTNERSHIP OF LANCASTER & SAUNDERS COUNTY - 210 O ST - LINCOLN, NE 68508-2322	47-0491162	501(C)(3)	5,100.	0.			PROGRAM OPERATING COST

Part II Continuation of Grants and Other	Assistance to De	amastic Organization	a and Domostic C	avaramanta (Cab	adula I (Farm 000) Da		17-03/0024 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITY CROPS 1301 S 11 LINCOLN, NE 68502	20-3174357	501(C)(3)	3,775.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
COMMUNITY CROPS 1301 S 11 LINCOLN, NE 68502	20-3174357	501(C)(3)	10,000.	0.			PROGRAM OPERATING COST
EL CENTRO DE LAS AMERICAS 210 O ST LINCOLN, NE 68508	47-0658284	501(C)(3)	7,859.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
EL CENTRO DE LAS AMERICAS 210 O ST LINCOLN, NE 68508	47-0658284	501(C)(3)	21,300.	0.			PROGRAM OPERATING COST
FAMILY SERVICE ASSOCIATION OF LINCOLN - 501 S 7TH ST - LINCOLN, NE 68508-2920	47-0376584	501(C)(3)	233,405.	0.			COMMUNITY COLLABORATION - COMMUNITY RESPONSE INITIATIVE
FAMILY SERVICE ASSOCIATION OF LINCOLN - 501 S 7TH ST - LINCOLN, NE 68508-2920	47-0376584	501(C)(3)	6,340.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FAMILY SERVICE ASSOCIATION OF LINCOLN - 501 S 7TH ST - LINCOLN, NE 68508-2920	47-0376584	501(C)(3)	42,000.	0.			PROGRAM OPERATING COST
FIRST PLYMOUTH CONGREGATIONAL CHURCH - 2000 D ST - LINCOLN, NE 68502	47-0376589	501(C)(3)	23,506.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FOOD BANK OF LINCOLN 4840 DORIS BAIR CIR, STE A LINCOLN, NE 68504-1465	47-0640293	501(C)(3)	10,000.	0.			COMMUNITY COLLABORATION

Page 1

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	7 0370024 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
FOOD BANK OF LINCOLN							
4840 DORIS BAIR CIR, STE A							DONOR DESIGNATED FOR
LINCOLN, NE 68504-1465	47-0640293	501(C)(3)	130,974.	0.			GENERAL SUPPORT
FOOD BANK OF LINCOLN							
4840 DORIS BAIR CIR, STE A							
LINCOLN, NE 68504-1465	47-0640293	501(C)(3)	38,945.	0.			PROGRAM OPERATING COST
FRESH START							
6433 HAVELOCK AVE							DONOR DESIGNATED FOR
LINCOLN, NE 68507-1332	36-3785810	501(C)(3)	10,880.	0.			GENERAL SUPPORT
FRESH START							
6433 HAVELOCK AVE LINCOLN, NE 68507-1332	36-3785810	501(C)(3)	35,000.	0.			PROGRAM OPERATING COST
TINCOLN, NE 00307 1332	30 3703010	501(0)(3)	33,000.	••			INCOME CIEMMIING CODI
FRIENDSHIP HOME OF LINCOLN, INC.							
PO BOX 85358							DONOR DESIGNATED FOR
LINCOLN, NE 68501-5358	47-0619855	501(C)(3)	47,516.	0.			GENERAL SUPPORT
FRIENDSHIP HOME OF LINCOLN, INC.							
PO BOX 85358							
LINCOLN, NE 68501-5358	47-0619855	501(C)(3)	70,650.	0.			PROGRAM OPERATING COST
EDIENDOUTD HOME OF ITHOOIN THO							
FRIENDSHIP HOME OF LINCOLN, INC. PO BOX 85358							PROGRAM OPERATING COST -
LINCOLN, NE 68501-5358	47-0619855	501(C)(3)	2,500.	0.			IMPACT INITIATIVE
	1						
GIRL SCOUTS SPIRIT OF NEBRASKA							
8230 BEECHWOOD DR							DONOR DESIGNATED FOR
LINCOLN, NE 68510	47-0432299	501(C)(3)	3,008.	0.			GENERAL SUPPORT
GIRL SCOUTS SPIRIT OF NEBRASKA							
8230 BEECHWOOD DR							
LINCOLN, NE 68510	47-0432299	501(C)(3)	15,000.	0.			PROGRAM OPERATING COST

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	art II.)	7 0370024 Page
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIVE NEBRASKA 3800 VERMASS PL, STE 200 LINCOLN, NE 68502	36-3431222	501(C)(3)	310,768.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GOOD NEIGHBOR COMMUNITY CENTER 2617 Y ST LINCOLN, NE 68503-1750	20-0391739	501(C)(3)	7,559.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GOOD NEIGHBOR COMMUNITY CENTER 2617 Y ST LINCOLN, NE 68503-1750	20-0391739	501(C)(3)	42,500.	0.			PROGRAM OPERATING COST
GOOD NEIGHBOR COMMUNITY CENTER 2617 Y ST LINCOLN, NE 68503-1750	20-0391739	501(C)(3)	5,000.	0.			PROGRAM OPERATING COST -
HOPE COMMUNITY CHURCH 4700 S FOLSOM ST LINCOLN, NE 68523-9331	47-0528526	501(C)(3)	7,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HOPESPOKE 2444 O ST LINCOLN, NE 68510-1125	47-0398819	501(C)(3)	55,325.	0.			COMMUNITY COLLABORATION COMMUNITY RESPONSE INITIATIVE
HOPESPOKE 2444 O ST LINCOLN, NE 68510-1125	47-0398819	501(C)(3)	12,382.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HOPESPOKE 2444 O ST LINCOLN, NE 68510-1125	47-0398819	501(C)(3)	120,000.	0.			PROGRAM OPERATING COST
JUNIOR ACHIVEMENT OF LINCOLN, INC 285 S 68TH ST PLACE STE 430 LINCOLN, NE 68510	84-1267604	501(C)(3)	11,530.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEAGUE OF HUMAN DIGNITY, INC. 1701 P ST LINCOLN, NE 68508-1741	23-7180481	501(C)(3)	1,883.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEAGUE OF HUMAN DIGNITY, INC. 1701 P ST LINCOLN, NE 68508-1741	23-7180481	501(C)(3)	5,000.	0.			PROGRAM OPERATING COST
LEGAL AID OF NEBRASKA 941 O ST STE 325 LINCOLN, NE 68508-3649	47-0483506	501(C)(3)	5,001.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEGAL AID OF NEBRASKA 941 O ST STE 325 LINCOLN, NE 68508-3649	47-0483506	501(C)(3)	13,500.	0.			PROGRAM OPERATING COST
LIGHTHOUSE 2601 N ST LINCOLN, NE 68502-1244	36-3656310	501(C)(3)	18,378.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LIGHTHOUSE 2601 N ST LINCOLN, NE 68502-1244	36-3656310	501(C)(3)	90,500.	0.			PROGRAM OPERATING COST
LINCOLN CHAMBER ECONOMIC DEVELOPMENT CORPORATION - 1128 LINCOLN MALL - LINCOLN, NE 68508	47-6036618	501(C)(6)	25,000.	0.			COMMUNITY COLLABORATION
LINCOLN COMMUNITY FOUNDATION 215 CENTENNIAL MALL S STE 100 LINCOLN, NE 68508	47-0458128	501(C)(3)	16,610.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LINCOLN LITERACY 745 S 9TH ST LINCOLN, NE 68508-3107	47-0655582	501(C)(3)	12,848.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of	(e) Amount of	(f) Method of	(g) Description of	(h) Purpose of grant
organization or government	. ,	if applicable	cash grant	non-cash assistance	valuation (book, FMV, appraisal, other)	non-cash assistance	or assistance
LINCOLN LITERACY							
745 S 9TH ST							
LINCOLN, NE 68508-3107	47-0655582	501(C)(3)	30,000.	0.			PROGRAM OPERATING COST
LINCOLN MEDICAL EDUCATION							
PARTNERSHIP - 4600 VALLEY RD, STE							DONOR DESIGNATED FOR
225 - LINCOLN, NE 68510-4892	47-0553011	501(C)(3)	1,014.	0.			GENERAL SUPPORT
LINCOLN MEDICAL EDUCATION							
PARTNERSHIP - 4600 VALLEY RD, STE							
225 - LINCOLN, NE 68510-4892	47-0553011	501(C)(3)	20,000.	0.			PROGRAM OPERATING COST
LINCOLN PUBLIC SCHOOLS							COMMUNITY COLLABORATION
PO BOX 82889							- COMMUNITY RESPONSE
LINCOLN, NE 68501	47-6006955	GOVERNMENT	50,000.	0.			INITIATIVE
LINCOLN PUBLIC SCHOOLS PO BOX 82889							
LINCOLN, NE 68501	47-6006955	GOVERNMENT	297,500.	0.			COMMUNITY COLLABORATION
	27 0000200		227,000.				
LINCOLN PUBLIC SCHOOLS-TWO							
GENERATION FAMILY LITERACY PROGRAM							DONOR DESIGNATED FOR
- PO BOX 82889 - LINCOLN, NE 68501	47-6006955	GOVERNMENT	4,544.	0.			GENERAL SUPPORT
LINCOLN PUBLIC SCHOOLS-TWO							
GENERATION FAMILY LITERACY PROGRAM							
- PO BOX 82889 - LINCOLN, NE 68501	47-6006955	GOVERNMENT	14,000.	0.			PROGRAM OPERATING COST
LINCOLN PUBLIC SCHOOLS-TWO							
GENERATION FAMILY LITERACY PROGRAM							PROGRAM OPERATING COST -
- PO BOX 82889 - LINCOLN, NE 68501	47-6006955	GOVERNMENT	4,000.	0.			IMPACT INITIATIVE
LINCOLN/LANCASTER COUNTY CHILD							
ADVOCACY CENTER - 5025 GARLAND ST	47 0703765	E01/G)/3)	44 004	_			DONOR DESIGNATED FOR
- LINCOLN, NE 68504	47-0793765	DOT(G)(3)	41,004.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	<b>overnments</b> (Scho	edule I (Form 990), Pa I	ırt II.)	T
(a) Name and address of organization or government	(b) EIN (c) IRC section if applicable		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LINCOLN/LANCASTER COUNTY CHILD ADVOCACY CENTER - 5025 GARLAND ST - LINCOLN, NE 68504	47-0793765	501(C)(3)	73,800.	0.		PROGRAM	
LINCOLN/LANCASTER COUNTY CHILD ADVOCACY CENTER - 5025 GARLAND ST - LINCOLN, NE 68504	47-0793765	501(C)(3)	2,500.	0.			PROGRAM OPERATING COST - IMPACT INITIATIVE
LUTHERAN FAMILY SERVICES OF NEBRASKA INC - 2301 O ST - LINCOLN, NE 68510	23-7267972	501(C)(3)	27,559.	0.			COMMUNITY COLLABORATIION - COMMUNITY RESPONSE INITIATIVE
LUTHERAN FAMILY SERVICES OF NEBRASKA INC - 2301 O ST - LINCOLN, NE 68510	23-7267972	501(C)(3)	29,752.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LUTHERAN FAMILY SERVICES OF NEBRASKA INC - 2301 O ST - LINCOLN, NE 68510	23-7267972	501(C)(3)	10,000.	0.			PROGRAM OPERATING COST
LUX CENTER FOR THE ARTS 2601 N 48TH ST LINCOLN, NE 68504	47-0629528	501(C)(3)	3,643.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LUX CENTER FOR THE ARTS 2601 N 48TH ST LINCOLN, NE 68504	47-0629528	501(C)(3)	9,601.	0.			PROGRAM OPERATING COST
MALONE COMMUNITY CENTER 2032 U ST LINCOLN, NE 68503-2955	47-0376577	501(C)(3)	20,000.	0.			PROGRAM OPERATING COST
MALONE COMMUNITY CENTER 2032 U ST LINCOLN, NE 68503-2955	47-0376577	501(C)(3)	1,300.	0.			PROGRAM OPERATING COST - IMPACT INITIATIVE

Part II Continuation of Grants and Other	Assistance to De	omestic Organization	e and Domestic G	overnments (Sch	edule I (Form 990) Pa		7 0370024 Page	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
MALONE COMMUNITY CENTER 2032 U ST LINCOLN, NE 68503-2955	47-0376577	501(C)(3)	18,134.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT	
MATT TALBOT KITCHEN & OUTREACH, INC PO BOX 80935 - LINCOLN, NE 68501-0935	36-3945814	501(C)(3)	68,314.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT	
MATT TALBOT KITCHEN & OUTREACH, INC PO BOX 80935 - LINCOLN, NE 68501-0935	36-3945814	501(C)(3)	28,000.	0.			PROGRAM OPERATING COST	
MID-AMERICA ARTS ALLIANCE 2018 BALTIMORE AVE KANSAS CITY, MO 64108	36-3945814	501(C)(3)	7,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT	
MOURNING HOPE GRIEF CENTER 1311 S FOLSOM ST LINCOLN, NE 68522	47-0782915	501(C)(3)	36,531.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT	
MOURNING HOPE GRIEF CENTER 1311 S FOLSOM ST LINCOLN, NE 68522	47-0782915	501(C)(3)	18,000.	0.			PROGRAM OPERATING COST	
NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN - 650 J ST, STE 23 - LINCOLN, NE 68508	26-0013083	501(C)(3)	10,700.	0.			PROGRAM OPERATING COST -	
NEBRASKA WESLEYAN UNIVERSITY 5000 SAINT PAUL AVE LINCOLN, NE 68504-2760	47-0376524	501(C)(3)	11,067.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT	
NORFOLK AREA UNITED WAY, INC. PO BOX 1041 NORFOLK, NE 68702-1041	47-0492054	501(C)(3)	5,381.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT	

Organization or government   filapplicable   Cash grant   non-cash   non-cash	Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	ns and Domestic G	overnments (Sch	edule I (Form 990), Pa	rt II.)	Т
CARDING NAME   CARD		(b) EIN			non-cash	valuation (book, FMV,		(h) Purpose of grant or assistance
LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 1,246. 0. SEMERAL SUPPORT  NORTHEAST FAMILY CENTER 6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 25,000. 0. PROGRAM OPERATING CO  NORTHEAST FAMILY CENTER 6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. UMPACT INITIATIVE  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. SEMERAL SUPPORT  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PIUS X FOUNDATION FO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PIUS X FOUNDATION FOR BOX 80636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PIUS X FOUNDATION FOR BOX 80636 47-0376896 501(C)(3) 9,563. 0. SEMERAL SUPPORT  SHERIDAN LUTHERAN CHURCH FOR 505 CLD CHEMEY RD LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. SEMERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH FOR 505 PIONEERS BLVD DONOR DESIGNATED FOR ST. MARK'S LIFE CHANGING RECOVERY FOR WORMN - 120 WEDGEWOOD  POONG DESIGNATED FOR SENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WORMN - 120 WEDGEWOOD  PIONER SENERAL SUPPORT  DONOR DESIGNATED FOR SENERAL SUPPORT	NORTHEAST FAMILY CENTER							
NORTHEAST FAMILY CENTER 6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 25,000. 0. REGGRAM OPERATING CO LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. REGGRAM OPERATING CO LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. REGGRAM OPERATING CO LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 83,462. 0. REGGRAM OPERATING CO LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. REGGRAM OPERATING CO REGGRAM OPER	6220 LOGAN AVE							DONOR DESIGNATED FOR
6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 25,000. 0. PROGRAM OPERATING CO NORTHEAST FAMILY CENTER 6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. IMPACT INITIATIVE PROGRAM OPERATING CO IMPACT INITIATIVE IMPACT INIT	LINCOLN, NE 68507-1247	91-1787068	501(C)(3)	1,246.	0.			GENERAL SUPPORT
LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 25,000. 0. PROGRAM OPERATING CO  NORTHEAST FAMILY CENTER 6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. IMPACT INITIATIVE  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. PROGRAM OPERATING CO  LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PUSS FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. PROGRAM OPERATING CO  PUSS FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. PROGRAM OPERATING CO  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0. PROGRAM OPERATING FOR CONTROL OF CONTROL	NORTHEAST FAMILY CENTER							
NORTHEAST FAMILY CENTER 6220 LOGAN AVE LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. IMPACT INITIATIVE  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. PROGRAM OPERATING CO DONG DESIGNATED FOR SENERAL SUPPORT  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENTEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0. DONG DESIGNATED FOR SENERAL SUPPORT  DONGR DESIGNATED FOR SENERAL SUPPORT  DONGR DESIGNATED FOR SENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH BISTO PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	6220 LOGAN AVE							
LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. IMPACT INITIATIVE  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. GENERAL SUPPORT  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. GENERAL SUPPORT  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0. GENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 FIONERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	LINCOLN, NE 68507-1247	91-1787068	501(C)(3)	25,000.	0.			PROGRAM OPERATING COST
LINCOLN, NE 68507-1247 91-1787068 501(C)(3) 5,000. 0. IMPACT INITIATIVE  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. GENERAL SUPPORT  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. GENERAL SUPPORT  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0. GENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 FIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	NORTHEAST FAMILY CENTER							
PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636  47-0376896 501(C)(3)  83,462.  0.  DONOR DESIGNATED FOR SENERAL SUPPORT  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636  47-0376896 501(C)(3)  8,543.  0.  PROGRAM OPERATING CO  PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005  23-7074428 501(C)(3)  9,563.  0.  DONOR DESIGNATED FOR SENERAL SUPPORT	6220 LOGAN AVE							PROGRAM OPERATING COST -
PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0.  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0.  PROGRAM OPERATING CO  PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0.  PROGRAM OPERATING CO  SEMERAL SUPPORT  DONOR DESIGNATED FOR SEMERAL SUPPORT  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0.  SEMERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0.  SEMERAL SUPPORT  DONOR DESIGNATED FOR SEMERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	LINCOLN, NE 68507-1247	91-1787068	501(C)(3)	5,000.	0.			IMPACT INITIATIVE
LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 83,462. 0. SENERAL SUPPORT  PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636 47-0376896 501(C)(3) 8,543. 0. PROGRAM OPERATING CO  PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005 23-7074428 501(C)(3) 9,563. 0. SENERAL SUPPORT  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0. SENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. SENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	PEOPLE'S CITY MISSION							
PEOPLE'S CITY MISSION PO BOX 80636 LINCOLN, NE 68501-0636  47-0376896  501(C)(3)  8,543.  0.  PROGRAM OPERATING CO  PIUS X FOUNDATION 6000 A ST  LINCOLN, NE 68510-5005  23-7074428  501(C)(3)  9,563.  0.  DONOR DESIGNATED FOR SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD  LINCOLN, NE 68516  47-0484855  501(C)(3)  5,500.  0.  DONOR DESIGNATED FOR SENERAL SUPPORT  THE ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD  LINCOLN, NE 68520-1306  47-0498358  501(C)(3)  12,000.  0.  DONOR DESIGNATED FOR SENERAL SUPPORT  THE ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD  DONOR DESIGNATED FOR ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	PO BOX 80636							DONOR DESIGNATED FOR
PO BOX 80636 LINCOLN, NE 68501-0636  47-0376896  501(C)(3)  8,543.  0.  PROGRAM OPERATING CO  PIUS X FOUNDATION  6000 A ST  LINCOLN, NE 68510-5005  23-7074428  501(C)(3)  9,563.  0.  GENERAL SUPPORT  DONOR DESIGNATED FOR DONOR DESIGNATED FOR DONOR DESIGNATED FOR SENERAL SUPPORT  SHERIDAN LUTHERAN CHURCH  6955 OLD CHENEY RD  LINCOLN, NE 68516  47-0484855  501(C)(3)  5,500.  0.  SENERAL SUPPORT  DONOR DESIGNATED FOR DONOR DESIGNATED FOR DONOR DESIGNATED FOR SENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH  8550 PIONEERS BLVD  DONOR DESIGNATED FOR D	LINCOLN, NE 68501-0636	47-0376896	501(C)(3)	83,462.	0.			GENERAL SUPPORT
LINCOLN, NE 68501-0636	PEOPLE'S CITY MISSION							
PIUS X FOUNDATION 6000 A ST LINCOLN, NE 68510-5005  23-7074428 501(C)(3)  9,563.  0.  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516  47-0484855  501(C)(3)  5,500.  0.  DONOR DESIGNATED FOR GENERAL SUPPORT  DONOR DESIGNATED FOR GENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306  47-0498358  501(C)(3)  12,000.  0.  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD  DONOR DESIGNATED FOR	PO BOX 80636							
0000 A ST LINCOLN, NE 68510-5005  23-7074428 501(C)(3)  9,563.  0.  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516  47-0484855 501(C)(3)  5,500.  0.  ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306  47-0498358 501(C)(3)  12,000.  0.  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD  DONOR DESIGNATED FOR	LINCOLN, NE 68501-0636	47-0376896	501(C)(3)	8,543.	0.			PROGRAM OPERATING COST
6000 A ST LINCOLN, NE 68510-5005  23-7074428 501(C)(3)  9,563.  0.  SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516  47-0484855 501(C)(3)  5,500.  CT. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306  47-0498358 501(C)(3)  12,000.  CT. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD  DONOR DESIGNATED FOR CONTROL OF CHURCH DONOR DESIGNATED FOR CHURCH DONOR DESIGN	PIUS X FOUNDATION							
SHERIDAN LUTHERAN CHURCH 6955 OLD CHENEY RD LINCOLN, NE 68516 47-0484855 501(C)(3) 5,500. 0.  GENERAL SUPPORT  DONOR DESIGNATED FOR ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0.  GENERAL SUPPORT  DONOR DESIGNATED FOR ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD  DONOR DESIGNATED FOR	6000 A ST							DONOR DESIGNATED FOR
DONOR DESIGNATED FOR SENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD	LINCOLN, NE 68510-5005	23-7074428	501(C)(3)	9,563.	0.			GENERAL SUPPORT
LINCOLN, NE 68516  47-0484855  501(C)(3)  5,500.  0.  GENERAL SUPPORT  ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD  LINCOLN, NE 68520-1306  47-0498358  501(C)(3)  12,000.  0.  GENERAL SUPPORT  DONOR DESIGNATED FOR  ST. MONICA'S LIFE CHANGING  RECOVERY FOR WOMEN - 120 WEDGEWOOD  DONOR DESIGNATED FOR	SHERIDAN LUTHERAN CHURCH							
ST. MARK'S UNITED METHODIST CHURCH 8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD DONOR DESIGNATED FOR	6955 OLD CHENEY RD							DONOR DESIGNATED FOR
8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD DONOR DESIGNATED FOR	LINCOLN, NE 68516	47-0484855	501(C)(3)	5,500.	0.			GENERAL SUPPORT
8550 PIONEERS BLVD LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD DONOR DESIGNATED FOR	ST MARK'S INITED METHODIST CHIPCH							
LINCOLN, NE 68520-1306 47-0498358 501(C)(3) 12,000. 0. GENERAL SUPPORT  ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD DONOR DESIGNATED FOR								DONOR DESIGNATED FOR
RECOVERY FOR WOMEN - 120 WEDGEWOOD DONOR DESIGNATED FOR		47-0498358	501(C)(3)	12,000.	0.			
RECOVERY FOR WOMEN - 120 WEDGEWOOD DONOR DESIGNATED FOR	CH MONTON'S LIER CHANGING							
								DONOR DESIGNATED FOR
DR - LINCOLN NE 68510-2431   47-0490169   501(C)(3)   12.141.   0.   GENERAL SUPPORT	DR - LINCOLN, NE 68510-2431	47-0490169	501(C)(3)	12,141.	0.			GENERAL SUPPORT

