			** PUBLIC DISCLOSURE CO			OMB No. 1545-0047				
_	0	90	Return of Organization Exempt F			0000				
Forr	n J	30	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue							
		of the Treasury	Do not enter social security numbers on this form as Go to www.irs.gov/Form990 for instructions and t	-		Open to Public				
		enue Service			MAR 31, 2024	Inspection				
_				enuing I	· · · · ·	ation number				
BCa	heck if pplicab	le.	f organization ED WAY OF JOHNSON & WASHINGTON		D Employer identific	cation number				
	Addre		TIES, INC.							
	_chang Name		•		42-60620	55				
$\frac{1}{1}$										
	_returr Final	1150		290	319-338-					
	⊥returr termii ated	n-	own, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	2,177,191.				
	Amer returr	ided CODA	LVILLE, IA 52241		H(a) Is this a group re					
			nd address of principal officer: JENNIFER BANTA		for subordinates					
L	pendi		AS C ABOVE		H(b) Are all subordinates in					
1 1	ax-ex	empt status:		or 527		list. See instructions				
	Vebsi		UNITEDWAYJWC.ORG		H(c) Group exemption					
			X Corporation Trust Association Other	L Year	<u> </u>	State of legal domicile: IA				
	art I	Summary								
	1	Briefly describ	be the organization's mission or most significant activities: $\_{ t TO}$ $\_{ t IN}$	MPROVE	E LIVES BY UN	NITING THE				
Governance			POWER OF COMMUNITY IN JOHNSON AND							
nar	2	Check this bo								
ver	3	Number of vo				21				
	4		lependent voting members of the governing body (Part VI, line 1b)			21				
ې مې	5		of individuals employed in calendar year 2023 (Part V, line 2a)			14				
Activities &	6		of volunteers (estimate if necessary)			1389				
cti	7 a		d business revenue from Part VIII, column (C), line 12			0.				
•			business taxable income from Form 990-T, Part I, line 11			0.				
					Prior Year	Current Year				
Ø	8	Contributions	and grants (Part VIII, line 1h)		2,566,140.	2,140,371.				
Revenue	9	Program servi	ce revenue (Part VIII, line 2g)		0.	0.				
eve	10	Investment in	come (Part VIII, column (A), lines 3, 4, and 7d)		11,608.	26,025.				
£	11	Other revenue	e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-26,089.	-19,455.				
	12	Total revenue	- add lines 8 through 11 (must equal Part VIII, column (A), line 12) .		2,551,659.	2,146,941.				
	13	Grants and si	milar amounts paid (Part IX, column (A), lines 1-3)		1,425,305.	1,361,366.				
	14	Benefits paid	to or for members (Part IX, column (A), line 4)		0.	0.				
ŝ	15	Salaries, othe	r compensation, employee benefits (Part IX, column (A), lines 5-10)		690,360.	657,368.				
nse	16a	Professional f	undraising fees (Part IX, column (A), line 11e)		0.	0.				
Expenses	b	Total fundrais	ing expenses (Part IX, column (D), line 25) 110, 40	04.						
Ш	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		302,000.	481,026.				
	18	Total expense	es. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,417,665.	2,499,760.				
	19	Revenue less	expenses. Subtract line 18 from line 12		133,994.	-352,819.				
t Assets or d Balances				В	eginning of Current Year	End of Year				
sets	20	Total assets (I		∟	3,485,615.	3,138,931.				
t As	21		; (Part X, line 26)		1,844,931.	1,793,931.				
Inter	22		fund balances. Subtract line 21 from line 20		1,640,684.	1,345,000.				
	art II	Signature								
			I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is				
true,	corre	ct, and complete	. Declaration of preparer (other than officer) is based on all information of wh	lich prepare	r has any knowledge.					