Part II Continuation of Grants and Other	Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	- Page
(a) Name and address of organization or government	(b) EIN (c) IRC section if applicable		(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. MONICA'S LIFE CHANGING RECOVERY FOR WOMEN - 120 WEDGEWOOD DR - LINCOLN, NE 68510-2431	47-0490169	501(C)(3)	34,425.	0.			PROGRAM OPERATING COST
ST. PETER CATHOLIC CHURCH OF LINCOLN - 4500 DUXHALL DRIVE - LINCOLN, NE 68516	47-0738138	501(C)(3)	5,117.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
TEAMMATES OF LINCOLN PO BOX 82889 LINCOLN, NE 68501-2889	90-0057598	501(C)(3)	19,749.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
TEAMMATES OF LINCOLN PO BOX 82889 LINCOLN, NE 68501-2889	90-0057598	501(C)(3)	58,803.	0.			PROGRAM OPERATING COST
THE HUB - CENTRAL ACCESS POINT FOR YOUNG ADULTS - 1037 S 12TH ST - LINCOLN, NE 68508-3220	20-8008617	501(C)(3)	2,604.	0.			COMMUNITY COLLABORATION COMMUNITY RESPONSE INITIATIVE
THE HUB - CENTRAL ACCESS POINT FOR YOUNG ADULTS - 1037 S 12TH ST - LINCOLN, NE 68508-3220	20-8008617	501(C)(3)	2,011.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE HUB - CENTRAL ACCESS POINT FOR YOUNG ADULTS - 1037 S 12TH ST - LINCOLN, NE 68508-3220	20-8008617	501(C)(3)	56,500.	0.			PROGRAM OPERATING COST - IMPACT INITIATIVE
THE HUB - CENTRAL ACCESS POINT FOR YOUNG ADULTS - 1037 S 12TH ST - LINCOLN, NE 68508-3220	20-8008617	501(C)(3)	2,000.	0.			PROGRAM OPERATING COST - IMPACT INITIATIVE
THE SALVATION ARMY LINCOLN, NEBRASKA - 2625 POTTER ST - LINCOLN, NE 68503-1053	36-2167910	501(C)(3)	13,473.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

Part II Continuation of Grants and Ot	Tiel Assistance to De	Inestic Organization	and Domestic G	Overnments (Sch	edule i (i oiiii 990), i e	1	1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE SALVATION ARMY LINCOLN,							
NEBRASKA - 2625 POTTER ST -							
LINCOLN, NE 68503-1053	36-2167910	501(C)(3)	80,055.	0.			PROGRAM OPERATING COST
UNITED WAY OF THE MIDLANDS							
2201 FARNAM ST							COMMUNITY
OMAHA, NE 68102	47-0376605	501(C)(3)	17,559.	. 0.			COLLABORATION-2.1.1
UNITED WAY OF THE MIDLANDS							
2201 FARNAM ST							
OMAHA, NE 68102	47-0376605	501(C)(3)	750.	0.			COMMUNITY COLLABORATION
UNITED WAY OF THE MIDLANDS							
2201 FARNAM ST							DONOR DESIGNATED FOR
OMAHA, NE 68102	47-0376605	501(C)(3)	19,010.	0.			GENERAL SUPPORT
VOICES OF HOPE LINCOLN, INC.							
2545 N ST							DONOR DESIGNATED FOR
LINCOLN, NE 68510-1250	47-0726814	501(C)(3)	31,272.	0.			GENERAL SUPPORT
VOICES OF HOPE LINCOLN, INC.							
2545 N ST							
LINCOLN, NE 68510-1250	47-0726814	501(C)(3)	77,400.	0.			PROGRAM OPERATING COST
VOICES OF HOPE LINCOLN, INC.							
2545 N ST							PROGRAM OPERATING COST -
LINCOLN, NE 68510-1250	47-0726814	501(C)(3)	4,474.	0.			IMPACT INITIATIVE
WILLARD COMMUNITY CENTER							
1245 S FOLSOM ST							DONOR DESIGNATED FOR
LINCOLN, NE 68522-1257	47-0635271	501(C)(3)	22,180.	0.			GENERAL SUPPORT
WILLARD COMMUNITY CENTER							
1245 S FOLSOM ST							
LINCOLN, NE 68522-1257	47-0635271	501(C)(3)	17,000.	0.			PROGRAM OPERATING COST

Schedule I (Form 990) COUNTY							7-0376624 Pag
Part II Continuation of Grants and Ot	her Assistance to Do	omestic Organization	s and Domestic G	overnments (Sch	edule I (Form 990), Pa	ırt II.)	T
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
WCA LINCOLN 1701 S 17TH ST STE 2E							DONOR DEGLANAMED HOD
	47 0276570	501(C)(3)	2 400	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LINCOLN, NE 68502	47-0376578	DUI(C)(3)	3,498.	0.			GENERAL SUPPORT
YWCA LINCOLN							
.701 S 17TH ST STE 2E							
LINCOLN, NE 68502	47-0376578	501(C)(3)	9,000.	0.			PROGRAM OPERATING COST
TREGEN, NE 00302	47 0370370	501(0)(3)	3,000.	• •			I ROCKER OF BRITTING COST
			1				

Part III Grants and Other Assistance to Domestic Individuals Part III can be duplicated if additional space is needed.	s. Complete if the	e organization answe	ered "Yes" on Form 9	990, Part IV, line 22.	
(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information. Provide the information rec	uired in Part I, lin	ie 2; Part III, column	(b); and any other a	dditional information.	
PART I, LINE 2:					
THE FOLLOWING ARE UNITED WAY'S PRO	CEDURES	FOR MONITO	RING THE U	SE OF GRANT	
FUNDS IN THE UNITED STATES:					
ALLOCATIONS: THE ALLOCATION OF THE	UNRESTR	ICTED DONC	R DOLLARS	FOLLOWS A	
SPECIFIC, DETAILED APPLICATION PRO	CESS.				
TO BE ELIGIBLE TO APPLY FOR FUNDIN	IG, AGENC	IES MUST E	BE A LEGAL	501(C)(3)	
ORGANIZATION SERVING LINCOLN/LANCA	STER COU	NTY AND AG	REE TO FOL	LOW UNITED	

Part IV Supplemental Information

WAY POLICIES AND PROCEDURES. THEY MUST SUBMIT AN AUDIT WITH A STATMENT OF

FUNCTIONAL EXPENSES BY PROGRAM, AND A FORM 990 AND 990T (IF APPLICABLE)

MUST ALSO BE FILED AND SUBMITTED. AGENCIES MUST ALSO VERIFY COMPLIANCE WITH

THE PROVISIONS OF THE PATRIOT ACT.

AGENCIES UNDERGO INTENSIVE REVIEW BY TRAINED COMMUNITY VOLUNTEERS BEFORE A RECOMMENDATION IS MADE TO THE UNITED WAY BOARD OF DIRECTORS FOR APPROVAL.

THE COMMUNITY IMPACT VOLUNTEERS REVIEW THE APPLICATIONS WHICH REQUIRE

CLIENT OUTCOMES AND INDICATORS MEASURING CHANGE IN BEHAVIOR OR SKILL FOR

CLIENTS BEING SERVED. DEMOGRAPHIC DATA ENSURES THAT THOSE IN MOST NEED ARE

BEING REACHED WITH THE SERVICES. OUR AUDIT REVIEW TEAM IS COMPOSED OF LOCAL

CPA'S WHO REVIEW THE AGENCIES' AUDITS AND 990'S, LOOKING FOR OVERALL

STABILITY AND ABILITY TO MONITOR THE ALLOCATION OF DONOR DOLLARS.

AGENCIES ARE REQUIRED TO SUBMIT SEMI-ANNUAL REPORTS REFELCTING THE PROGRESS

OF THE FUNDED PROGRAM. THE FINAL REPORT PROVIDES A UPDATE OF THE OUTCOMES

ACHIEVED.

DONOR DESIGNATIONS: ORGANIZATION'S RECEIVING DONOR DESIGNATED CONTRIBUTIONS
THROUGH UNITED WAY UNDERGO SCREENING PRIOR TO DISTRIBUTION OF FUNDING. SUCH
SCREENING INCLUDES VERIFICATION OF CURRENT STATUS AS AN IRS CODE SECTION
501(C)(3) NONPROFIT ORGANIZATION AND VERIFICATION OF COMPLIANCE WITH THE
PROVISIONS OF THE PATRIOT ACT.

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

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► 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.

UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

Гаі	LI	Types of Property									
			(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contr amounts repor Form 990, Part V	ted on		<b>(d)</b> Method of de cash contribu			s
1	Art -	Works of art									
2		Historical treasures									
3		Fractional interests									
4		s and publications	X		14	. 211.	FATR	MARKET	VA	TIUE	
		ning and household goods				,	<del></del>				
5											
6		and other vehicles									
7		s and planes									
8		ectual property									
9		ırities - Publicly traded									
10		ırities - Closely held stock									
11	Secu	ırities - Partnership, LLC, or									
		interests									
12	Secu	ırities - Miscellaneous									
13	Qual	ified conservation contribution -									
		oric structures									
14		ified conservation contribution - Other									
15	Real	estate - Residential									
16	Real	estate - Commercial									
17	Real	estate - Other									
18		ectibles									
19		I inventory									
20		s and medical supplies									
21		dermy									
22		orical artifacts									
23		ntific specimens									
24		eological artifacts									
25		ADVERTISING )	X	6	253	,240.	FAIR	MARKET	VA	LUE	
26		GLOVE AUCTION	X	276				MARKET			
27		WINGFEST EVEN	X	14				MARKET			
 28		GOLF EVENTS	X	13				MARKET			
29		ber of Forms 8283 received by the organiz		l		<u> </u>	<u> </u>				
		which the organization completed Form 828		-		29					
	101 11	Thor the organization completed from each	50,1 ait <b>v</b> , E	orice / totalewicag	JOHNOTIC					Yes	No
30a	Durir	ng the year, did the organization receive by	/ contributio	on any property rer	norted in Part I lin	es 1 throi	ah 28 th	at it		103	140
JUA		t hold for at least three years from the date						atit			
									20-		Х
		npt purposes for the entire holding period?							30a		21
		es," describe the arrangement in Part II.	خوطه برمزاه	anulkaa tha waxiisaa	of only neverted de-	rd 00:-4:::!-	ıtion=0		0.4	х	
31		s the organization have a gift acceptance p							31	Λ	
32a		s the organization hire or use third parties or the third parties or the organization hire or use third parties or the organization hire or use third parties or the organization hire or use third parties or use the organization of the organ		•					32a	х	
h		ributions? es," describe in Part II.							3Za	-2	
			olumn (a) f-	r a tupo of areas	v for which cal :	o (a) io ob	ookod				
33		e organization didn't report an amount in c	oiuiiiii (C) 10	i a type oi propert	y ioi wilich columi	i (a) is che	oneu,				
		ribe in Part II.	Ale e Tre educio -	f F 00				Cala a dud a M	<b>/</b> F	- 000)	

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

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.
PART I, OTHER TYPES OF PROPERTY:
SOFTWARE
(A) CHECK IF APPLICABLE = X
(B) NUMBER OF CONTRIBUTIONS = 1
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 4324.
(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE
SUPPLIES
(A) CHECK IF APPLICABLE = X
(B) NUMBER OF CONTRIBUTIONS = 3
(C) REVENUE REPORTED ON FORM 990, PART VIII \$ 749.
(D) METHOD OF DETERMINING REVENUE: FAIR MARKET VALUE
SCHEDULE M, LINE 32B:
THE ORGANIZATION USES BROKERS TO IMMEDIATELY SELL ANY DONATIONS OF
STOCK RECEIVED.
032142 11-23-20 Schedule M (Form 990) 2020

## SCHEDULE O

Internal Revenue Service

3) HEALTH

(Form 990 or 990-EZ) Department of the Treasury

## Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

Inspection

Name of the organization

UNITED WAY OF LINCOLN AND LANCASTER COUNTY

**Employer identification number** 47-0376624

FOR	M 99	0,	PART	¹ I,	LINE	1,	DESC	CRIPTIO	N OF	ORGANIZ	ATION	MISSION	<b>:</b>	
DET:	ERMI:	NED	то	BE	ESSENT	rial.	IN	IMPROV	ING	PEOPLE'S	LIVES	S AND		
STRENGTHENING OUR COMMUNITY:														
1)	EDUC.	ATI	ON											
2)	INCO	ME												

FORM 990, PART III, LINE 2, NEW PROGRAM SERVICES: RIDE UNITED LAST MILE DELIVERY: IN PARTNERSHIP WITH UNITED WAY WORLDWIDE AND DOORDASH, THIS PROGRAM FULFILLS CRITICAL FOOD INSECURITY NEEDS IN 20 COMMUNITIES ACROSS THE COUNTRY, INCLUDING RIGHT HERE IN OVER 150 FOOD DELIVERIES ARE BEING MADE LINCOLN AND LANCASTER COUNTY. TO LINCOLN FAMILIES EACH WEEK. IN 2021 ALONE, THE PROGRAM HAS MADE OVER 3,000 DELIVERIES IN LINCOLN AND LANCASTER COUNTY AND BY THE END OF THE YEAR, WILL MAKE 5,000 DELIVERIES. THE PROGRAM PROVIDES A SAFE AND SOCIALLY DISTANCED WAY TO GET FOOD TO HOUSEHOLDS IN NEED AND HELPS RELIEVE STRESS AND LINES AT FOOD PANTRIES. \$22,080 WAS INVESTED IN THIS PROGRAM DURING 2020-2021.

EARNED INCOME TAX CREDIT (EITC) AND CHILD TAX CREDIT (CTC) AWARENESS: IN PARTNERSHIP WITH UNITED WAY WORLDWIDE AND UNITED WAY OF THE MIDLANDS IN OMAHA, THIS EFFORT URGED LAWMAKERS TO SUPPORT A 'LOOKBACK' PROPOSAL WAS TO ALLOW WORKERS TO USE THEIR PREVIOUS YEAR EARNINGS TO CALCULATE THEIR EITC AND CTC TAX CREDIT AMOUNTS. THE NATIONAL PANDEMIC EMERGENCY HAS HIT PEOPLE IN LOW-PAYING JOBS HARD WITH MANY OF THEM SUFFERING MASSIVE JOB AND WAGE LOSSES. MANY OF THESE PEOPLE FACE THE RISK OF LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

032211 11-20-20

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

COUNTY

Employer identification number 47-0376624

LOSING SOME OR ALL OF THEIR EITC AND CTC. THE PROPOSAL GIVES PEOPLE THE

OPTION TO USE EITHER THEIR 2019 OR 2020 EARNINGS TO CALCULATE THEIR

EITC AND CTC. THE EITC AND CTC HELP BOOST THE INCOMES OF LOW INCOME

WORKERS AND LIFT MILLIONS OF THEM AND THEIR FAMILIES OUT OF POVERTY.

THESE TAX CREDITS ARE CALCULATED IN PART BASED ON HOUSEHOLD EARNINGS

AND ARE DELIVERED AS REFUNDS AT TAX TIME. BECAUSE THE PANDEMIC'S

FALLOUT HAS REDUCED THE EARNINGS OF MILLIONS OF LOW-INCOME PEOPLE, WHEN

THEY FILE THEIR TAX RETURNS, THEY WOULD FACE A SHARPLY DIMINISHED EITC

AND CTC THAN THEY WOULD HAVE RECEIVED HAD THE PANDEMIC NOT AFFECTED

THEIR EARNED INCOME. UNITED WAY WORLDWIDE SUPPORTED THIS EDUCATIONAL

OPPORTUNITY BY PROVIDING A GRANT IN THE AMOUNT OF \$10,000.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

THE FOLLOWING AGENCIES AND PROGRAMS WERE AWARDED GRANTS IN THIS FOCUS

AREA:

ASIAN COMMUNITY AND CULTURAL CENTER: REFUGEE AND IMMIGRANT YOUTH
PROGRAM SERVES OVER 200 REFUGEE AND IMMIGRANT YOUTH AT SEVERAL HIGH
SCHOOLS AND MIDDLE SCHOOLS FOCUSING ON BUILDING DEVELOPMENTAL ASSETS
THROUGH ONE-TO-ONE MENTORING AND HOLISTIC CASE MANAGEMENT. YOUTH ENGAGE
IN ENRICHING SOCIAL EXPERIENCES AND DEVELOP RELATIONSHIPS WITH CARING
ADULTS THROUGH ROUTINE CONTACT WITH STAFF AND VOLUNTEERS. PROGRAMS
INCLUDE: LIFE AFTER HIGH SCHOOL - GROUP ACTIVITIES & ONE-TO-ONE
ASSISTANCE NAVIGATING PRESENT SITUATIONS AND PREPARING FOR THE FUTURE;
YEZIDI CLUB - SPACE FOR YEZIDI YOUTH TO BUILD COMMUNITY AND PRESERVE
CULTURE; UNTOLD MIGRANT STORIES - USE OF DIGITAL MEDIA & OTHER ART AS
CREATIVE OUTLETS TO SHARE STORIES WITH THE COMMUNITY; MIDDLE SCHOOL
PROGRAM - ENCOURAGES MIDDLE SCHOOL YOUTH TO PARTICIPATE/ADVOCATE IN THE

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

COMMUNITY; AND CAMP CULTURE - WEEK LONG SUMMER CAMP FOR ELEMENTARY

SCHOOL YOUTH TO LEARN ABOUT VARIOUS CULTURES IN NEBRASKA. GRANT AMOUNT

- \$15,000.

THE ARC OF LINCOLN: YOUTH PROGRAMMING WORKS WITH YOUTH WHO HAVE

INTELLECTUAL AND DEVELOPMENTAL DISABILITIES AND THEIR FAMILIES TO HELP

ENSURE POSITIVE OUTCOMES. THE PROGRAM ASSISTS FAMILIES BY PROVIDING

ACCESS TO HIGH QUALITY SERVICES AND RESOURCES. FAMILIES ARE EDUCATED

ABOUT THE DIFFERENT SYSTEMS, TREATMENTS, THERAPIES, SERVICES, AND

RESOURCES THAT CAN PRODUCE POSITIVE OUTCOMES FOR CHILDREN AT EACH STEP

IN THEIR DEVELOPMENT. THE PROGRAM PROVIDES INCLUSIVE OPPORTUNITIES FOR

YOUTH AND MEANINGFUL INTERACTIONS WITH PEERS, ADULTS, AND THEIR

COMMUNITY. GRANT AMOUNT - \$9,000.

BIG BROTHERS BIG SISTERS LINCOLN: COMMUNITY BASED MENTORING PROGRAM

CONNECTS AT-RISK YOUTH (LITTLES) WITH CARING ADULT MENTORS (BIGS) TO

HELP YOUTH THRIVE THROUGH MENTORSHIP. THE PROGRAM'S MISSION IS TO

CREATE AND SUPPORT ONE-TO-ONE MENTORING RELATIONSHIPS THAT IGNITE THE

POWER AND PROMISE OF YOUTH. THE PROGRAM IS A 50-YEAR-OLD

COMMUNITY-BASED APPROACH WITH A PROVEN HISTORY OF FOSTERING SUCCESSFUL

OUTCOMES FOR YOUTH PARTICIPANTS. YOUTH WHO PARTICIPATE IN THE PROGRAM

DEMONSTRATE IMPROVED ACADEMIC PERFORMANCE, HAVE BETTER RELATIONSHIPS

WITH PEERS AND FAMILY, AND ARE LESS LIKELY TO BECOME INVOLVED WITH

DRUGS AND ALCOHOL. THE PROGRAM PROVIDES MENTORSHIP OPPORTUNITIES FOR

YOUTH AGES 7-16 FROM ALL ETHNIC BACKGROUNDS. FAMILIES ARE ALSO

CONNECTED TO WRAPAROUND SERVICES SUCH AS PARENTING CLASSES AND GROUP

THERAPY. GRANT AMOUNT - \$60,000.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 BOYS AND GIRLS CLUBS OF LINCOLN/LANCASTER COUNTY: BOYS AND GIRLS CLUBS OF LINCOLN/LANCASTER COUNTY PROGRAM ENRICHES THE LIVES OF YOUTH BY PROVIDING A SAFE HAVEN WHERE THEY CAN LEARN AND GROW. THE PROGRAM ENSURES THAT DISADVANTAGED YOUTH HAVE ACCESS TO QUALITY PROGRAMS AND SERVICES THAT WILL ENHANCE AND SHAPE THEIR FUTURES. YOUTH AGES 11-18 HAVE CONTACT WITH ADULTS WHO RESPECT AND LISTEN TO THEM. THEY ARE GIVEN A SAFE ENVIRONMENT WHERE THEY CAN HAVE FUN AND BE THEMSELVES WHILE DOING INTERESTING AND CONSTRUCTIVE ACTIVITIES THAT CHANNEL YOUTHFUL ENERGY INTO CHALLENGING PURSUITS. BOY AND GIRLS CLUBS OFFERS DAILY ACCESS TO A BROAD RANGE OF PROGRAMS THAT PROMOTE THE HEALTH, SOCIAL-EMOTIONAL, EDUCATIONAL, AND VOCATIONAL NEEDS OF STUDENTS. THE PROGRAM FOSTERS A SENSE OF BELONGING, COMPETENCE, USEFULNESS, AND INFLUENCE WHILE BUILDING SELF-CONFIDENCE AND SELF-ESTEEM. PROGRAM ALIGNMENT INCLUDES: TECHNOLOGY, ENTREPRENEURSHIP; AND CAREER READINESS/JOB SKILLS UNDERPINNED BY GALLUP STRENGTHS, LEADERSHIP/ACCOUNTABILITY, AND FINANCIAL LITERACY. GRANT AMOUNT -\$30,000. CEDARS YOUTH SERVICES: CEDARS COMMUNITY LEARNING CENTER (CLC) PROGRAM

CEDARS YOUTH SERVICES: CEDARS COMMUNITY LEARNING CENTER (CLC) PROGRAM
PROVIDES CORE BEFORE AND AFTER SCHOOL PROGRAMMING; EXPANDED LEARNING
CLUBS TO SUPPORT ACADEMIC SUCCESS AND SOCIAL ENRICHMENT; FULL TIME
SUMMER AND SCHOOL BREAK CARE; AND FAMILY AND COMMUNITY EVENTS TO
STRENGTHEN NEIGHBORHOOD CONNECTIONS. THE PROGRAM COLLABORATES WITH
CLINTON AND HARTLEY ELEMENTARY SCHOOLS PROVIDING COMPREHENSIVE
COMMUNITY SCHOOL SERVICES TO MEET STUDENT NEEDS. THE PROGRAM HELPS
IMPROVE STUDENT LEARNING AND YOUTH DEVELOPMENT; STRENGTHEN AND SUPPORTS
FAMILIES; AND STRENGTHENS AND ENGAGES NEIGHBORHOODS. A BEHAVIORAL
HEALTH COMPONENT IS AVAILABLE TO IMPROVE BEHAVIOR AT SCHOOL AND HOME

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER Employer identification number 47-0376624

ENHANCING THE ROLE OF CEDARS AS A PARTNER WITH THE FAMILY AND AN

EXTENSION OF THE SCHOOL; AND TO ADDRESS UNDERLYING CAUSES OF BEHAVIOR

IN A HOLISTIC MANNER. GRANT AMOUNT - \$70,000.

CEDARS YOUTH SERVICES: CEDARS NORTHBRIDGE EARLY CHILDHOOD DEVELOPMENT CENTERS PROGRAM PROVIDES NATIONALLY ACCREDITED, FULL DAY, FULL-YEAR CHILDCARE TO CHILDREN SIX WEEKS TO SIX YEARS OLD. LOCATED IN A HIGH POVERTY NEIGHBORHOOD, THE CENTER PROVIDES ONGOING DEVELOPMENTAL OPPORTUNITIES TO CREATE A FOUNDATION FOR LONG-TERM SUCCESS. CLASSROOMS ARE LED BY EDUCATED AND EXPERIENCED TEACHERS USING CREATIVE CURRICULUM/GOLD TO PROMOTE SCHOOL READINESS AND SOCIAL-EMOTIONAL DEVELOPMENT. EACH CHILD RECEIVES INDIVIDUAL ATTENTION, GOAL PLANNING, AND ASSESSMENT. CLASSROOM TEACHERS PARTNER WITH PARENTS TO ENHANCE LEARNING AT HOME. A PYRAMID MODEL COACH AND LICENSED THERAPIST SUPPORT TEACHERS AND PARENTS PROMOTING HEALTHY DEVELOPMENT AND ADDRESSING CHALLENGING BEHAVIORS. REGULAR TRAINING, COACHING, ASSESSMENT, AND CLASSROOM SUPPORT ENSURE THAT THE PYRAMID MODEL, WHICH EMPHASIZES HIGH-QUALITY CLASSROOM ENVIRONMENTS AND POSITIVE BEHAVIOR SUPPORTS, IS IMPLEMENTED TO SUPPORT THE SUCCESS OF ALL CHILDREN. GRANT AMOUNT -\$90,000.

CENTER FOR PEOPLE IN NEED, INC: ENGLISH LANGUAGE LEARNING PROGRAM

OFFERS THREE LEVELS OF ENGLISH LANGUAGE LEARNING (ELL) CLASSES AND

EMPLOYS THREE FULL-TIME INSTRUCTORS; ALL ARE REFUGEES THEMSELVES. IT IS

ESSENTIAL THAT REFUGEES AND IMMIGRANTS LEARN ENGLISH IN ORDER TO ADJUST

TO LIFE IN LINCOLN AND GAIN EMPLOYMENT. SERVICE TO STUDENTS IS PROVIDED

AT NO COST, SINCE THE MAJORITY ARE NOT EMPLOYED WHEN THEY BEGIN THE

CLASSES AND ARE RECEIVING BENEFITS FROM THE NEBRASKA DEPARTMENT OF

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER
COUNTY

HEALTH AND HUMAN SERVICES. BY LEVEL THREE IN THE ELL PROGRAM, THE

STUDENTS UTILIZE A COMPUTER LAB TO LEARN ABOUT ONLINE JOB SEARCHES,

CREATING A RESUME AND COMPLETING ONLINE APPLICATIONS. GRANT AMOUNT - \$5,000.

CITY IMPACT: IMPACT READING PROGRAM IS AN INTENSIVE READING PROGRAM

THAT UTILIZES RESEARCH-BASED CURRICULUM AND TEACHING TECHNIQUES TO

EMPOWER CHILDREN WITH THE LIFE CHANGING BENEFITS OF LITERACY. IMPACT

READING HELPS ALL CHILDREN, SPECIFICALLY THOSE MOST VULNERABLE, REACH

GRADE LEVEL. THE PROGRAM SERVES ELEMENTARY AGE STUDENTS IN TARGETED

TITLE ONE SCHOOLS WITH A GOAL TO ADD ONE ADDITIONAL SCHOOL IN 2020-21.

CHILDREN IN THE CLINTON AND HARTLEY NEIGHBORHOODS ARE REACHED THROUGH

SUMMER PROGRAMS AND OUTSIDE OF SCHOOL AT THE CITY IMPACT CENTER.

VOLUNTEERS SIT ONE-ON-ONE WITH AN ELEMENTARY STUDENT DURING THE DAY AND

PROVIDE READING INSTRUCTION WHICH UTILIZES A RESEARCH-BASED, EFFECTIVE

CURRICULUM THAT IS ALSO VOLUNTEER-FRIENDLY. EACH SCHOOL YEAR IMPACT

READING VOLUNTEERS SPEND 4000+ HOURS IN 12,500+ DAILY TUTORING SESSIONS

WITH HUNDREDS OF STRUGGLING STUDENTS. GRANT AMOUNT - \$26,000.

COMMUNITY ACTION PARTNERSHIP OF LANCASTER AND SAUNDERS COUNTIES: HEAD

START PROGRAM GIVES CHILDREN FROM AT-RISK BACKGROUNDS SKILLS NECESSARY

FOR SUCCESS IN SCHOOL AND LIFE. HEAD START IN LANCASTER COUNTY SERVES

119 CHILDREN AGES 3-5 AND THEIR FAMILIES THROUGH FULL-YEAR CENTER-BASED

PROGRAMS AT 3 LINCOLN LOCATIONS. EARLY HEAD START SERVES 268 CHILDREN

AGES 0-3, PREGNANT WOMEN, AND THEIR FAMILIES, THROUGH CENTER AND HOME

BASED OPTIONS. PROGRAMS ARE FREE FOR PARTICIPANTS, WITH ENROLLMENT

RESERVED FOR CHILDREN OF FAMILIES WHOSE INCOME IS BELOW POVERTY LEVEL;

WITH DISABILITIES; EXPERIENCING HOMELESSNESS; AND/OR IN FOSTER CARE.

SPECIFIC LOCAL NEEDS.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER
COUNTY 47-0376624

PROGRAMS ALSO PROVIDE MENTAL HEALTH, NUTRITIONAL, AND DENTAL SERVICES

AND ENSURE CHILDREN RECEIVE INTERVENTIONS TO MEET DEVELOPMENTAL

MILESTONES. HEAD START IS A COMPREHENSIVE EARLY CHILDHOOD EDUCATION

PROGRAM WHERE PARENTS ARE ENGAGED AS PARTNERS IN THEIR CHILD'S

EDUCATION WORKING CLOSELY WITH THE COMMUNITY TO IDENTIFY AND ADDRESS

GRANT AMOUNT - \$65,000.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE: EL CENTRO DE LAS AMERICAS: ADELANTE EDUCATIONAL PROGRAM IS AN EDUCATIONAL PROGRAM DESIGNED TO CLOSE THE EDUCATION GAP AND IMPROVE STUDENT'S LITERACY SKILLS, EMPLOYMENT, AND/OR FURTHER EDUCATIONAL OPPORTUNITIES. EL CENTRO PROVIDES STUDENTS WITH A LOW TEACHER-STUDENT RATIO, INCLUDING CASE MANAGEMENT FOR ALL PARTICIPANTS. THERE ARE TWO PROGRAMS WITHIN THE ADELANTE EDUCATIONAL PROGRAM, THE GED PROGRAM AND THE CITIZENSHIP PROGRAM. THE GED PROGRAM ADDRESSES THE FOUR REQUIRED SUBJECTS: MATHEMATICS, SCIENCE, SOCIAL STUDIES, AND LANGUAGE ARTS. EVERY CLIENT IS PROVIDED ONE-ON-ONE TUTORING AND BASIC COMPUTER SKILLS TRAINING UTILIZING ON-LINE PRACTICE EXAMS TO PREPARE FOR GED EXAMS. THE CITIZENSHIP PROGRAM SUPPORTS CLIENTS ON THEIR PATH TO BECOME U.S NATURALIZED CITIZENS BY HELPING THEM TO PREPARE FOR THE U.S NATURALIZATION EXAM. CLIENTS ARE TAUGHT BASIC U.S HISTORY AND CIVICS USING THE U.S CITIZENSHIP AND IMMIGRATION SERVICES CURRICULUM. IF THE CLIENTS ARE NOT FLUENT IN ENGLISH, THEY ARE ALSO TAUGHT BASIC READING, WRITING, AND SPEAKING SKILLS IN ORDER TO PASS THE ENGLISH COMPONENT OF THE TEST AND INTERVIEW. GRANT AMOUNT - \$5,000. GIRL SCOUTS SPIRIT OF NEBRASKA: LINCOLN OUTREACH PROGRAM OFFERS CRITICAL YOUTH DEVELOPMENT PROGRAMMING THAT ENHANCES BOTH ACADEMIC PERFORMANCE AND LIFE SKILLS. GIRL SCOUTS HOPES TO EMPOWER EVERY

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

COUNTY

GIRL-REGARDLESS OF HER RACE, ETHNICITY, SOCIOECONOMIC STATUS, SEXUAL

ORIENTATION, DISABILITY, GENDER IDENTITY OR GEOGRAPHIC LOCATION-TO MAKE

THE WORLD A BETTER PLACE. ACTIVITIES ARE PROVIDED AT NO COST TO GIRLS

WHO MAY NOT OTHERWISE BE ABLE TO PARTICIPATE. GIRL SCOUT PROGRAMS ARE

DESIGNED TO BE GRADE-LEVEL APPROPRIATE AND COMPLEMENT THE SCHOOL

CURRICULUM. KEY PROGRAM AREAS INCLUDE STEM, LIFE SKILLS,

ENTREPRENEURSHIP, AND OUTDOOR EXPERIENCES. EVERY ACTIVITY INTENTIONALLY

FOCUSES ON THE POSITIVE DEVELOPMENT OF GIRLS. THE CURRICULUM IS BASED

ON THE GIRL SCOUT LEADER EXPERIENCE AND IS DELIVERED THROUGH A SEQUENCE

OF ACTIVITIES KNOWN AS "JOURNEYS" AND DISCUSSIONS THAT ADD UP TO A

MEANINGFUL OUTCOME. GRANT AMOUNT - \$15,000.

THE HUB-CENTRAL ACCESS POINT FOR YOUNG ADULTS: LINCOLN EDUCATION

OUTREACH (LEO)PROGRAM IS AN INTERVENTION AND SUPPORTIVE ACADEMIC

PROGRAM FOR YOUNG PEOPLE WHO ARE NOT ON TRACK TO GRADUATE FROM HIGH

SCHOOL; IDENTIFIED AS HABITUALLY TRUANT; HIGH SCHOOL DROP OUTS; OR

AT-RISK OF ENTERING OR RE-ENTERING THE JUVENILE JUSTICE SYSTEM. LEO

OFFERS GED PREPARATION CLASSES/ACADEMIC SUPPORT; HIGH SCHOOL

RE-ENGAGEMENT/TRUANCY PREVENTION; POST-SECONDARY EDUCATIONAL PURSUIT OR

CAREER SKILL DEVELOPMENT; AND EMPLOYMENT READINESS TRAINING. LEO SERVES

PARTICIPANTS AGE 16-24 WHO ARE TRANSITIONING FROM CHILDHOOD TO

ADULTHOOD AND FACING SIGNIFICANT BARRIERS TO BECOMING PRODUCTIVE

ADULTS. GRANT AMOUNT - \$32,500.

THE HUB-CENTRAL ACCESS POINT FOR YOUNG ADULTS: YOUTH AND COMMUNITY

TOGETHER (YOUTHACT) SERVES YOUNG MEN & WOMEN WHO ARE STUDENT PARENTS AT

LINCOLN PUBLIC SCHOOLS AND THAT ARE COMPLETING THEIR GED AT THE HUB.

YOUTH ACT WORKS WITH THESE STUDENT PARENTS TO SUPPORT AND ASSIST THEM

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

COUNTY

AS THEY TRANSITION TO ADULTHOOD. YOUNG PARENTS RECEIVE CASE MANAGEMENT,

SUPPORT, AND RESOURCES THAT ENHANCE THE LEARNING THEY EXPERIENCE IN

PARENTING CLASSES OFFERED WITHIN LINCOLN PUBLIC SCHOOLS. SUPPORTS FOCUS

ON PROVIDING RESOURCES IN AREAS SUCH AS NAVIGATING CHANGING

RELATIONSHIPS; SELF-WORTH/SELF-ESTEEM; IMPORTANCE OF SELF-CARE; AND

CONNECTIONS TO COMMUNITY SUPPORTS AND RESOURCES. THE PROGRAM CONNECTS

WITH YOUNG PARENTS ENGAGED IN GED PROGRAMMING AT THE HUB WRAPPING

SIMILAR SUPPORTS AND CASE MANAGEMENT SERVICES AROUND THEM TO THOSE

OFFERED IN LINCOLN PUBLIC SCHOOLS. GRANT AMOUNT - \$9,000.