Sign	Signature of officer	Date								
Here	JENNIFER BANTA, PRESIDENT									
	Type or print name and title									
	Print/Type preparer's name	Preparer's signature	Date Check PTIN							
Paid	DAVID LITTLE	DAVID LITTLE	08/22/24 self-employed P01480921							
Preparer	Firm's name CLIFTONLARSONALLE	N LLP	Firm's EIN 41-0746749							
Use Only	Firm's address 600 3RD AVENUE SE	, SUITE 300								
CEDAR RAPIDS, IA 52401 Phone no. 319-363-269										
May the IRS discuss this return with the preparer shown above? See instructions										
LHA For	LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 12-21-23 Form 990 (2023)									

	rt 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:
	THE MISSION OF UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.
	(UWJWC) IS TO IMPROVE LIVES BY UNITING THE CARING POWER OF COMMUNITY
	IN JOHNSON AND WASHINGTON COUNTIES.
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?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$2, 102, 380. including grants of \$1, 361, 366. ) (Revenue \$
	PARTNER AGENCY INVESTMENTS - UNITED WAY COLLABORATES WITH 30 PARTNER
	AGENCIES TO ASSIST INDIVIDUALS FACING URGENT NEEDS AND LONG-TERM
	CHALLENGES. THESE AGENCIES WORK TOGETHER DAILY TO ADDRESS COMMUNITY
	NEEDS AND, WITH UNITED WAY, DEVELOP INTEGRATED SOLUTIONS FOR CRITICAL
	ISSUES. THEY PROVIDE HIGH-QUALITY SERVICES THAT INCLUDE PLACE-BASED AND
	MULTI-GENERATIONAL COLLABORATIONS, TRANSFORMING THE FUTURES OF LOCAL
	INDIVIDUALS AND FAMILIES.
	UNITED WAY EVALUATES COMMUNITY TRENDS AND SERVICE GAPS, OFFERING
	VALUABLE PHILANTHROPIC SERVICES TO DONORS BY INVESTING IN ESSENTIAL
	NON-PROFITS THROUGH A VOLUNTEER-LED ANNUAL AGENCY INVESTMENT PROCESS. UNITED WAY IS DEDICATED TO ENSURING EVERYONE HAS THE BEST CHANCE FOR
	SUCCESS. AS UNITED WAY OF JOHNSON & WASHINGTON COUNTIES GROWS AND
41-	
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$) (Revenue \$) UNITED WAY DONOR DESIGNATED FUNDS: CONTRIBUTORS TO UNITED WAY CAN
	ALLOCATE ALL OR A PORTION OF THEIR DONATIONS TO UNITED WAY AGENCIES OR
	TO NON-AFFILIATED 501(C)(3) ORGANIZATIONS, CHURCHES, OR GOVERNMENTAL
	AGENCIES. UNITED WAY DISTRIBUTES THESE FUNDS TO THE DESIGNATED
	ORGANIZATIONS BIANNUALLY, IN APRIL AND OCTOBER. DONORS ALSO HAVE THE
	OPTION TO DIRECT THEIR GIFTS TO SPECIFIC UNITED WAY INITIATIVES, SUCH
	AS EARLY LITERACY & GRADE LEVEL READING PROGRAMS, SUMMERSHIP CAMP
	SCHOLARSHIPS, AND THE DISASTER RELIEF FUND. ADDITIONALLY, DONORS CAN
	CHOOSE TO SUPPORT LONGER-TERM FUNDS, INCLUDING THE INNOVATION &
	SUSTAINABILITY FUND AND THE UNITED WAY ENDOWMENT FUND, WHICH IS MANAGED
	BY THE COMMUNITY FOUNDATION OF JOHNSON COUNTY.
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
	OTHER PROGRAM SERVICES - OTHER UNITED WAY OF JOHNSON & WASHINGTON
	COUNTIES PROGRAMMING INCLUDES: COMMUNITY BUILDING, ASSESSMENT AND
	ACCOUNTABILITY INITIATIVES. UNITED WAY FULFILLS ITS MISSION BY: 1)
	RESEARCHING AND ASSESSING COMMUNITY CONDITIONS AND LEADING MULTI-SECTOR
	GOAL SETTING, 2) DEVELOPING STRATEGIES AND RECRUITING RESOURCES TO
	DRIVE CHANGE, MEET NEEDS AND BUILD ASSETS IN THE COMMUNITY, AND 3)
	DELIVERING RESULTS BY MONITORING PROGRESS AND CHANGE IN COMMUNITY
	CONDITIONS. UWJWC PARNTERS WITH LOCAL LEADERS TO CREATE A COMMUNITY
	ASSESSMENT AND ASSISTS TO CONVENE A CROSS-SECTOR VISIONING AND GOAL SETTING PROCESS.
	UNITED WAY VOLUNTEER CENTER: THE UNITED WAY VOLUNTEER CENTER'S CORE
4d	Other program services (Describe on Schedule O.)
4.0	(Expenses \$ including grants of \$ ) (Revenue \$ )       Total program service expenses     2,102,380.
+e	Total program service expenses 2,102,380.
	Form 556 (202
32003	2 12-21-23 SEE SCHEDULE O FOR CONTINUATION(S)

COUNTIES, INC.