LIGHTHOUSE: AFTERSCHOOL MENTORING PROGRAM WORKS TO IMPACT RISK FACTORS

THAT MAKE YOUNG PEOPLE VULNERABLE TO PARTICIPATE IN UNHEALTHY

BEHAVIORS. RESEARCH STATES THAT UNSUPERVISED TIME WITH PEERS AND LOW

SELF-ESTEEM ARE TWO PRIMARY RISK FACTORS PREDICTING YOUTH PARTICIPATION

IN HEALTH COMPROMISING BEHAVIOR. THERE IS A POSITIVE CORRELATION

BETWEEN LOW SELF-ESTEEM AND UNSUPERVISED TIME WITH PEERS AND INCREASED

PARTICIPATION IN HIGH-RISK BEHAVIORS INCLUDING DRUG/ALCOHOL USE,

CRIMINAL BEHAVIOR, GANGS, AND SEXUAL ACTIVITY. TO ENSURE THAT YOUTH ARE

ADEQUATELY SUPERVISED AT LIGHTHOUSE, THEY ARE NEVER IN ANY AREA OF THE

FACILITY WITHOUT AN ADULT STAFF MEMBER OR VOLUNTEER. STAFF AND

VOLUNTEERS BUILD POSITIVE RELATIONSHIPS WITH YOUNG PEOPLE THROUGH

CONVERSATIONS, GAMES, AND OTHER ACTIVITIES WHILE ENSURING RULES ARE

ENFORCED. THE PROGRAM HELPS BUILD YOUNG PEOPLE'S SELF-ESTEEM BY

PROVIDING OPPORTUNITIES TO LEARN, CONTRIBUTE AND BE RECOGNIZED FOR

THEIR ACCOMPLISHMENTS.

LIGHTHOUSE: EDUCATION PROGRAM PROVIDES HIGH QUALITY AFTER-SCHOOL

GRANT AMOUNT - \$73,000.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

Employer identification number 47-0376624

PROGRAMMING IN A SAFE ENVIRONMENT THAT SEEKS TO INCREASE THE LIKELIHOOD

OF HIGH SCHOOL GRADUATION OF MIDDLE AND HIGH SCHOOL-AGED YOUTH. YOUTH

THAT REGULARLY PARTICIPATE IN THE PROGRAM ARE MORE LIKELY TO BE

PROMOTED TO THE NEXT GRADE LEVEL; GRADUATE FROM HIGH SCHOOL; OR EARN A

G.E.D. THEY ARE LESS PRONE TO ENGAGE IN CRIMINAL OR ILLEGAL BEHAVIOR.

PARTICIPANTS DEVELOP SKILLS NECESSARY TO PURSUE HIGHER EDUCATION,

VOCATIONAL TRAINING, OR MEANINGFUL EMPLOYMENT AND LEARN ABOUT CAREER

AND POST HIGH SCHOOL EDUCATION/TRAINING OPPORTUNITIES. GRANT AMOUNT 
\$17,500.

LINCOLN LITERACY: FAMILY LITERACY ACTIVITIES FOR IMMIGRANTS & REFUGEES (FLAIR) PROGRAM IS A UNIVERSITY-DESIGNED PROGRAM TEACHING IMMIGRANT AND REFUGEE CHILDREN WHILE ALSO HELPING THEIR PARENTS GAIN ENGLISH LANGUAGE LITERACY. WORKING WITH THE WHOLE FAMILY IS CRUCIAL AS RESEARCH INDICATES THAT CHILDREN WHOSE FAMILIES DON'T SPEAK ENGLISH AT HOME ARE AT HIGH RISK; BUT IF THEIR PARENTS LEARN ALONGSIDE THEM, THEY ARE MORE LIKELY TO SUCCEED. WORKING WITH SOME OF THE MOST VULNERABLE KIDS IN OUR COMMUNITY, THE PROGRAM FOSTERS SUCCESS IN SCHOOL BY DEPLOYING CERTIFIED TEACHERS AND TRAINED VOLUNTEERS TO PRESENT FUN, SELF-CONTAINED, EXTRACURRICULAR LESSONS ON A WIDE VARIETY OF TOPICS TIED TO BOOKS. FOR CHILDREN, THIS MEANS LEARNING ORAL ENGLISH, THE ALPHABET, NUMBERS, PHONICS, AND READING AND LEARNING TO FOLLOW DIRECTIONS, RAISE HANDS, MANAGE EMOTIONS, COOPERATE AND TAKE TURNS WITH OTHERS. FOR PARENTS, IT MEANS LEARNING ENGLISH, READING WITH THEIR CHILDREN, MODELING LIFELONG LEARNING, AND GETTING INVOLVED IN THEIR CHILDREN'S EDUCATION. AMOUNT - \$30,000.

LINCOLN PUBLIC SCHOOLS: TWO GENERATION FAMILY LITERACY PROGRAM'S

Employer identification number 47-0376624

PHILOSOPHY IS THAT THE PARENT IS THE CHILD'S FIRST AND MOST IMPORTANT

TEACHER, AND THE GOAL IS IMPROVED ACADEMIC AND SOCIAL/EMOTIONAL

DEVELOPMENT. THE PROGRAM IS BASED ON THE FOUR-COMPONENT FAMILY LITERACY

MODEL DEVELOPED BY THE NATIONAL CENTER FOR FAMILIES LEARNING: ADULT

LITERACY, CHILD EDUCATION, PARENT EDUCATION, AND PARENT AND CHILD

TOGETHER TIME (PACT). PROGRAMMING IS FOR PARENTS OF CHILDREN ATTENDING

AN LPS SCHOOL, AND PARENTS ATTEND TWO HOURS PER DAY, FIVE DAYS PER

WEEK. THE PROGRAM IS SCHOOL-BASED, BUT COLLABORATION IS A FUNDAMENTAL

COMPONENT. CHILDREN TARGETED BY THE PROGRAM IMPROVE BOTH THEIR ACADEMIC

AND SOCIAL/EMOTIONAL DEVELOPMENT WHILE THEY PARTICIPATE IN THE PROGRAM

WITH THEIR FAMILIES. THE PROGRAM OPERATES IN TWELVE SCHOOLS: BELMONT,

CAMPBELL, CLINTON, CULLER, ELLIOTT, EVERETT, HARTLEY, LAKEVIEW, MCPHEE,

PRESCOTT, RANDOLPH AND WEST LINCOLN. GRANT AMOUNT - \$14,000.

LUX CENTER FOR THE ARTS: AFTER-SCHOOL ENRICHMENT ART CLASSES FOR

LOW-INCOME AND AT-RISK YOUTH PROGRAM DELIVERS AFTER-SCHOOL ART CLASSES

TO UNDER-SERVED TITLE 1 LOW-INCOME SCHOOLS IN THE LINCOLN PUBLIC

SCHOOLS DISTRICT AND ART CLASSES TO INCARCERATED AND AT-RISK YOUTH IN

THE LANCASTER COUNTY YOUTH SERVICES CENTER. THE PROGRAM'S CURRICULUM IS

TAILORED, AND CLASSES ARE AGE AND SKILL APPROPRIATE. LESSONS COVER

PAINTING, DRAWING, PRINT-MAKING, AND CERAMICS. CLASSES ALLOW CHILDREN

AND YOUTH TO HAVE A SUSTAINED ART EXPERIENCE WITH QUALITY INSTRUCTORS

AND MATERIALS. CLASSES ARE ONE HOUR PER WEEK FOR SIX WEEKS. GRANT

AMOUNT - \$9,601.

MALONE COMMUNITY CENTER: EARLY EDUCATION PROGRAM PROVIDES A MONTESSORI INSPIRED, NEIGHBORHOOD-BASED, EDUCATIONAL AND RECREATIONAL PROGRAM FOR CHILDREN AGES 3-5. THROUGHOUT THE DAY, PARTICIPANTS ARE PROVIDED WITH

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER
COUNTY

ACTIVITIES LEARN SOCIAL AND COGNITIVE SKILLS AS WELL AS INDEPENDENCE.

THE PROGRAM'S OBJECTIVE IS TO PREPARE CHILDREN FOR SCHOOL IN A PLAYFUL,

BUT STRUCTURED WAY. ACTIVITIES INCLUDE: FREE PLAY, CIRCLE TIME, LETTER

OF THE WEEK, OUTDOOR TIME, MUSIC AND MOVEMENT TIME, AND SMALL GROUP

ACTIVITIES CENTERING ON LITERACY, MATH, SCIENCE AND ART. A TWO HOUR

NAP/QUIET TIME IS INCORPORATED INTO THE DAILY SCHEDULE. A NUTRITIOUS

BREAKFAST, LUNCH, AND SNACK ARE PROVIDED. GRANT AMOUNT - \$5,000.

FORM 990, PART III, LINE 4A, DESCRIPTION OF PROGRAM SERVICE:

MALONE COMMUNITY CENTER: OUT-OF-SCHOOL PROGRAM IS FOR YOUTH AGES 5-13

TARGETING CULTURALLY AND ETHNICALLY DIVERSE CHILDREN FROM LOW-INCOME

FAMILIES. MONDAY-FRIDAY PARTICIPANTS ARE PROVIDED TRANSPORTATION FROM

SCHOOL TO THE MALONE CENTER TO RECEIVE PROGRAMMING. ACADEMICS ARE

SUPPORTED, IN ADDITION TO STRUCTURED RECREATION, ARTS, CRAFTS,

NUTRITION EDUCATION, AND CULTURAL AWARENESS. ACADEMIC SUPPORT

ACTIVITIES INCLUDE HOMEWORK ASSISTANCE AND SUPPLEMENTAL ONE-ON-ONE

TUTORING IN READING, WRITING AND MATH. ON MOST OUT-OF-SCHOOL DAYS AND

DURING SCHOOL BREAKS, THE MALONE COMMUNITY CENTER IS OPEN ALL DAY FOR

PARTICIPANTS AND A NUTRITIOUS BREAKFAST, LUNCH, AND SNACK IS PROVIDED.

GRANT AMOUNT - \$15,000.

NORTHEAST FAMILY CENTER: PARENTS AS PARTNERS PROGRAM ENHANCES LIVES OF
CHILDREN AND THEIR PARENTS THROUGH ONGOING ENRICHMENT, EDUCATION AND
SUPPORT OPPORTUNITIES. THE EARLY LEARNING CENTER (ELC) PROVIDES A

FULL-TIME, ACADEMIC BASED AND LICENSED EARLY CHILDHOOD EDUCATION
PROGRAM FOR CHILDREN 6 WEEKS TO 5 YEARS. THE CREATIVE CURRICULUM

UTILIZED IS A COMPREHENSIVE RESEARCH BASED EARLY CHILDHOOD CURRICULUM
THAT HAS BEEN SHOWN TO IMPROVE COGNITIVE AND SOCIAL/EMOTIONAL OUTCOMES

032212 11-20-20

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

IN YOUNG CHILDREN. LEAD TEACHERS IN EACH CLASSROOM PROVIDE FAMILY

CONFERENCES THREE TIMES A YEAR TO SUPPORT PARENTING PRACTICES,

DEVELOPMENT KNOWLEDGE, AND CHILD ASSESSMENTS. NETWORKING OPPORTUNITIES

ARE PROVIDED THROUGH MONTHLY FAMILY CONNECTION NIGHTS, AND THE PROGRAM

WORKS WITH INDIVIDUAL FAMILIES WHENEVER NECESSARY TO PROVIDE RESOURCES

THAT BEST SUPPORT THE FAMILY'S WELL-BEING. GRANT AMOUNT - \$25,000.

THE SALVATION ARMY-LINCOLN: AFTER SCHOOL PROGRAM/FINE ARTS ACADEMY

PROVIDES A SAFE ENVIRONMENT TO AT-RISK YOUTH IN THE HOURS FOLLOWING

SCHOOL, SATURDAY'S, AND DURING THE DAY IN THE SUMMER. EDUCATIONAL

SUPPORT IS PROVIDED BY STAFF AND VOLUNTEER TUTORS TO WORK WITH STUDENTS

WHO NEED HELP WITH SCHOOL AND COMPLETING HOMEWORK. YOUTH ARE EDUCATED

IN AREAS SUCH AS HEALTHY EATING, ANTI-TOBACCO EDUCATION, MATH, SCIENCE,

ART, AND OTHER SKILL BUILDING AND RECREATIONAL ACTIVITIES. THE FINE

ARTS ACADEMY PROVIDES FREE MUSIC EDUCATION AND INSTRUMENTS TO LOW

INCOME FAMILIES. MUSIC EDUCATION IS SHOWN TO HELP STUDENTS LEARN MATH,

TEAM WORK, DISCIPLINE, CREATIVITY, SOCIAL SKILLS, ORGANIZATION,

PATIENCE, AND SELF-EXPRESSION. GRANT AMOUNT - \$30,000.

TEAMMATES OF LINCOLN: TEAMMATES MENTORING PROGRAM OF LINCOLN PROGRAM

SERVES STUDENTS IN GRADES 3-12 IN 70 PUBLIC AND PAROCHIAL SCHOOLS. THIS

INCLUDES ALL 26 TITLE ONE SCHOOLS, WHERE THE MAJORITY OF STUDENTS LIVE

IN LOW INCOME HOUSEHOLDS. THIS IS SIGNIFICANT, AS POVERTY CREATES

CHALLENGES THAT CAN CAUSE STUDENTS TO DISENGAGE FROM SCHOOL. TEAMMATES

MENTORS ACTIVELY ENCOURAGE SCHOOL ENGAGEMENT BY PROVIDING ONE-TO-ONE,

SCHOOL-BASED MENTORING FOCUSING ON THE INTENTIONAL CULTIVATION OF A

STUDENT'S STRENGTHS; WHILE MODELING POSITIVE SOCIAL BEHAVIORS AND

BUILDING A MEANINGFUL, NON-FAMILIAL RELATIONSHIP WITH THE STUDENT. THE

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER Employer identification number 47-0376624

DEVELOPMENTAL MODEL OF MENTORING USES A STRENGTHS-BASED APPROACH TO

DEVELOPMENTAL MODEL OF MENTORING USES A STRENGTHS-BASED APPROACH TO

COUNTERACT THE CORROSIVE EFFECTS OF POVERTY AND ADVERSE CHILDHOOD

EXPERIENCES. THE RESULT OF THIS MODEL IS IMPROVED SCHOOL ATTENDANCE AND

ACADEMIC PERFORMANCE AND FEWER BEHAVIORAL REFERRALS AMONG TEAMMATES

STUDENTS. TEAMMATES STUDENTS ALSO GRADUATE HIGH SCHOOL ON TIME AND AT A

HIGHER RATE THAN STATE AND CITY WIDE AVERAGES. GRANT AMOUNT - \$58,803.

WILLARD COMMUNITY CENTER: LAKEVIEW COMMUNITY LEARNING CENTER (CLC)

PROGRAM IS A STATE LICENSED CHILDCARE PROGRAM PROVIDING BEFORE AND

AFTER SCHOOL AND NON-SCHOOL DAY SERVICES. THE PROGRAM OFFERS

DISCOUNTED RATES FOR QUALIFIED FAMILIES, SNACKS, EDUCATIONAL AND

ENRICHMENT CENTERS, CLUBS, COMPUTER TIME, RECREATIONAL ACTIVITIES, AND

HOMEWORK TIME. THE PURPOSE OF THE CLC IS TO CREATE AN EXTENDED LEARNING

OPPORTUNITY DURING NON-SCHOOL HOURS PROVIDING STUDENTS WITH ACADEMIC

ENRICHMENT OPPORTUNITIES AND ADDITIONAL ACTIVITIES TO COMPLEMENT THEIR

REGULAR ACADEMIC PROGRAM. GOALS INCLUDE FOSTERING SUCCESSFUL YOUTH,

THRIVING FAMILIES, AND STRONGER NEIGHBORHOODS. NON-SCHOOL DAY CARE IS

ALSO AVAILABLE AT THE WILLARD COMMUNITY CENTER. GRANT AMOUNT 
\$12,000.

WILLARD COMMUNITY CENTER: PRESCHOOL AND PRE-K PROGRAMS PROVIDES

LICENSED PRESCHOOL FOR 3-4 YEAR OLDS AND A PRE-K PROGRAM FOR 4-5 YEAR

OLDS AT TWO LOCATIONS - LAKEVIEW AND ROPER ELEMENTARY SCHOOLS. THE

PROGRAM OFFERS THE CREATIVE CURRICULUM AND IS CURRENTLY WORKING THROUGH

STEP UP TO QUALITY. THE CURRICULUM DIFFERS FOR BOTH AGE GROUPS BUT

FOCUSES ON DEVELOPING A CHILD'S SOCIAL/EMOTIONAL, COGNITIVE, FINE AND

LARGE MOTOR SKILLS. LEARNING STATIONS INCLUDE AGE APPROPRIATE MATH,

SCIENCE, LANGUAGE, ART AND DRAMATIC PLAY. PART-TIME AND FULL-TIME

\$5,000.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER
COUNTY 47-0376624

OPTIONS ARE AVAILABLE TO FAMILIES FROM 6:30 AM TO 5:30 PM, MONDAY

THROUGH FRIDAY AND TITLE TWENTY IS ACCEPTED. THE GOAL OF THE EARLY

CHILDHOOD PROGRAM IS TO PREPARE CHILDREN FOR THE NEXT STEPS IN THEIR

FUTURE. SHARING, COOPERATING, AND UTILIZING CONFLICT RESOLUTION SKILLS

ARE LEARNED, AND PROGRAMS OFFER A PLACE FOR CHILDREN TO DEVELOP THESE

SKILLS IN A SAFE, FUN, AND CARING ENVIRONMENT. BI-ANNUAL ASSESSMENTS

ARE COMPLETED TO MEASURE PROGRESS THROUGHOUT THE YEAR. GRANT AMOUNT -

YWCA LINCOLN: SMART GIRLS PROGRAM ENABLES GIRLS IN 4TH THROUGH 8TH GRADES TO EXPLORE SCIENCE, TECHNOLOGY, ENGINEERING, AND MATH (STEM) FIELDS AND ACTIVITIES IN A SUPPORTIVE ENVIRONMENT. THE MAJORITY OF GIRLS MEET IN COMMUNITY LEARNING CENTERS ONCE A WEEK DURING THE SCHOOL YEAR. GIRLS CONDUCT HANDS-ON EXPERIMENTS AND INVESTIGATIONS TO BUILD ESSENTIAL LIFE SKILLS, INCLUDING CRITICAL THINKING, COLLABORATION, TEAMWORK, CREATIVITY AND PROBLEM SOLVING. EXPERIMENTS, INVESTIGATIONS, AND DESIGN-CHALLENGES REQUIRE THE GIRLS TO USE 21ST CENTURY LEARNING THE PROGRAM EMPOWERS GIRLS TO SEE STEM SUBJECTS AS VIABLE, SKILLS. ATTAINABLE, AND RELATABLE AND TO ENVISION FUTURE CAREERS IN STEM-RELATED FIELDS. ROLE MODELS WITH BACKGROUNDS IN STEM PROFESSIONS VISIT THE PROGRAM PROVIDING INSIGHT INTO STEM CAREERS. SMART GIRLS UTILIZES CURRICULUM FROM TECHBRIDGE GIRLS, A CURRICULUM AND PROGRAM ORIGINALLY FUNDED AND SUPPORTED THROUGH A NATIONAL SCIENCE FOUNDATION GRANT AMOUNT - \$9,000. GRANT.

FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE:

THE FOLLOWING AGENCIES AND PROGRAMS WERE AWARDED GRANTS IN THIS FOCUS

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER Employer identification number 47-0376624

AREA:

AMERICAN RED CROSS OF SOUTHEAST NEBRASKA CHAPTER: DISASTER

PREPAREDNESS, RESPONSE AND RECOVERY PROGRAM PROVIDES ASSISTANCE TO

PEOPLE IN THE IMMEDIATE AFTERMATH OF A DISASTER. WHEN A HOME FIRE

OCCURS, THE PROGRAM PROVIDES BASIC NEEDS AND ASSISTANCE HELPING

INDIVIDUALS AND FAMILIES TO RESUME NORMAL DAILY ACTIVITIES. COMMUNITY

VOLUNTEERS ARE TRAINED TO RESPOND TO HOME FIRES AND LARGE SCALE

DISASTERS AND PROVIDE DIRECT ASSISTANCE WITH SHELTER, FOOD, AND

PHYSICAL AND MENTAL HEALTH. THE PROGRAM HELPS PREVENT AND PREPARE FOR

DISASTERS THROUGH THE HOME FIRE CAMPAIGN, PROVIDING EDUCATION AND

OUTREACH TO VULNERABLE POPULATIONS, PARTICULARLY THOSE LIVING AT OR

NEAR THE POVERTY LEVEL AND AT A HIGH RISK FOR A HOME FIRE. FAMILIES

ARE HELPED WITH INSTALLATION OF SMOKE ALARMS AND DEVELOPMENT OF A

PERSONALIZED HOME FIRE RESPONSE PLAN. GRANT AMOUNT -\$30,000.

CASA FOR LANCASTER COUNTY: COURT APPOINTED ADVOCACY FOR AT-RISK

CHILDREN RECRUITS, TRAINS AND SUPPORTS COMMUNITY VOLUNTEERS WHO

ADVOCATE FOR THE NEEDS AND BEST INTERESTS OF ABUSED, NEGLECTED, TRUANT

AND UNGOVERNABLE CHILDREN IN JUVENILE COURT. CASA VOLUNTEERS PROVIDE A

VOICE FOR CHILDREN IN THE COURT SYSTEM, EXPEDITE PERMANENCY, PROVIDE

REFERRALS FOR NEEDED SERVICES, AND ENSURE THAT CHILDREN HAVE SAFE

PERMANENT HOMES. GRANT AMOUNT - \$18,900.

CATHOLIC SOCIAL SERVICES OF SOUTHERN NEBRASKA: ST. GIANNA WOMEN'S HOMES

PROGRAM PROVIDES A SAFE ENVIRONMENT IN A FULLY FURNISHED LONG-TERM

HOUSING COMPLEX TO WOMEN FLEEING DOMESTIC VIOLENCE AND OTHER FORMS OF

ABUSE AND CONTROL. APARTMENTS ARE DESIGNED TO GIVE WOMEN AND CHILDREN

032212 11-20-20

GRANT AMOUNT - \$16,200.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

COUNTY

THE TIME AND SUPPORT THEY NEED BEFORE TRANSITIONING INTO PERMANENT

HOUSING. THE RESIDENTIAL APARTMENTS ARE COMPRISED OF SIX 1-BR

APARTMENTS, TWELVE 2-BR APARTMENTS AND SIX 3-BR APARTMENTS. THREE

MARIAN SISTERS AND ONE RESIDENT CARE MANAGER LIVE IN RESIDENCE AT ST.

GIANNA'S HOME AND ADVOCATE FOR THESE FAMILIES BY WORKING TO DEVELOP A

FAMILY ACTION PLAN AND CONNECTING THEM TO RESOURCES. IN ADDITION TO

HOUSING, THE PROGRAM PROVIDES EDUCATION, EMPLOYMENT, AND COUNSELING

SERVICES FOR FAMILIES LEFT HOMELESS BECAUSE OF DOMESTIC VIOLENCE.

CEDARS YOUTH SERVICES: CEDARS PREVENTION SERVICES PROGRAM SERVES

AT-RISK EXPECTANT MOTHERS AND FAMILIES WITH CHILDREN AGES BIRTH THROUGH

18 YEARS FOCUSING ON KEEPING CHILDREN SAFE FROM ABUSE AND NEGLECT AND

PREVENTING FAMILIES FROM REQUIRING FORMAL INVOLVEMENT IN THE CHILD

WELFARE SYSTEM. PROGRAMS UTILIZE EVIDENCE-BASED HOME VISITATION

SERVICES, PARENTING CURRICULA, TRAUMA-INFORMED CARE, AND THE

WRAP-AROUND PHILOSOPHY TO HELP CHILDREN AND FAMILIES BUILD PROTECTIVE

FACTORS, REDUCE RISK FACTORS, AND IMPROVE OVERALL WELL-BEING. THE HOME

VISITING PROCESS BRINGS TOGETHER PEOPLE AND SERVICES IN THE FAMILY'S

LIFE, INCLUDING OTHER FAMILY MEMBERS AND INFORMAL SUPPORTS, TO HELP

FAMILIES PROVIDE SAFETY, STABILITY, AND ENDURING RELATIONSHIPS FOR

THEIR CHILDREN. THE PROGRAM CONNECTS VULNERABLE FAMILIES WITH

PREVENTION SERVICES THAT BEST MEETS THEIR NEEDS BY OFFERING AN ARRAY OF

HOME BASED PREVENTION PROGRAMS. GRANT AMOUNT - \$105,325.

EL CENTRO DE LAS AMERICAS: MUJERES EN CONFINAZA (WOMEN AMONG FRIENDS)

PROGRAM IS AN OUTREACH, CASE MANAGEMENT, AND REFERRAL PROGRAM TARGETING

LATINA WOMEN AND THEIR CHILDREN WHO HAVE EXPERIENCED DOMESTIC VIOLENCE.

GRANT AMOUNT - \$6,300.

Employer identification number 47-0376624

THE PROGRAM HOSTS AND FACILITATES WEEKLY SUPPORT GROUPS BY PROVIDING A

SAFE SPACE FOR SPANISH-SPEAKING VICTIMS TO CONVERSE IN THEIR NATIVE

LANGUAGE AND LEARN ABOUT RESOURCES AVAILABLE TO THEM. A BILINGUAL AND

BI-CULTURAL SPECIALIST SERVES AS A RESOURCE TO HELP PARTICIPANTS BUILD

A SUPPORT SYSTEM BY CONNECTING VICTIMS TO OTHER IMPORTANT COMMUNITY

RESOURCES. THE PROGRAM IS A NETWORK MODEL OF SUPPORT SPECIFICALLY

DESIGNED FOR ABUSE VICTIMS IN MINORITY COMMUNITIES. PARTNERS INCLUDE

OTHER AREA AGENCIES (E.G. FRIENDSHIP HOME, VOICES OF HOPE, & THE

LINCOLN POLICE DEPARTMENT) TO PROVIDE IMPORTANT SERVICES TO LATINA

VICTIMS OF DOMESTIC VIOLENCE.

PROVIDES THERAPY AND COMMUNITY RESPONSE SERVICES TO YOUTH AND FAMILIES

IN 23 LINCOLN PUBLIC SCHOOLS. SERVICES ARE CURRENTLY PROVIDED AT 14

ELEMENTARY SCHOOLS, 5 MIDDLE SCHOOLS, AND 4 HIGH SCHOOLS. THE PROGRAM

ASSISTS STUDENTS AND FAMILIES THAT ARE DEALING WITH MENTAL HEALTH

SYMPTOMS AND LIFE STRESSORS THAT ARE IMPACTING THEIR BEHAVIORS AND

FAMILY SERVICE ASSOCIATION OF LINCOLN: BEHAVIORAL HEALTH PROGRAM

ASSISTS STUDENTS AND FAMILIES THAT ARE DEALING WITH MENTAL HEALTH

SYMPTOMS AND LIFE STRESSORS THAT ARE IMPACTING THEIR BEHAVIORS AND

RELATIONSHIPS AT SCHOOL AND HOME. SERVICES ARE PROVIDED FREE OF CHARGE

WITHIN SCHOOLS TO FAMILIES WHO OTHERWISE ARE NOT ABLE TO ACCESS HELP

BECAUSE OF ECONOMIC HARDSHIP INCLUDING THOSE UNABLE TO QUALIFY FOR

MEDICAID OR UNABLE TO AFFORD THE COST OF THIRD PARTY INSURANCE. TRAINED

STAFF MEMBERS MEET WITH YOUTH AT THEIR SCHOOL WHICH IS A NATURAL AND

FAMILIAR ENVIRONMENT. PROVIDING SERVICES WITHIN SCHOOL SITES REDUCES

STRESS OR CONFLICT FOR PARENTS WHO OTHERWISE WOULD HAVE TO MISS WORK TO

TRANSPORT THEIR CHILDREN TO VITAL MENTAL HEALTH APPOINTMENTS.

GRANT AMOUNT - \$42,000.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 FRIENDSHIP HOME OF LINCOLN, INC: EMERGENCY SHELTER PROGRAM PROVIDES CONFIDENTIAL EMERGENCY SHELTER, TRANSITIONAL HOUSING, RAPID REHOUSING, AND SUPPORTIVE SERVICES TO VICTIMS OF DOMESTIC VIOLENCE AND THEIR CHILDREN. THE PROGRAM OPERATES A SERVICE CENTER, ONE EIGHT-BEDROOM COMMUNAL SHELTER, AND 12 SINGLE FAMILY SHELTERS (APARTMENTS); A TOTAL OF 85 EMERGENCY SHELTER BEDS AND 15 TRANSITIONAL HOUSING UNITS. SERVICES ARE PROVIDED THROUGH A VICTIM-CENTERED, TRAUMA-INFORMED LENS TO HELP VICTIMS INCREASE SAFETY AND REBUILD THEIR LIVES. THE PROGRAM HAS A DAILY CASELOAD OF 122 VICTIMS SHELTERED AND A DAILY AVERAGE OF 37 WAITING FOR SHELTER. VICTIMS AND THEIR CHILDREN WHO SEEK SHELTER WILL INCREASE THEIR SAFETY PLANNING SKILLS, KNOWLEDGE OF THE DYNAMICS OF DOMESTIC VIOLENCE, AND KNOWLEDGE OF INTIMATE PARTNER RELATIONSHIPS BASED ON EQUALITY AND RESPECT. VICTIMS WILL BE SAFER WHILE RESIDING IN THE PROGRAM'S SHELTERS. VICTIMS LEARN TO IDENTIFY AND BUILD INDIVIDUALIZED SUPPORT SYSTEMS AND BECOME MORE AWARE OF AVAILABLE COMMUNITY RESOURCES. GRANT AMOUNT - \$70,650. HOPESPOKE OUTPATIENT SERVICES PROGRAM PROVIDES INDIVIDUAL, FAMILY, GROUP, AND MARITAL THERAPEUTIC SERVICES TO CHILDREN, ADOLESCENTS, AND ADULTS AT THE DOWNTOWN SITE AND WITHIN THE LINCOLN PUBLIC SCHOOLS. MOST CLIENTS HAVE EXPERIENCED SEXUAL, PHYSICAL, AND/OR EMOTIONAL TRAUMA. THE PROGRAM SERVES CLIENTS WHO HAVE MEDICAID OR WHO HAVE NO ACCESS TO THIRD PARTY PAYMENT. MULTILINGUAL CLINICIANS PROVIDE ASSISTANCE TO THOSE WHO SPEAK SPANISH, RUSSIAN, ITALIAN AND ROMANIAN IN ADDITION TO A THERAPIST WHO PROVIDES SIGN LANGUAGE TO DEAF/HARD OF

GRANT AMOUNT - \$120,000.

HEARING CLIENTS.

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 LEGAL AID OF NEBRASKA: DOMESTIC VIOLENCE REPRESENTATION PROJECT BELIEVES THAT IT IS EVERY PERSON'S RIGHT TO BE FREE OF FEAR AND ABUSE AND PROVIDES A CRUCIAL SERVICE THAT BRINGS RELIEF TO THOSE WHO ARE IN DISTRESS. SERVICES EMPOWER VICTIMS TO BECOME SURVIVORS AND MAINTAIN THEIR RIGHT TO LIVE A LIFE FREE OF VIOLENCE. ATTORNEYS HELP CLIENTS PURSUE SAFETY AND SEPARATION FROM THEIR ABUSERS IN ALL AREAS OF LAW, AND CASES ARE RARELY SIMPLE. IN ADDITION TO NEEDING ASSISTANCE WITH PROTECTION ORDERS, CUSTODY, AND DIVORCE, VICTIMS OF DOMESTIC VIOLENCE MAY ALSO HAVE LEGAL ISSUES RELATED TO HOUSING, PUBLIC BENEFITS, ACCESS TO HEALTHCARE AND FINANCIAL WELL-BEING. BY PROVIDING LEGAL ASSISTANCE TO THESE CLIENTS, THE PROGRAM WORKS TO END THE CYCLE OF INTIMATE PARTNER VIOLENCE. IT ALSO ASSISTS WITH WRAP-AROUND SERVICES (BY WAY OF COLLABORATIVE EFFORTS WITH LOCAL SHELTERS) TO MEET THE NEEDS OF FAMILIES WITHIN THE COMMUNITY. GRANT AMOUNT - \$13,500. LINCOLN/LANCASTER COUNTY CHILD ADVOCACY CENTER: DIRECT SERVICES TO CHILD VICTIMS OF ABUSE PROGRAM FOLLOWS EVIDENCE-BASED PROTOCOLS TO ADDRESS ABUSE BY PROVIDING INTERVENTION AFTER DISCLOSURE OF ABUSE. TALKING ABOUT ABUSE IS HARD, ESPECIALLY FOR A CHILD STRUGGLING TO UNDERSTAND THE ABUSE. THE PROGRAM ALLOWS CHILDREN TO TELL THEIR STORY AND BE HEARD; RECOGNIZES AND DETERMINES IF THERE ARE PHYSICAL OR MENTAL

CHILD VICTIMS OF ABUSE PROGRAM FOLLOWS EVIDENCE-BASED PROTOCOLS TO

ADDRESS ABUSE BY PROVIDING INTERVENTION AFTER DISCLOSURE OF ABUSE.

TALKING ABOUT ABUSE IS HARD, ESPECIALLY FOR A CHILD STRUGGLING TO

UNDERSTAND THE ABUSE. THE PROGRAM ALLOWS CHILDREN TO TELL THEIR STORY

AND BE HEARD; RECOGNIZES AND DETERMINES IF THERE ARE PHYSICAL OR MENTAL

HEALTH CONCERNS; AND DEVELOPS STRONG RELATIONSHIPS WITH A

TRAUMA-TRAINED ADVOCATE WHO CAN PROVIDE SUPPORT AND REFERRALS TO MEET

THE NEEDS OF THE CHILD AND THEIR NON-OFFENDING CAREGIVERS. DIRECT

SERVICES PROVIDED TO VICTIMS OF CHILD ABUSE IN LANCASTER COUNTY

INCLUDE: FORENSIC INTERVIEWS; MEDICAL EVALUATIONS; ON-GOING ADVOCACY;

COURT SCHOOL; REFERRALS FOR MENTAL HEALTH SERVICES; CASE COORDINATION;

PROFESSIONAL TRAINING; AND COMMUNITY EDUCATION. GRANT AMOUNT -

032212 11-20-20

\$73,800.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY Employer identification number 47-0376624

FORM 990, PART III, LINE 4B, DESCRIPTION OF PROGRAM SERVICE: LINCOLN MEDICAL EDUCATION PARTNERSHIP: SCHOOL COMMUNITY INTERVENTION AND PREVENTION (SCIP) PROGRAM IS AN EARLY IDENTIFICATION AND REFERRAL PROGRAM DESIGNED TO BRING TOGETHER FAMILIES, SCHOOLS, AND THE COMMUNITY TO SUPPORT STUDENT MENTAL, BEHAVIORAL, AND EMOTIONAL HEALTH BY ADDRESSING BOTH INDIVIDUAL AND ENVIRONMENTAL ELEMENTS THAT INFLUENCE SCIP WORKS WITH PROFESSIONALS IN 59 PUBLIC/PRIVATE SCHOOLS TO YOUTH. INTERVENE AND OFFER SUPPORT ON BEHALF OF YOUTH DISPLAYING CONCERNING BEHAVIOR. SCIP CONSISTS OF TWO MAIN COMPONENTS: SCIP TEAMS LOCATED WITHIN THE SCHOOL BUILDING THAT PROVIDE SUPPORTS TO STUDENTS AND FAMILIES AND SCIP COORDINATORS THAT PROVIDE COORDINATION OF SERVICES, PROGRAM DESIGN AND EVALUATION, TRAINING, EDUCATION, TECHNICAL ASSISTANCE, COMMUNITY AWARENESS AND SERVE AS LIAISONS BETWEEN THE SCHOOLS, FAMILIES AND COMMUNITY AGENCIES. SCIP PARTNERS WITH BEHAVIORAL HEALTH AGENCIES TO OFFER FAMILIES PROFESSIONAL ASSESSMENTS/SCREENINGS AT NO CHARGE WHEN OUT-OF-SCHOOL INTERVENTIONS ARE NECESSARY. GRANT AMOUNT - \$20,000.

LUTHERAN FAMILY SERVICES: CHILDREN'S BEHAVIORAL HEALTH PROGRAM

THERAPISTS PROVIDE INTENSIVE, EVIDENCE-BASED TREATMENT SERVICES TO

CHILDREN AND YOUTH UNDER THE AGE OF 19. THERAPY SESSIONS ARE

COMPREHENSIVE, INVOLVING NOT ONLY THE YOUTH BUT THOSE INVOLVED IN THE

CHILD'S LIFE, SUCH AS PARENTS, CAREGIVERS, AND SIBLINGS. WHEN

NECESSARY, THERAPISTS WORK WITH NEBRASKA HEALTH AND HUMAN SERVICES, THE

COURT SYSTEM, ATTORNEYS, TEACHERS, SCHOOL SYSTEMS, AND LAW ENFORCEMENT.

THE PROGRAM BENEFITS CHILDREN IN DIRE CIRCUMSTANCES WHERE MANY ARE

\$10,000.

**Employer identification number** 

IMPACTED BY ADVERSE CHILDHOOD EXPERIENCES SUCH AS, ABUSE, NEGLECT,

SEXUAL ASSAULT, AND PARENTAL SUBSTANCE USE. THE PROGRAM'S GOAL IS TO

IMPROVE A CHILD'S EMOTIONAL AND PHYSICAL SAFETY AND WELL-BEING SO THEY

MAY LIVE AN EMOTIONALLY HEALTHY LIFE. THE PROGRAM IS OPEN TO ALL, BUT

THE MAJORITY OF CLIENTS ARE FROM POORER SOCIO-ECONOMIC BACKGROUNDS.

MANY RESIDE IN NEIGHBORHOODS THAT ARE IN EXTREME POVERTY AND LOCATED

CLOSE TO LUTHERAN FAMILY SERVICE'S HEALTH 360 CAMPUS. GRANT AMOUNT -

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

MOURNING HOPE GRIEF CENTER: PEER BASED GRIEF SUPPORT PROGRAM SERVES

BEREAVED CHILDREN AND TEENS THROUGH PEER-BASED GRIEF SUPPORT GROUPS

INCLUDING THE 10-WEEK FAMILY GRIEF SERIES, CAMP ERIN, ONE-DAY SPECIAL

EVENTS, AND 8-WEEK IN-SCHOOL GRIEF SUPPORT SESSIONS. THE DEATH OF A

LOVED ONE CAN BE AN OVERWHELMING EXPERIENCE FOR ANYONE. BUT FOR A

CHILD, WHOSE ENTIRE WORLD IS DEFINED BY THEIR CONNECTION TO A SMALL

HANDFUL OF PEOPLE, THE DEATH OF ONE OF THOSE INDIVIDUALS IS

DEVASTATING. YOUTH MAY BE GRIEVING THE DEATH OF ANYONE SIGNIFICANT IN

THEIR LIVES: A SIBLING, PARENT, GRANDPARENT, CLASSMATE OR SPECIAL

FRIEND. PARTICIPANTS MEET IN AGE-BASED GRIEF SUPPORT GROUPS FACILITATED

BY MENTAL HEALTH PROFESSIONALS AND TRAINED VOLUNTEERS. EDUCATIONAL

OPPORTUNITIES ARE ALSO PROVIDED FOR ADULTS PLAYING A SUPPORTIVE ROLE IN

THE GRIEVING CHILD'S LIFE. GRANT AMOUNT - \$18,000.

PROGRAM IS A COMPREHENSIVE SIX-MONTH RESIDENTIAL TREATMENT PROGRAM FOR

CHEMICALLY DEPENDENT OR DUALLY DIAGNOSED PREGNANT WOMEN AND WOMEN WITH

CHILDREN UNDER THE AGE OF 12. MORE THAN 90 PERCENT OF THE WOMEN IN THIS

PROGRAM SELF-REPORT DOMESTIC ABUSE OR OTHER VIOLENCE. THIS THERAPEUTIC

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER Employer identification number 47-0376624

MODEL FOCUSES ON THE COMPLEX NEEDS OF THESE WOMEN AND THEIR CHILDREN.