Part IV Checklist of Required Schedules

Form 990 (2023)

			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? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			v
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u> </u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	-		х
6	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If</i> "Yes," <i>complete Schedule D, Part I</i>	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			- 21
'	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	<b>-</b>		
Ū	Schedule D, Part III	8		х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
•	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		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, VII, 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		X
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		_X_
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses		37	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete		v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	104		v
40	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	12b		X
13 14a		13 14a		X
b	Did the organization maintain an office, employees, or agents outside of the United States?	140		- 21
U	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		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		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. See instructions	17		X
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	Х	
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		X
20a	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?	20b		<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	
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Form	990 (2023) COUNTIES, INC. 42-60	62055	Р	age <b>4</b>
Par	t IV Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
				x
~ ~	Schedule J	23		
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			X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	<b>24b</b>		<u> </u>
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	<b>24c</b>		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes." complete			
	Schedule L. Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
20	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		x
07		20		
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			v
	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 the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV			X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
с	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M		Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
00		33		x
24	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	55		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			x
05	Part V, line 1			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	<u>35a</u>		<u> </u>
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
<i></i>	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			├───
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization			
	If "Yes," complete Schedule R, Part V, line 2	36		X 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		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>	<u></u>	
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	0		
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b	0		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
Ŭ	(gambling) winnings to prize winners?	1c		
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Form	990 (2023) COUNTIES, INC.	42-6062	055	Р	<sub>age</sub> 5
Par	t 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 14			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	s?	2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule of	D	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other an	uthority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial ac	count)?	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 Ac	counts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transact	tion?	5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?	-	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for goods and service of \$75 made partly as a contribution and partly for \$75 made partly as a contribution and	rices provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa	s reauired			
	to file Form 8282?	•	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		x
a	If the organization received a contribution of qualified intellectual property, did the organization file For		7g		
b b	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization		7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained				
-		2,	8		
9	Sponsoring organizations maintaining donor advised funds.				
a			9a		
b			9b		
10	Section 501(c)(7) organizations. Enter:				
 a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
h	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:				
 a	Gross income from members or shareholders	11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	120		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	~			
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
u	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.		100		
h	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
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule	0	14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				<u> </u>
.0	excess parachute payment(s) during the year?		15		x
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		x
10					
17	If "Yes," complete Form 4720, Schedule O.	ivition			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any act		47		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.		Earm	990	(2023)
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COUNTIES, INC 42-6062055 Page 6 Form 990 (2023) 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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 21 **1a** Enter the number of voting members of the governing body at the end of the tax year 1a 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 0. 21 **b** Enter the number of voting members included on line 1a, above, who are independent 1h Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Х officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 Х Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 4 Х 5 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 Did the organization have members or stockholders? 6 х 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? х 7a **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Х 7b 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: х a The governing body? 8a b Each committee with authority to act on behalf of the governing body? Х 8b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the х organization's mailing address? If "Yes," provide the names and addresses on Schedule O 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? х 10a b 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 Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 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 c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe Х 12c on Schedule O how this was done ..... Did the organization have a written whistleblower policy? х 13 13 14 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х The organization's CEO, Executive Director, or top management official 15a а Х 15b Other officers or key employees of the organization b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? 16b Section C. Disclosure NONE 17 List the states with which a copy of this Form 990 is required to be filed 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 only) available 18 for public inspection. Indicate how you made these available. Check all that apply. X Another's website X Own website X Upon request \_ Other (explain on Schedule O) Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 19 statements available to the public during the tax year. State the name, address, and telephone number of the person who possesses the organization's books and records 20 EMMA BARNUM - (319)338-7823 1150 5TH STREET, SUITE 290, CORALVILLE IΑ 52241

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Form 990 (2023)

UNITED	WAY	OF	JOHNSON	&	WASHINGTON
COUNTIE	ES,	INC	•		

Form 990 (2	2023)	COUNTIES,	INC.				42-6
Part VII	Compensation	of Officers, Di	irectors,	Trustees,	Key Employees,	Highest	Compensated
	Employees, an	d Independent	t Contra	ctors			