THE PROGRAM ADDRESSES THE ISSUES OF BASIC NEEDS, DOMESTIC VIOLENCE,

TRAUMA, SUBSTANCE ABUSE, AND PARENTING ENCOURAGING WOMEN TO BUILD TOOLS

TO SUCCESSFULLY COMPLETE TREATMENT AND DEVELOP SKILLS FOR LONG-TERM

SAFETY IN RECOVERY. CHILDREN OF CLIENTS RECEIVE COUNSELING AND OTHER

SERVICES, WHILE MOTHERS RECEIVE SAFETY, PARENTING AND LIFE SKILLS

EDUCATION. WOMEN LEAVE THIS PROGRAM ENROLLED IN SCHOOL OR EMPLOYED,

WITH INDIVIDUALIZED SAFETY AND HOUSING PLANS FOR THEMSELVES AND THEIR

FAMILIES. GRANT AMOUNT - \$34,425.

THE SALVATION ARMY - LINCOLN: DISASTER SERVICES PROGRAM PROVIDES FOOD

AND BEVERAGES AT THE SITE OF A DISASTER. IT ALSO PROVIDES SPIRITUAL

AND EMOTIONAL CARE AT THE SCENE OF A DISASTER AND FOLLOW UP CARE.

SERVICES MAY INCLUDE MATERIALS MANAGEMENT/DISTRIBUTION, WAREHOUSING,

SHELTERING, AND EMERGENCY CASE MANAGEMENT. THE PROGRAM WILL ASSIST

WITH TEMPORARY HOUSING VOUCHERS AFTER ON AN AS NEEDED BASIS. GRANT

AMOUNT - \$5,000.

VOICES OF HOPE LINCOLN, INC: CRISIS INTERVENTION AND ADVOCACY PROGRAM
PROVIDES SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE, INTIMATE PARTNER

VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT AND INCEST, AS WELL AS TO

THEIR FAMILIES. SERVICES INCLUDE A 24-HOUR CRISIS LINE, CRISIS AND
WALK-IN COUNSELING, SUPPORT GROUPS, SAFETY PLANNING, 24-HOUR ADVOCACY
TO THE HOSPITALS, FOLLOW UP ON LAW ENFORCEMENT REPORTS, ASSISTANCE WITH
PROTECTION ORDERS, REFERRALS TO SHELTER AND OTHER COMMUNITY RESOURCES,
ASSISTANCE WITH BASIC AND EMERGENCY NEEDS AND FINANCIAL ASSISTANCE.

VOICES OF HOPE IS THE PRIMARY CRISIS RESPONSE TO VICTIMS THROUGH THE
COMMUNITY DOMESTIC VIOLENCE COORDINATED RESPONSE TEAM AND SEXUAL

032212 11-20-20

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER Employer identification number 47-0376624

ASSAULT RESPONSE TEAM AND IS A MEMBER OF THE COMMUNITY AND UNIVERSITY

OF NEBRASKA'S CAMPUS THREAT ASSESSMENT TEAMS. GRANT AMOUNT - \$77,400.

FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:

ASIAN COMMUNITY AND CULTURAL CENTER: FAMILY RESOURCE PROGRAM ADVANCES

THE STABILITY OF ASIAN AND OTHER MINORITY FAMILIES IN LINCOLN WHO FACE

ECONOMIC AND CULTURAL BARRIERS TO SELF-SUFFICIENCY. THE PROGRAM HELPS

FAMILIES BUILD ENGLISH LANGUAGE PROFICIENCY; PURSUE CITIZENSHIP AND

EMPLOYMENT; ESTABLISH MEDICAL/DENTAL HOMES; PROVIDES ASSISTANCE WITH

SNAP APPLICATIONS AND RENEWALS; AND HELPS FAMILIES FILE STATE AND

FEDERAL INCOME TAX RETURNS. THE PROGRAM ALSO TRANSLATES IMPORTANT

DOCUMENTS FROM OTHER RELEVANT HEALTH AND SOCIAL SERVICE AGENCIES,

ENHANCING THEIR ABILITY TO SERVE CLIENTS WITH LIMITED ENGLISH

PROFICIENCY. THE PROGRAM WORKS WITH THE LANCASTER COUNTY HEALTH

DEPARTMENT, GOOD NEIGHBOR CENTER, CENTER FOR PEOPLE IN NEED AND COUNTY

GENERAL ASSISTANCE TO ACHIEVE THESE GOALS. GRANT AMOUNT - \$7,500.

CATHOLIC SOCIAL SERVICES OF SOUTHERN NEBRASKA: EMERGENCY SERVICES

PROGRAM PROVIDES CASH ASSISTANCE TO HOMELESS CLIENTS TO ASSIST IN

OBTAINING HOUSING AND TO THOSE AT RISK OF BECOMING HOMELESS BY

PROVIDING EMERGENCY ASSISTANCE TO PAY RENT AND UTILITIES DURING

DIFFICULT TIMES. THE PROGRAM IS DESIGNED TO MEET THE SHORT-TERM NEEDS

OF INDIVIDUALS THAT MAY HAVE EXPERIENCED AN INTERRUPTION TO THEIR

NORMAL INCOME STREAM. THE PROGRAM NETWORKS WITH OTHER LOCAL AGENCIES

THAT DISTRIBUTE EMERGENCY CASH ASSISTANCE TO PREVENT DUPLICATION OF

SERVICES AND PARTNERS WITH AGENCIES SO THAT RESOURCES MIGHT BE BETTER

UTILIZED. ALL APPLICANTS GO THROUGH A DETAILED SCREENING PROCESS AND

032212 11-20-20

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

MEET WITH THE EMERGENCY SERVICES COORDINATOR WHO WILL GUIDE THEM

THROUGH BUDGET COUNSELING AND PROVIDE REFERRALS IN ADDITION TO WHATEVER

CASH ASSISTANCE MIGHT BE AVAILABLE. GRANT AMOUNT - \$32,000.

CATHOLIC SOCIAL SERVICES OF SOUTHERN NEBRASKA: ST. FRANCIS FOOD PANTRY

PROGRAM IS A FOOD CHOICE MARKET THAT PROVIDES FAMILIES THE OPPORTUNITY

TO SELECT PERISHABLE AND NONPERISHABLE ITEMS ONCE PER MONTH. DAIRY

PRODUCTS, FRESH FRUITS, AND VEGETABLES ARE PROVIDED, AND NUTRITIONAL

INFORMATION AND RECIPES ARE FEATURED WEEKLY TO ENCOURAGE HEALTHY EATING

HABITS AND BALANCED MEALS. IN PARTNERSHIP WITH THE FOOD BANK OF

LINCOLN, THE PROGRAM PROVIDES MONTHLY FOOD MARKETS TO THE FAMILIES OF

BLESSED SACRAMENT, ST. PATRICK'S, AND ST. TERESA'S SCHOOLS. THE PROGRAM

IS STRONGLY SUPPORTED AND STAFFED BY A COMMUNITY OF VOLUNTEERS. GRANT

AMOUNT - \$10,000.

CEDARS YOUTH SERVICES: CEDARS EMERGENCY SHELTER PROGRAM PROVIDES

24-HOUR EMERGENCY SHELTER CARE FOR UP TO 16 YOUTH EACH DAY AGES 12-18.

INCORPORATING TRAUMA INFORMED CARE, POSITIVE YOUTH DEVELOPMENT, AND

WRAP-AROUND PRINCIPLES, CEDARS PROVIDES A SAFE, NURTURING, AND STABLE

SHORT TERM PLACEMENT FOR YOUTH. REFERRALS ARE ACCEPTED FOR RUNAWAY,

HOMELESS, OR UNACCOMPANIED YOUTH, AS WELL AS YOUTH WHO HAVE EXPERIENCED

A PLACEMENT DISRUPTION OR NEED RESPITE CARE. THE PROGRAM IS A DETENTION

ALTERNATIVE FOR YOUTH WHO DO NOT POSE A SAFETY RISK TO OTHERS PROVIDING

A SAFE PLACE FOR YOUTH TO RESIDE DURING OUTPATIENT PSYCHOLOGICAL OR

SUBSTANCE ABUSE EVALUATIONS UNTIL SUITABLE PLACEMENT PLANS ARE

DEVELOPED. PROGRAMMING INCLUDES STRUCTURED THERAPEUTIC GROUPS,

RECREATION ACTIVITIES, ACADEMIC SUPPORT INCLUDING ATTENDANCE AT A

YOUTH'S HOME SCHOOL WHEN POSSIBLE, AND HELPING STRENGTHEN RELATIONSHIPS

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 BETWEEN YOUTH AND THEIR FAMILIES. YOUTH ARE ALSO PROVIDED CASE MANAGEMENT TAILORED TO THEIR INDIVIDUAL NEEDS. GRANT AMOUNT - \$21,000. CEDARS YOUTH SERVICES: CEDARS STREET OUTREACH AND YOUTH OPPORTUNITY CENTER PROGRAM CONDUCTS OUTREACH AND ENGAGES HOMELESS AND RUNAWAY YOUTH TO SEEK FORMAL ASSISTANCE IN CREATING SAFER, MORE STABLE LIVING SITUATIONS AND TO ADDRESS THE ISSUE(S) THAT LED TO THEIR HOMELESSNESS. OUTREACH SERVICES INCLUDE SURVIVAL AID (FOOD, CLOTHING AND BLANKETS, HYGIENE KITS, TRANSPORTATION VOUCHERS), ASSESSMENT, CRISIS INTERVENTION AND SAFETY PLANNING, EDUCATION, INFORMATION AND REFERRAL, COUNSELING AND ONGOING SUPPORT. THE PROGRAM USES A POSITIVE YOUTH DEVELOPMENT, TRAUMA-INFORMED APPROACH PROVIDING YOUTH WITH EFFECTIVE AND HIGH QUALITY SERVICES. AS A RESULT, YOUTH ARE ABLE TO IMPROVE RELATIONSHIPS AND MAKE BETTER, SAFER LIFE CHOICES. PROGRAM STAFF FREQUENT PLACES WHERE VULNERABLE YOUTH TYPICALLY GATHER AND CONDUCT OUTREACH TO RAISE COMMUNITY AWARENESS. YOUTH CAN ALSO ACCESS RESOURCES AT THE YOUTH OPPORTUNITY CENTER, A DROP-IN CENTER LOCATED IN DOWNTOWN LINCOLN. GRANT AMOUNT - \$8,500. CENTER FOR PEOPLE IN NEED: NEIGHBORHOOD FOOD DISTRIBUTION PROGRAM PROVIDES FOOD FOR LOW-INCOME INDIVIDUALS IN LINCOLN AND LANCASTER COUNTY. WEEKLY DISTRIBUTIONS ARE LOCATED AT FIVE SITES, INCLUDING

CENTER FOR PEOPLE IN NEED (CFPIN), OAK LAKE CHURCH, THE BAY, F STREET RECREATION CENTER AND FOURTH PRESBYTERIAN CHURCH. PARTICIPANTS CAN GET FOOD TWO TIMES A WEEK AND OBTAIN USDA COMMODITIES. AT FOOD DISTRIBUTION EVENTS, THE PROGRAM PROVIDES INFORMATION ABOUT COMMUNITY RESOURCES, PROGRAMS AT CFPIN, PERSONAL HEALTH CARE ITEMS, HOST FLU SHOTS AND MORE.

CLIENT ASSISTANCE SPECIALIST IS AVAILABLE FOR FOOD PARTICIPANTS AT

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 THE CENTER TO PROVIDE HELP WITH SNAP AND HOUSING ASSISTANCE APPLICATIONS. GRANT AMOUNT - \$27,000. CENTER FOR PEOPLE IN NEED: PEOPLE OBTAINING PROSPERITY PROGRAM HELPS LOW-INCOME STUDENTS SUCCESSFULLY CONTINUE THEIR EDUCATION UP TO AN ASSOCIATE'S DEGREE AND COLLABORATES WITH SOUTHEAST COMMUNITY COLLEGE. THE PROGRAM ELIMINATES BARRIERS TO SUCCESS BY INCLUDING CHILDCARE AND TRANSPORTATION SUBSIDIES, WRAP AROUND CASE MANAGEMENT TO HELP STUDENTS THROUGH DIFFICULTIES, AND ACCESS TO TUTORS. GRANT AMOUNT - \$8,788. COMMUNITY ACTION PARTNERSHIP OF LANCASTER AND SAUNDERS COUNTIES: BASIC AND EMERGENCY NEEDS SERVICES PROGRAM PROVIDES ASSISTANCE AND SUPPORT TO NEAR-HOMELESS AND HOMELESS INDIVIDUALS AND FAMILIES THROUGH FOUR PROGRAMS. 1) EMERGENCY SERVICES PROVIDES RENT AND UTILITY ASSISTANCE TO HOUSEHOLDS WITH AN EVICTION OR DISCONNECT NOTICE, AND DEPOSIT ASSISTANCE TO HOUSEHOLDS TRANSITIONING OUT OF HOMELESSNESS. 2) REPRESENTATIVE PAYEE OVERSEES THE PROPER SPENDING OF BENEFIT PAYMENTS FOR SOCIAL SECURITY RECIPIENTS WHO HAVE BEEN DEEMED UNFIT BY THE SOCIAL SECURITY ADMINISTRATION TO MANAGE RESOURCES THEMSELVES. 3) TENANT SUPPORT SERVICES PROVIDES EDUCATION AND MEDIATION TO TENANTS AND LANDLORDS WITH A GOAL OF EVICTION PREVENTION. 4) SUPPORTIVE HOUSING CONNECTS HOMELESS INDIVIDUALS TO PERMANENT HOUSING AND PROVIDES CASE MANAGEMENT. THE ULTIMATE GOAL OF ALL PROGRAMS IS TO PREVENT AND END HOMELESSNESS. GRANT AMOUNT - \$65,000. COMMUNITY ACTION PARTNERSHIP OF LANCASTER AND SAUNDERS COUNTIES: FINANCIAL WELL-BEING PROGRAM UMBRELLA CONTAINS THREE DISTINCT PROGRAMS

FINANCIAL RESOURCES TO BUILD STRONG FINANCIAL FUTURES. 032212 11-20-20

1) FREE TO Schedule O (Form 990 or 990-EZ) 2020

PROVIDING SERVICES THAT SUPPORT THE EFFORTS OF INDIVIDUALS WITH LIMITED

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 SAVE IS A PROGRAM FOR ADULTS THAT PROVIDES FINANCIAL EDUCATION AND SAVINGS MATCH FOR THE PURCHASE OF A HOME, SMALL BUSINESS START-UP/EXPANSION, POST-SECONDARY EDUCATION OR A VEHICLE. 2) OPPORTUNITY PASSPORT PROVIDES YOUTH AGE 14-26 WITH FINANCIAL EDUCATION AND SAVINGS MATCH FOR HOUSING, EDUCATION, TRANSPORTATION, DEBT REDUCTION, CREDIT IMPROVEMENT AND OTHER PURCHASES DESIGNED TO IMPROVE FINANCIAL WELL-BEING. 3) FINANCIAL COACHING COMBINES CLASSROOM INSTRUCTION AND INDIVIDUALIZED CASE MANAGEMENT TO SUPPORT INDIVIDUALS TO REPAIR CREDIT, REDUCE DEBT, SAVE MONEY AND OTHERWISE IMPROVE FINANCIAL WELL-BEING. ALL PROGRAMS UTILIZE MOTIVATIONAL INTERVIEWING IN THE CASE MANAGEMENT PROCESS. GRANT AMOUNT - \$20,000. COMMUNITY ACTION PARTNERSHIP OF LANCASTER AND SAUNDERS COUNTIES: THE

GATHERING PLACE PROGRAM IS A SOUP KITCHEN THAT PROVIDES FREE EVENING MEALS SEVEN DAYS A WEEK TO THOSE STRUGGLING WITH HUNGER. THE GATHERING PLACE IS LOCATED IN ONE OF THE HIGHEST POVERTY NEIGHBORHOODS IN LINCOLN, CHARACTERIZED BY A POVERTY RATE OF 41.5% (ACS, 5-YEAR ESTIMATES). THERE ARE NO ELIGIBILITY CRITERIA TO GET A MEAL NOR ANY QUESTIONS ASKED-ANYONE EXPERIENCING HUNGER IS WELCOME. THE GATHERING PLACE FOCUSES ON SERVING NOT ONLY FOOD TO FILL THE BELLY, BUT NUTRITIONALLY-BALANCED MEALS TO FILL THE BODY, OFTEN INCLUDING LOCALLY-SOURCED FRESH FRUITS AND VEGETABLES. GRANT AMOUNT - \$12,000.

COMMUNITY CROPS: COMMUNITY GARDENS PROGRAM PROVIDES GARDENING SPACE FOR RESIDENTS TO GROW FRESH, HEALTHY FOOD FOR THEMSELVES AND THEIR FAMILIES. THERE ARE 11 GARDEN SITES, WHICH GIVE 835 GARDENERS A CHANCE TO GROW 58,000 POUNDS OF FOOD. WORK CONTINUES WITHIN THE CITY,

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

COUNTY

COUNTY

COUNTY

COUNTY

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COUNTY

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COUNTY

CHURCHES, AND OTHER INSTITUTIONS TO DEVELOP AREAS FOR NEW GARDENS,

WHICH WILL ALLOW MORE PEOPLE IN NEED TO BE REACHED. IN 2019, A NEW

GARDEN WAS OPENED FOR KAREN IMMIGRANTS AND A NEW COMMUNITY GARDEN AT

14TH AND D STREETS TO SERVE THE LOW-INCOME EVERETT NEIGHBORHOOD.

CONTINUED EFFORTS ARE BEING MADE TO LOOK FOR NEW AND INNOVATIVE WAYS TO

GET MORE PEOPLE GARDENING, WHILE ALSO MAKING IT EASIER FOR THEM TO BE

SUCCESSFUL IN THAT ENDEAVOR. GRANT AMOUNT - \$10,000.

FORM 990, PART III, LINE 4C, DESCRIPTION OF PROGRAM SERVICE:

EL CENTRO DE LAS AMERICAS: CRISIS ASSISTANCE & PREVENTION PROGRAM

COMBINES THE ELEMENTS OF EMPLOYMENT ASSISTANCE, RESOURCE NAVIGATION,

AND CASE MANAGEMENT TO HELP CLIENTS OBTAIN ESSENTIAL RESOURCES FOR

THEMSELVES AND THEIR FAMILIES, OBTAIN EMPLOYMENT, AND AVOID

HOMELESSNESS. CLIENTS RECEIVE ASSISTANCE COMPLETING EMPLOYMENT

APPLICATIONS, CREATING RESUMES, OBTAINING PANTRY, CLOTHING,

UTILITY/RENT, AND OTHER ESSENTIAL NEEDS, AND APPLYING FOR TEMPORARY

ASSISTANCE PROGRAMS, SUCH AS MEDICAID AND SNAP. CLIENTS RECEIVE CASE

MANAGEMENT SERVICES TO ASSIST WITH ESSENTIAL NEEDS AND FOLLOW-UP

COMMUNICATION FOR SUPPORT AS THEY CONTINUE TO WORK TOWARDS

SELF-SUSTAINABILITY. THE GOAL IS TO HELP REMOVE BARRIERS PREVENTING

HOUSING AND FINANCIAL STABILITY. GRANT AMOUNT - \$10,000.

FOOD BANK OF LINCOLN: PRODUCE FOR MOBILE FOOD PANTRIES PROGRAM PROVIDES

MOBILE FOOD DISTRIBUTIONS IN LINCOLN'S LOW-INCOME NEIGHBORHOODS IN

PARTNERSHIP WITH THE CENTER FOR PEOPLE IN NEED (CFPIN), JACOB'S

WELL/FIRST PRESBYTERIAN CHURCH, THE BAY, OAK LAKE CHURCH, FOURTH

PRESBYTERIAN CHURCH, FIRST PLYMOUTH CHURCH AND THE VETERANS

ADMINISTRATION. GRANT AMOUNT - \$38,945.

FRESH START: TRANSITIONAL SHELTER SERVICES PROGRAM OFFERS A RESIDENTIAL

SHELTER PROGRAM FOR HOMELESS WOMEN. WOMEN ARE ENCOURAGED TO PARTICIPATE

FOR THREE-SIX MONTHS AND MAY STAY FOR UP TO ONE YEAR. THERE IS AN

EMPHASIS ON GOAL PLANNING, DEVELOPING A HEALTHY SUPPORT SYSTEM, AND

PROMOTING RESIDENTS' STRENGTHS. RESIDENTS ARE PARTNERED WITH A CASE

MANAGER TO HELP THEM REACH THEIR GOALS AND MOVE ON SUCCESSFULLY. FRESH

START HELPS WOMEN ADDRESS THEIR BARRIERS BY CONNECTING THEM TO

ACTIVITIES SUCH AS COUNSELING, TREATMENT, AND EDUCATIONAL

OPPORTUNITIES. CASE MANAGEMENT ALSO INCREASES THEIR KNOWLEDGE OF

SERVICES IN THE COMMUNITY, WHICH THEY USE BEYOND THEIR STAY AT FRESH

START. THE PROGRAM IS AN IMPORTANT PART OF OUR COMMUNITY'S CONTINUUM OF

CARE FOR HOUSING AND HOMELESS RELATED NEEDS. GRANT AMOUNT - \$35,000.

GOOD NEIGHBOR COMMUNITY CENTER: BASIC AND EMERGENCY NEEDS PROGRAM

PROVIDES CLOTHING, HOUSEHOLD ITEMS, PERSONAL CARE HYGIENE PRODUCTS,

HOLIDAY GIFTS, RENT ASSISTANCE, UTILITY ASSISTANCE, AND DIAPERS TO

THOSE IN NEED. PARTICIPANTS ARE INDIVIDUALS FACING NATURAL DISASTER,

HOMELESSNESS, DOMESTIC VIOLENCE, RECOVERING ADDICTS, LOW INCOME OR

INMATES RELEASED FROM INCARCERATION. ASSISTANCE IS ALSO PROVIDED TO

REFUGEES AND IMMIGRANTS FROM THE MIDDLE EAST AND NORTH AFRICA. GOOD

NEIGHBOR COMMUNITY CENTER COLLABORATES WITH RESETTLEMENT AGENCIES

BRINGING NEW REFUGEES INTO LINCOLN AND LANCASTER COUNTY TO HELP THEM

HAVE A SMOOTH TRANSITION TO THEIR NEW HOMES. HOME VISITS HELP DETERMINE

WHAT ASSISTANCE THEY WILL NEED, AND NEW FAMILIES ARE GIVEN A PRIORITY

TO SHOP FOR CLOTHES, FOOD, AND ENROLL IN CLASSES. INTERPRETATION

SERVICES ARE PROVIDED TO ASSIST WITH APPOINTMENTS AND TRANSLATION OF

NECESSARY DOCUMENTS. THE PROGRAM ADVOCATES FOR WOMEN TO ENABLE THEM TO

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY Employer identification number 47-0376624

BECOME INDEPENDENT. GRANT AMOUNT - \$17,500.

GOOD NEIGHBOR COMMUNITY CENTER: FOOD DISTRIBUTION PROGRAM ALLOWS

FAMILIES TO SELECT NON-PERISHABLE FOOD ITEMS OF THEIR CHOICE EVERY 30

DAYS. THE AMOUNT OF FOOD GIVEN IS DETERMINED BY FAMILY SIZE AND

AVAILABILITY. EACH CLIENT MAY ALSO SHOP FOR PERISHABLE FOOD ITEMS TWICE

A WEEK ON MONDAYS AND WEDNESDAYS. THE PROGRAM PROVIDES INFORMATION

ABOUT ALL AVAILABLE FOODNET SITES IN LINCOLN AND COLLABORATES WITH

ALLON CHAPEL AS A FOODNET SITE EVERY SUNDAY TO FEED THOSE WHO CANNOT

MAKE IT TO THE CENTER DURING THE WEEK DUE TO WORKING SCHEDULES. GRANT

AMOUNT - \$25,000.

THE HUB-CENTRAL ACCESS POINT FOR YOUNG ADULTS: CENTRAL ACCESS

NAVIGATION PROGRAM PROVIDES A CENTRAL ACCESS NAVIGATOR FOR CASE

MANAGEMENT AND SUPPORT TO HELP YOUNG PEOPLE FIND NEEDED SERVICES. WHILE

OUR COMMUNITY IS FORTUNATE TO HAVE MANY SERVICES AVAILABLE, NAVIGATING

THE SYSTEM OF AVAILABLE RESOURCES CAN BE CONFUSING. YOUNG PEOPLE WHO

ARE DISCONNECTED (PREGNANT/PARENTING, HOMELESS, INVOLVED IN OR AGED OUT

OF THE CHILD WELFARE OR JUVENILE JUSTICE SYSTEMS) UTILIZE THIS PROGRAM

TO FIND SERVICES TO ADDRESS THEIR IMMEDIATE NEEDS AND WORK TOWARD

FUTURE SUCCESSES. THE PROGRAM PROVIDES FINANCIAL ASSISTANCE FOR HOUSING

AND UTILITIES, FINANCIAL COACHING/BUDGETING ASSISTANCE, AND COMMUNITY

CONNECTIONS TO ENSURE YOUNG ADULTS' NEEDS ARE MET. GRANT AMOUNT 
\$15,000.

LEAGUE OF HUMAN DIGNITY, INC: BARRIER REMOVAL PROGRAM REMOVES OR

MODIFIES BARRIERS FOR LOW-TO-MODERATE INCOME RENTERS AND HOMEOWNERS WHO

EXPERIENCE A MOBILITY LIMITATION OR HAVE SOMEONE IN THEIR FAMILY WITH

MOBILITY LIMITATIONS. ELIGIBLE MODIFICATIONS INCLUDE INSTALLATION OF

032212 11-20-20

**Employer identification number** 

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER

DISABILITIES. GRANT AMOUNT - \$5,000.

MATT TALBOT KITCHEN AND OUTREACH: HUNGER RELIEF PROGRAM PROVIDES DAILY
HUNGER RELIEF TO INDIVIDUALS AND FAMILIES IN NEED. FEEDING THE HUNGRY
IS THE FOUNDATION OF MATT TALBOT'S MISSION. EVERYONE IS WELCOME TO WALK
THROUGH THE PROGRAM'S OPEN DOORS TO RECEIVE A HOT MEAL TWO TIMES A DAY,
EVERY DAY OF THE YEAR. LUNCH IS SERVED FROM 11:30 AM - 12:30 PM AND
DINNER IS SERVED FROM 5:30 PM - 6:30 PM. FOOD PANTRIES ARE ALSO
AVAILABLE FOR THOSE WHO DO NOT HAVE ENOUGH FOOD AT HOME. WHILE ON SITE,
INDIVIDUALS LEARN ABOUT OTHER PREVENTION SERVICES AVAILABLE. THE
PROGRAM IS A SAFE AND WELCOMING PLACE WHERE THOSE WHO STRUGGLE CAN FIND
RESPITE, PEACE AND EVENTUALLY HOPE. GRANT AMOUNT - \$11,000.

MATT TALBOT KITCHEN AND OUTREACH: TRANSITIONAL HOUSING PROGRAM HELPS

INDIVIDUALS MOVE FROM HOMELESSNESS AND ADDICTION TO A STABLE LIVING

ENVIRONMENT. THE PROGRAM HAS TWO TRANSITIONS HOUSES - ONE FOR MEN AND

ONE FOR WOMEN. INTENSIVE CASE MANAGEMENT AND SUBSTANCE ABUSE COUNSELING

FOCUS ON RELAPSE PREVENTION WORK IN TANDEM TO ASSIST RESIDENTS IN

MAINTAINING SOBRIETY, ACCESSING SERVICES, SECURING EMPLOYMENT, AND

BECOMING PRODUCTIVE MEMBERS OF THE COMMUNITY. GRANT AMOUNT - \$17,000.

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 PEOPLE'S CITY MISSION: FAMILY AND WOMEN'S SHELTER PROGRAM PROVIDES EMERGENCY SHELTER BEDS AND DAY SHELTER, THREE NUTRITIOUS MEALS DAILY, CHILDREN'S PROGRAMS, INDIVIDUAL SUPPORT AND ADVOCACY, LIFE SKILLS WORKSHOPS, AND OTHER RELATED SERVICES (SHOWERS, LAUNDRY, MAIL, PHONE, ETC.) TO ENABLE HOMELESS WOMEN AND FAMILIES TO MOVE INTO PERMANENT HOUSING WITH THE SKILLS AND RESOURCES NECESSARY TO MAINTAIN HOUSING. GRANT AMOUNT - \$8,543. THE SALVATION ARMY - LINCOLN: FOOD SECURITY PROGRAM PROVIDES A VARIETY OF PROGRAMS SUCH AS, THE FOOD PANTRY, WINTER NIGHT WATCH, KIDS CAFE AND SUMMER FEEDING PROGRAM TO ENSURE THOSE WHO NEED FOOD OR A MEAL IN THE LINCOLN COMMUNITY ARE SERVED. THE FOOD PANTRY IS A CONSUMER CHOICE FOOD PANTRY BASED ON THE FOOD PYRAMID. CLIENTS ARE ELIGIBLE TO RECEIVE FOOD FROM THE PANTRY ON A MONTHLY BASIS WITH A POINTS-BASED SYSTEM BASED ON THE SIZE OF THE CLIENT'S FAMILY. THE PROGRAM PROVIDES A PERISHABLE FOOD DISTRIBUTION EVERY TUESDAY AND FRIDAY MORNING. DURING THE WINTER, A SEASONAL HOT MEAL IS PROVIDED EVERY SATURDAY AND SUNDAY NIGHT FROM OCTOBER 15 - APRIL 15 TO HOMELESS AND NEAR HOMELESS IN THE SOUTH CAPITAL NEIGHBORHOOD AREA DURING THE WINTER NIGHT WATCH. A HOT MEAL IS PROVIDED TO CHILDREN MONDAY-FRIDAY YEAR-ROUND THROUGH THE KIDS CAFE DURING SCHOOL DAYS AS A SUPPER MEAL AND DURING NON-SCHOOL DAYS AS A LUNCH MEAL. DURING THE SUMMER CHILDREN ARE GIVEN A NUTRITIOUS BREAKFAST AND LUNCH AT A DAY CAMP - BREAKFAST IS PREPARED ONSITE AND LUNCH IS PROVIDED BY KINDERBITES. GRANT AMOUNT - \$20,055. THE SALVATION ARMY - LINCOLN: UTILITY ASSISTANCE PROGRAM PROVIDES EMERGENCY UTILITY ASSISTANCE TO THOSE WHO ARE AT RISK FOR OR HAVE HAD THEIR UTILITIES SHUT OFF DUE TO NON-PAYMENT. THE PROGRAM PROVIDES

032212 11-20-20

ENERGY EDUCATION TO CLIENTS, PARTICULARLY THOSE WHO APPLY FOR

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER
COUNTY

ASSISTANCE MORE THAN ONCE, TO PREVENT BEING IN PERPETUAL CRISIS. GRANT

AMOUNT - \$25,000.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: COMMUNITY RESPONSE: THIS INITIATIVE IS A COORDINATED COMMUNITY WIDE EFFORT TO PREVENT CHILD ABUSE AND NEGLECT IN LINCOLN AND LANCASTER COUNTY AND REDUCE ENTRY INTO HIGHER LEVELS OF CARE WITHIN THE CHILD WELFARE AND JUVENILE JUSTICE SYSTEM. UNITED WAY SERVES AS THE FISCAL BACKBONE OF THIS EFFORT BY COORDINATING WITH SEVEN (7) PROVIDERS WHO DELIVER SERVICES TO CHILDREN, YOUTH AND FAMILIES. UNITED WAY ALSO PROVIDES A PART-TIME COMMUNITY RESPONSE MANAGER TO COORDINATE EFFORTS ACROSS PARTNER AGENCIES, ENSURE REPORTING ACCURACY, AND PROVIDE OVERSIGHT FOR THE EVALUATION AND REPORTING PROCESS. IN ADDITION, UNITED WAY SERVES IN AN ADMINISTRATIVE CAPACITY FOR THIS PROJECT THROUGH CONTRACT DEVELOPMENT/MANAGEMENT AND FINANCIAL ACCOUNTING. THIS PROGRAM WAS SUPPORTED THROUGH GRANT DOLLARS AWARDED TO UNITED WAY FROM NEBRASKA CHILDREN AND FAMILIES FOUNDATION (NCFF) IN THE AMOUNT OF \$714,126 DURING THE 2020-2021 FISCAL PERIOD. NCFF ALSO FUNDED A COVID-19 HOUSING STABILITY GRANT IN THE AMOUNT OF \$20,000 FOR TEMPORARY SAFE HOUSING FOR THOSE FACING HOMELESSNESS DURING THE PANDEMIC VIA THE COMMUNITY RESPONSE NETWORK OF PARTNERS. UNITED WAY DONORS AND COMMUNITY FUNDERS DIRECTED AN ADDITIONAL \$21,500 TO THIS INITIATIVE FOR FLEXIBLE FUNDING TO PROMOTE THE SAFETY AND WELL-BEING OF CHILDREN AND FAMILIES BY ASSISTING AT A TIME OF CRISIS IN MEETING BASIC NEEDS SUCH AS FOOD IN ADDITION, FUNDING FROM THE DHHS COMMUNITY CARES ACT AND SHELTER. PROVIDED \$90,000 IN FLEXIBLE FUNDING FOR THIS INITIATIVE.

EXPENSES \$ 845,626. INCLUDING GRANTS OF \$ 845,626. REVENUE \$ 0.

Employer identification number 47-0376624

ENGAGE. EMPOWER.GRADUATE (EEG): THE WOMEN UNITED AND EMERGING LEADERS

UNITED AFFINITY GROUPS COMBINED TO SUPPORT BREAKTHROUGH OPPORTUNITIES

IN THE MCPHEE AND CAMPBELL ELEMENTARY SCHOOL COMMUNITIES. THE RESULTING

INITIATIVE SUPPORTS MULTIPLE PROGRAMS THAT EMPOWER FAMILIES AND

STUDENTS TO STRIVE FOR ACADEMIC ACHIEVEMENT AND ON-TIME GRADUATION THUS

SETTING THEM UP FOR LONG-TERM SUCCESS. \$271,799 WAS RAISED AND

ALLOCATED TO THE FOLLOWING EEG SUPPORTED PROGRAMS: JUMP START TO

KINDERGARTEN, FAMILY LITERACY, MENTAL HEALTH SERVICES, SUMMER

ENRICHMENT, AND COMMUNITY LEARNING CENTERS.

EXPENSES \$ 271,799. INCLUDING GRANTS OF \$ 271,799. REVENUE \$ 0.

WOMEN IN PHILANTHROPY (WIP) INITIATIVE: UNITED WAY'S ANNUAL WIP
HELPING HANDS AUCTION RAISED FUNDS TO PROVIDE DIAPERS AND CLOTHING TO
LOW INCOME FAMILIES. THE WIP INITIATIVE AWARDED \$37,074 TO TEN UNITED
WAY PARTNER AGENCIES TO PURCHASE DIAPERS AND CLOTHING FOR THE
LOW-INCOME CHILDREN AND FAMILIES THEY SERVE.

EXPENSES \$ 37,034. INCLUDING GRANTS OF \$ 37,034. REVENUE \$ 0.

LINCOLN COMMUNITY LEARNING CENTERS (CLC): \$35,000 HAS BEEN ALLOCATED TO
LINCOLN COMMUNITY LEARNING CENTERS. THE CLC INITIATIVE IS FOCUSED ON
ACHIEVING THREE MAJOR OUTCOMES: IMPROVED STUDENT LEARNING AND
DEVELOPMENT; STRONG AND SUPPORTIVE FAMILIES; AND ENGAGED NEIGHBORHOODS.

VIRTUAL BOOK DRIVE: AN ONLINE CAMPAIGN SPONSORED BY THE UNITED WAY

WOMEN IN PHILANTHROPY AND EMERGING LEADERS UNITED GROUPS RAISED \$17,376

FOR THE PURCHASE OF BOOKS AND SCHOOL SUPPLIES FOR CHILDREN IN LANCASTER

INCLUDING GRANTS OF \$ 35,000. REVENUE \$ 0.

EXPENSES \$ 35,000.

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 COUNTY. A TOTAL OF 3,248 BOOKS WERE DISTRIBUTED DURING THE 2020-2021 FISCAL YEAR. EXPENSES \$ 17,376. INCLUDING GRANTS OF \$ 17,376. REVENUE \$ 0. EMERGING LEADERS UNITED INITIATIVE: UNITED WAY'S EMERGING LEADERS UNITED AFFINITY GROUP RAISED AND ALLOCATED \$11,065 TO SUPPORT CREATIVE LEARNING SPACES IN LINCOLN AND LANCASTER COUNTY PUBLIC SCHOOLS. THIS FUNDING SUPPORTS THE DEVELOPMENT OF A CREATIVE SPACE AT PERSHING ELEMENTARY, A TITLE I SCHOOL IN LINCOLN, NE. THE SPACE PROVIDES KINDERGARTEN THROUGH FIFTH GRADE CHILDREN WITH A CALMING AND SAFE SPACE TO PRACTICE SOCIAL-EMOTIONAL AND COPING SKILLS AND STRATEGIES SUCH AS LISTENING, FOLLOWING DIRECTIONS, AND SELF-REGULATION. THE GOAL IS TO DECREASE SCHOOL WIDE OFFICE CALLS FOR NEGATIVE BEHAVIOR THUS INCREASING STUDENT INSTRUCTIONAL TIME IN THE CLASSROOM. EXPENSES \$ 11,065. INCLUDING GRANTS OF \$ 11,065. REVENUE \$ 0. DATA-TRACKING PROJECT: THIS PROJECT RECEIVED A \$4,500 ALLOCATION IN A JOINTLY FUNDED EFFORT WITH THE JOINT BUDGET COMMITTEE TO HELP TRACK FOOD PANTRY AND FOOD DISTRIBUTION EFFORTS IN THE COMMUNITY. THE GOAL IS TO DETERMINE AN UNDUPLICATED COUNT OF CLIENTS SERVED TO BETTER INCREASE THEIR FOOD STABILITY. EXPENSES \$ 4,500. INCLUDING GRANTS OF \$ 4,500. REVENUE \$ 0. LINCOLN PARTNERSHIP FOR ECONOMIC DEVELOPMENT: UNITED WAY PROVIDES SUPPORT FOR THE LINCOLN PARTNERSHIP FOR ECONOMIC DEVELOPMENT'S WORKFORCE DEVELOPMENT ACTIVITY TO CREATE PATHWAYS FOR LINCOLN RESIDENTS

TO OBTAIN LIVING-WAGE EMPLOYMENT IN OUR COMMUNITY. \$25,000 HAS BEEN

ALLOCATED FOR THIS PROJECT.

Schedule O (Form 990 or 990-EZ) 2020 Page 2 Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 EXPENSES \$ 25,000. INCLUDING GRANTS OF \$ 25,000. REVENUE \$ 0. STABLE STRONG SUCCESSFUL: THIS INITIATIVE WAS LAUNCHED IN SEPTEMBER PROVIDES SUPPORTS TO FAMILIES AND STUDENTS TO REDUCE CHRONIC ABSENTEEISM IN OUR COMMUNITY. THIS PROGRAM WILL HELP EXPAND THE COMMUNITY RESPONSE INITIATIVE THROUGHOUT LINCOLN AND LANCASTER COUNTY. \$15,239 HAS BEEN ALLOCATED FOR THIS PROJECT. EXPENSES \$ 15,239. INCLUDING GRANTS OF \$ 15,239. REVENUE \$ 0. EARLY CARE QUALITY INITIATIVE: \$10,700 WAS ALLOCATED TO ADDRESS THE LACK OF EARLY CHILDCARE CAPACITY THAT MEETS THE NEBRASKA DEPARTMENT OF EDUCATION "STEP UP TO QUALITY" STANDARDS. THESE STANDARDS AIM TO ACHIEVE OPTIMAL OUTCOMES FOR DEVELOPMENTAL MILESTONES OF CHILDREN AND REQUIRE AN INVESTMENT OF TIME AND TRAINING. THIS LACK OF EARLY CARE CAPACITY IS ESPECIALLY SEVERE IN LOW-INCOME NEIGHBORHOODS, AND CHILDCARE PROVIDERS IN THESE NEIGHBORHOODS ARE CHALLENGED TO FIND THE TIME/RESOURCES TO TAKE STEPS IN THIS DIRECTION. THE PROGRAM WILL PROVIDE FUNDING TO NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN (NE AEYC) TO PROVIDE HIGH QUALITY ENHANCEMENT SERVICES TO IMPROVE THE SKILLS, KNOWLEDGE, AND ABILITIES OF THE CHILD CARE CENTER DIRECTOR AT THE NORTHEAST FAMILY CENTER. PROVIDERS WILL THEN BE ABLE TO ACCESS GREATER RESOURCES FROM THE 'STEP UP TO QUALITY' INITIATIVE IMPROVING THE QUALITY OF INSTRUCTION; INCREASING REIMBURSEMENT DOLLARS FOR TITLE XX PARTICIPANTS; AND INCREASING SCHOLARSHIP ELIGIBILITY FOR CHILDREN. ULTIMATELY, THE PROGRAM WILL HELP INCREASE HIGH QUALITY EARLY CARE CAPACITY. NEBRASKA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN WORKED WITH WILLARD COMMUNITY CENTER FOR IMPLEMENTATION OF THIS INITIATIVE. BASELINE DATA HAS BEEN COLLECTED, AND WILLARD

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER **Employer identification number** COUNTY 47-0376624 COMMUNITY CENTER HAS ADOPTED AND RECENTLY IMPLEMENTED USE OF THE "CREATIVE CURRICULUM" IN ITS CLASSROOMS. INCLUDING GRANTS OF \$ 10,700. REVENUE \$ 0. EXPENSES \$ 10,700. SUMMER FOOD PROGRAM: \$10,000 WAS ALLOCATED FOR THIS PROGRAM OFFERED BY THE FOOD BANK OF LINCOLN. 84,512 MEALS WERE SERVED TO STUDENTS DURING THE SUMMER OF 2021 EXPENSES \$ 10,000. INCLUDING GRANTS OF \$ 10,000. REVENUE \$ 0. COMBINED HEALTH AGENCIES DRIVE (CHAD): UNITED WAY PARTNERS WITH CHAD TO RAISE FUNDS FOR THE ANNUAL CAMPAIGN IN LINCOLN. CHAD PROGRAMS AND ORGANIZATIONS PROVIDE MEDICAL RESEARCH, PATIENT AND FAMILY SERVICES, AND COMMUNITY EDUCATION AND ADVOCACY TO ASSIST INDIVIDUALS AND FAMILIES FACING CHRONIC ILLNESS. THE ALLOCATION FOR CHAD FROM THE 2020 CAMPAIGN WAS \$509,558. EXPENSES \$ 509,558. INCLUDING GRANTS OF \$ 509,558. REVENUE \$ 0. DESIGNATIONS: UNITED WAY PROCESSED \$1,953,463 IN DONOR-DESIGNATED DONOR-DESIGNATED FUNDS ARE CONTRIBUTIONS SPECIFICALLY DIRECTED BY THE DONOR TO OTHER NONPROFIT ORGANIZATIONS. UNITED WAY OF LINCOLN AND LANCASTER COUNTY ACTS IN A FISCAL AGENT CAPACITY TO COLLECT, PROCESS, AND DISBURSE THE FUNDS. ORGANIZATIONS MUST HAVE TAX-EXEMPT STATUS AND BE COMPLIANT WITH THE PATRIOT ACT. EXPENSES \$ 1,953,463. INCL GRANTS OF \$ 1,632,625. REVENUE \$ 141,813. PROGRAM GENERAL OPERATING COSTS: EXPENSES OF \$851,045 WERE INCURRED BY THE ORGANIZATION TO ASSESS COMMUNITY NEEDS; PROVIDE OUTCOME MEASUREMENT TRAINING TO VARIOUS ENTITIES IN THE COMMUNITY; PROVIDE PROGRAM

032212 11-20-20

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

ASSESSMENT, REVIEW, AND SELECTION; ADMINISTER GRANTS; PROVIDE FINANCIAL

AND STEWARDSHIP OVERSIGHT OF GRANT RECIPIENTS; AND PARTICIPATE IN

COMMUNITY PARTNERSHIPS TO ADVANCE COMMON GOALS IN THE THREE FOCUS AREAS

OF EDUCATION, INCOME, AND HEALTH

EXPENSES \$ 847,705. INCLUDING GRANTS OF \$ 366,530. REVENUE \$ 0.

WORLDWIDE AND DOORDASH, THIS PROGRAM FULFILLS CRITICAL FOOD INSECURITY

NEEDS IN 20 COMMUNITIES ACROSS THE COUNTRY, INCLUDING RIGHT HERE IN

LINCOLN AND LANCASTER COUNTY. OVER 150 FOOD DELIVERIES ARE BEING MADE

TO LINCOLN FAMILIES EACH WEEK. IN 2021 ALONE, THE PROGRAM HAS MADE

OVER 3,000 DELIVERIES IN LINCOLN AND LANCASTER COUNTY AND BY THE END OF

THE YEAR, WILL MAKE 5,000 DELIVERIES. THE PROGRAM PROVIDES A SAFE AND

SOCIALLY DISTANCED WAY TO GET FOOD TO HOUSEHOLDS IN NEED AND HELPS

RELIEVE STRESS AND LINES AT FOOD PANTRIES. \$22,080 WAS INVESTED IN

THIS PROGRAM DURING 2020-2021.

EXPENSES \$ 22,080. INCLUDING GRANTS OF \$ 22,080. REVENUE \$ 0.

EARNED INCOME TAX CREDIT (EITC) AND CHILD TAX CREDIT (CTC) AWARENESS:

IN PARTNERSHIP WITH UNITED WAY WORLDWIDE AND UNITED WAY OF THE MIDLANDS

IN OMAHA, THIS EFFORT URGED LAWMAKERS TO SUPPORT A 'LOOKBACK' PROPOSAL

WAS TO ALLOW WORKERS TO USE THEIR PREVIOUS YEAR EARNINGS TO CALCULATE

THEIR EITC AND CTC TAX CREDIT AMOUNTS. THE NATIONAL PANDEMIC EMERGENCY

HAS HIT PEOPLE IN LOW-PAYING JOBS HARD WITH MANY OF THEM SUFFERING

MASSIVE JOB AND WAGE LOSSES. MANY OF THESE PEOPLE FACE THE RISK OF

LOSING SOME OR ALL OF THEIR EITC AND CTC. THE PROPOSAL GIVES PEOPLE THE

OPTION TO USE EITHER THEIR 2019 OR 2020 EARNINGS TO CALCULATE THEIR

EITC AND CTC. THE EITC AND CTC HELP BOOST THE INCOMES OF LOW INCOME

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

WORKERS AND LIFT MILLIONS OF THEM AND THEIR FAMILIES OUT OF POVERTY.

THESE TAX CREDITS ARE CALCULATED IN PART BASED ON HOUSEHOLD EARNINGS

AND ARE DELIVERED AS REFUNDS AT TAX TIME. BECAUSE THE PANDEMIC'S

FALLOUT HAS REDUCED THE EARNINGS OF MILLIONS OF LOW-INCOME PEOPLE, WHEN

THEY FILE THEIR TAX RETURNS, THEY WOULD FACE A SHARPLY DIMINISHED EITC

AND CTC THAN THEY WOULD HAVE RECEIVED HAD THE PANDEMIC NOT AFFECTED

THEIR EARNED INCOME. UNITED WAY WORLDWIDE SUPPORTED THIS EDUCATIONAL

OPPORTUNITY BY PROVIDING A GRANT IN THE AMOUNT OF \$10,000.

EXPENSES \$ 10,000. INCLUDING GRANTS OF \$ 10,000. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 2:

TWO BOARD MEMBERS (ONE COUPLE) ARE MARRIED - 2020 BOARD.

FORM 990, PART VI, SECTION B, LINE 11B:

THE FORM 990 IS PROVIDED TO AND FORMALLY REVIEWED BY THE BOARD OF DIRECTORS
PRIOR TO SUBMISSION TO THE IRS. THE INDEPENDENT ACCOUNTANTS PRESENT THE
FORM 990 ANNUALLY AT THE OCTOBER BOARD MEETING. THE BOARD OF DIRECTORS
REVIEW THE FORM 990 FOCUSING ON SIGNIFICANT AREAS OF THE TAX RETURN AND HOW
THESE AREAS RELATE TO THE ANNUAL AUDITIED FINANCIAL STATEMENTS.

FORM 990, PART VI, SECTION B, LINE 12C:

DIRECTORS, OFFICERS, EMPLOYEES, AND MEMBERS OF COMMITTEES WITH

BOARD-DELEGATED POWERS ARE REQUIRED TO DISCLOSE ANNUALLY ANY RELATIONSHIPS

WHERE THEY AND/OR THEIR FAMILY MEMBERS MAY HAVE PERSONAL OR FINANCIAL

INTERESTS THAT COULD INFLUENCE THEIR DECISION MAKING ABILITY. THEY ALSO

SIGN A STATEMENT AFFIRMING THAT THEY HAVE RECEIVED, READ, AND WILL COMPLY

WITH THE ORGANIZATION'S CONFLICT OF INTEREST POLICY. THEY ARE REQUIRED TO

AFFIRM THEIR UNDERSTANDING THAT THE ORGANIZATION IS CHARITABLE AND MUST

Schedule O (Form 990 or 990-EZ) 2020

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER Employer identification number 47-0376624

ENGAGE PRIMARILY IN ACTIVITIES WHICH ACCOMPLISH ONE OR MORE OF ITS TAX-EXEMPT PURPOSES. BOARD MEMBERS AND VOLUNTEERS MAY NOT SERVE ON FUNDING TEAMS THAT RECOMMEND GRANT AWARDS TO ORGANIZATIONS WHERE THERE MAY BE A CONFLICT OF INTEREST BETWEEN THAT PERSON AND THE RECIPIENT ORGANIZATION. WHERE A GOVERNING BOARD MEMBER BELIEVES THAT A MATTER TO BE VOTED UPON WILL PRESENT A CONFLICT OF INTEREST, THAT MEMBER WILL ANNOUNCE THE CONFLICT OF INTEREST AND WILL HOLD SILENT DURING DISCUSSION ON THE ISSUE. THE MEMBER WILL REFRAIN FROM VOTING ON ANY MOTIONS AFFECTING THE DECLARED CONFLICT OF INTEREST. IF THE GOVERNING BOARD OR COMMITTEE HAS REASONABLE CAUSE TO BELIEVE A MEMBER HAS FAILED TO DISCLOSE ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL INFORM THE MEMBER AND ALLOW THEM TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. APPOINTED STAFF WILL REVIEW DECLARED CONFLICTS PRIOR TO VOTING AND BRING POSSIBLE CONFLICTS TO THE ATTENTION OF THE BOARD PRESIDENT AND/OR THE COMMITTEE CHAIRPERSON. THE MINUTES OF THE GOVERNING BOARD AND ALL COMMITTEES WITH BOARD DELEGATED POWERS SHALL CONTAIN: THE NAMES OF THE PERSONS WHO DISCLOSED OR WERE FOUND TO HAVE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST; THE NATURE OF THE CONFLICT; ANY ACTION TAKEN TO DETERMINE WHETHER A CONFLICT OF INTEREST WAS PRESENT; NAMES OF PERSONS PRESENT FOR DISCUSSIONS AND VOTES RELATING TO THE CONFLICT OF INTEREST; THE CONTENT OF THE DISCUSSION AND A RECORD OF ANY VOTES TAKEN IN CONNECTION WITH THE DISCUSSION.

FORM 990, PART VI, SECTION B, LINE 15:

THE GOVERNING-BOARD APPOINTED COMPENSATION COMMITTEE CONDUCTED THE

EXECUTIVE DIRECTOR PERFORMANCE REVIEW. NO COMMITTEE MEMBER HAD A REAL OR

PERCEIVED CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION

ARRANGEMENT. COMPENSATION WAS DETERMINED BASED ON JOB PERFORMANCE WITHIN

LIMITS OF UNITED WAY BUDGET PARAMETERS USING COMPARABILITY DATA FOR

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY Employee 47

Employer identification number 47-0376624

SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILAR ORGANIZATIONS. THE COMPENSATION COMMITTEE DOCUMENTED THE DELIBERATION PROCESS AND THE BASIS FOR ITS DECISIONS. THE COMMITTEE REPORTED ITS DETERMINATION AND RECOMMENDED BOARD APPROVAL AT THE DECEMBER 2019 BOARD MEETING IN EXECUTIVE SESSION. THE EXECUTIVE SESSION DISCUSSION AND BOARD REVIEW AND APPROVAL WERE DOCUMENTED IN THE MINUTES. THE EXECUTIVE DIRECTOR CONDUCTED THE PERFORMANCE REVIEW FOR THE SR. DIRECTOR OF FINANCE AND ADMINISTRATION. COMPENSATION WAS DETERMINED BASED ON JOB PERFORMANCE WITHIN LIMITS OF UNITED WAY BUDGET PARAMETERS USING COMPARABILITY DATA FOR SIMILARLY QUALIFIED PERSONS IN COMPARABLE POSITIONS AT SIMILAR ORGANIZATIONS. THE EXECUTIVE DIRECTOR REPORTED THE DETERMINATION AND BASIS FOR CONCLUSIONS TO MEMBERS OF THE COMPENSATION COMMITTEE. THE COMMITTEE REPORTED THE DETERMINATION TO THE UNITED WAY BOARD OF DIRECTORS FOR APPROVAL AT THE AUGUST 2019 BOARD MEETING IN EXECUTIVE SESSION. THE EXECUTIVE SESSION DISCUSSION AND BOARD REVIEW AND APPROVAL WERE DOCUMENTED IN THE MINUTES.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION'S CONFLICT OF INTEREST POLICY, AUDITED FINANCIAL

STATEMENTS, AND FORM 990 ARE MADE AVAILABLE TO THE GENERAL PUBLIC VIA

POSTING TO ITS WEBSITE AT WWW.UNITEDWAYLINCOLN.ORG. IN ADDITION, GOVERNING

DOCUMENTS INCLUDING ARTICLES OF INCORPORATION, BYLAWS, AND 501 (C) (3)

DETERMINATION LETTER ARE MADE AVAILABLE THROUGH ALLOWED INSPECTION AT THE

LOCAL UNITED WAY OFFICE. COPIES OF THESE DOCUMENTS ARE PROVIDED TO THE

PUBLIC UPON REQUEST.

FORM 990, PART XII, LINE 2C

UNITED WAY OF LINCOLN AND LANCASTER COUNTY'S FINANCE COMMITTEE IS

Schedule O (Form 990 or 990-EZ) 2020  Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY								Employer identification numbe					
RESPONSIBLE	FOR	OVER	SIGHT	AND	APPROVAL	OF	THE	ANNUAL	AUDI	r and	THE	FORM	
990.													

## SCHEDULE R (Form 990)

## **Related Organizations and Unrelated Partnerships**

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

➤ Attach to Form 990.

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No. 1545-0047

Name of the organization UNITED WAY OF LINCOLN AND LANCASTER COUNTY

Employer identification number 47-0376624

(a)	(b)	(c)	(d)	(e)		(f)		,
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state of foreign country)	or Total inco	me End-of-yea	r assets			J
Identification of Related Tax-Exempt Organiz	zations. Complete if the organization	on answered "Yes" on Form 99	0. Part IV. line 34.	because it had one	e or more related	l tax-exemi	npt	
organizations during the tax year.								
t II Identification of Related Tax-Exempt Organizations during the tax year.  (a)  Name, address, and EIN of related organization	zations. Complete if the organizations.  (b)  Primary activity	on answered "Yes" on Form 990  (c)  Legal domicile (state or foreign country)	0, Part IV, line 34,  (d)  Exempt Code section	(e) Public charity status (if section	(f) Direct contro		Section 5	olled
organizations during the tax year.  (a)  Name, address, and EIN  of related organization	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	(f) Direct contro	olling	Section 5	olled
organizations during the tax year.  (a)  Name, address, and EIN of related organization  TED WAY OF LINCOLN AND LANCASTER COUNTY  NDATION, INC 20-1412874, 238 S. 13TH	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct control entity UNITED WAY C	olling	Section 5 contrienti	olled
organizations during the tax year.  (a)  Name, address, and EIN  of related organization  TED WAY OF LINCOLN AND LANCASTER COUNTY  NDATION, INC 20-1412874, 238 S. 13TH	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if section 501(c)(3))	(f) Direct contrientity	olling	Section 5 contr	olled ity?
organizations during the tax year.  (a)  Name, address, and EIN  of related organization  ED WAY OF LINCOLN AND LANCASTER COUNTY  DATION, INC 20-1412874, 238 S. 13TH	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct control entity UNITED WAY C	olling	Section 5 contrienti	olled ity?
organizations during the tax year.  (a)  Name, address, and EIN  of related organization  PED WAY OF LINCOLN AND LANCASTER COUNTY  IDATION, INC 20-1412874, 238 S. 13TH	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct control entity UNITED WAY C	olling	Section 5 contrienti	olled ity?
organizations during the tax year.  (a)  Name, address, and EIN	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct control entity UNITED WAY C	olling	Section 5 contrienti	olle ity

Page 2

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

<u> </u>	· · · · · · · · · · · · · · · · · · ·	,	i							_		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j		(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disprop	ortionate	Code V-UBI	Gene	ral or P	Percentage ownership
of related organization		(state or foreign	entity	related, unrelated, lexcluded from tax under	income	end-of-year assets	alloca	ations?	amount in box	partr	ner?	ownership
		country)		sections 512-514)		833013	Yes	No	amount in box 20 of Schedule K-1 (Form 1065)	Yes	No	
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Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i	)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Type of entity (C corp, S corp, or trust)	Share of total income	Share of end-of-year assets	Percentage ownership	CITA	
		country)		,				Yes	No
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Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No	
1 During the tax year, did the organization engage in any of the following transactions	s with one or more r	elated organizations listed in Pa	rts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		X	
<b>b</b> Gift, grant, or capital contribution to related organization(s)				1b		Х	
c Gift, grant, or capital contribution from related organization(s)				1c	Х		
d Loans or loan guarantees to or for related organization(s)				1d		X	
e Loans or loan guarantees by related organization(s)				1e		Х	
f Dividends from related organization(s)				1f		X	
g Sale of assets to related organization(s)				1g		Х	
h Purchase of assets from related organization(s)				1h		Х	
i Exchange of assets with related organization(s)							
j Lease of facilities, equipment, or other assets to related organization(s)				1j		Х	
k Lease of facilities, equipment, or other assets from related organization(s)				1k		Х	
l Performance of services or membership or fundraising solicitations for related organ	nization(s)			11		Х	
m Performance of services or membership or fundraising solicitations by related organ				1m		Х	
n Sharing of facilities, equipment, mailing lists, or other assets with related organization				1n	Х		
Sharing of paid employees with related organization(s)				10	Х		
o online of part on project many outside or gain attention (e)							
p Reimbursement paid to related organization(s) for expenses				1p		Х	
q Reimbursement paid by related organization(s) for expenses				1a	Х		
Tomborosmone para by rolation organization (b) for expenses				.9			
r Other transfer of cash or property to related organization(s)				1r	Х		
s Other transfer of cash or property from related organization(s)				1s		Х	
2 If the answer to any of the above is "Yes," see the instructions for information on w				13			
(a)  Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d)  Method of determining amount inv	olved			
UNITED WAY OF LINCOLN AND LANCASTER COUNTY							
(1) FOUNDATION, INC.	R	125,000.					
UNITED WAY OF LINCOLN AND LANCASTER COUNTY							
(2) FOUNDATION, INC.	С	68,883.					
(3)							
(4)							
(5)							
· ·							
(6)							
100 Sebadu						2020	

COUNTY

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are all partners ser 501(c)(3) orgs.?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocation Yes N	s? of Schedule K-1	General of managing partner?	(k) Percentage ownership