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
 List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.
 Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

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

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

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

(A) Name and title	(B) Average	<b>(C)</b> Position		(D) Reportable	<b>(E)</b> Reportable	<b>(F)</b> Estimated				
	hours per	(do not check m box, unless pers					compensation	compensation	amount of	
	week (list any hours for related organizations	Individual trustee or director	Institutional trustee			Highest compensated		from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related
	below line)	Individu	In stit uti	Officer	Key employee	Highest employ	Former			organizations
(1) BANTA, JENNIFER	40.00									
PRESIDENT & CEO				Х				106,575.	0.	10,028.
(2) UPAH, MARIA	40.00									
DIRECTOR OF FINANCE & OPERATIONS DEC				Х				44,956.	0.	5,134.
(3) ANDERSON, TERRI	40.00									
DIRECTOR OF FINANCE & OPERATIONS JUN				Х				38,427.	0.	3,304.
(4) TOWNSEND, JACKI	1.50									
CHAIR		Х		Х				0.	0.	0.
(5) DEVAISHER, LEN	1.50									
VICE CHAIR		Х		Х				0.	0.	0.
(6) THOMAS, BARBARA	1.50									
RESOURCE DEVELOPMENT CHAIR		Х		Х				0.	0.	0.
(7) WOLFF, MARSHA	1.50									
COMMUNITY INVESTMENT CHAIR		Х		Х				0.	0.	0.
(8) YOKUM, LYNSEY	1.50									
INTERNAL OPERATIONS CHAIR		Х		Х				0.	0.	0.
(9) ASTORINO, CHARILIE	1.00									
BOARD MEMBER		Х						0.	0.	0.
(10) BISHOP, JUSTIN	1.00									
STRATEGIC PLANNING CHAIR		Х						0.	0.	0.
(11) BROWN, MATT	1.00									
BOARD MEMBER		Х						0.	0.	0.
(12) COLLINS, EMILY	1.00									-
BOARD MEMBER	1 00	X						0.	0.	0.
(13) CONARD, JIM	1.00								•	•
BOARD MEMBER	1 00	X						0.	0.	0.
(14) DAVIS, TERRI	1.00								•	•
BOARD MEMBER	1 00	Х						0.	0.	0.
(15) HEIAR, RYAN	1.00							•	0	0
BOARD MEMBER	1 0 0	Х						0.	0.	0.
(16) JON SARGEANT, TRACY	1.00	37							<b>^</b>	0
BOARD MEMBER	1 00	Х						0.	0.	0.
(17) KRON, SHANE	1.00	v						0.	0.	0
BOARD MEMBER 332007 12-21-23		Х						U .	υ.	0 • Form <b>990</b> (2023)

332007 12-21-23

UNITED	WAY	OF	JOHNSON	&	WASHINGTON

6062055

Form 990 (2023) COUNTIES,	INC.								42-6062	055	Pa	ige <b>8</b>
Part VII Section A. Officers, Directors, Trust	ees, Key Emp	oloye	es,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			(C				(D)	(E)		(F)	
Name and title	Average			Posi	ition			Reportable	Reportable	Est	timated	Ы
	hours per		not ch unles					compensation	compensation		nount o	
	week		er and					from	from related		other	
	(list any	tor						the	organizations		pensat	ion
	hours for	direc				σ		organization	(W-2/1099-MISC/		om the	
	related	e or	stee			nsate		(W-2/1099-MISC/	1099-NEC)		anizatio	
	organizations	truste	al tru		/ee	mpei		1099-NEC)	,		relate	
	below	dual t	ution	_	io Id u	st co oyee	ы П				nizatio	
	line)	Individual trustee or director	Institutional trustee	Officer	ƙey employee	Highest compensated employee	Former					
(18) LEHMAN, MICHAEL	1.00	_	_		×					<u> </u>		
BOARD MEMBER	1.00	х						0.	0.			0.
	1 0 0	Δ		_				0.	0.	──		0.
(19) LEYDEN-VAN GUNDY, ANGIE	1.00								0			~
BOARD MEMBER		Х						0.	0.	<u> </u>		0.
(20) RAMEY, CHACE	1.50											
STRATEGIC PLANNING CHAIR		Х						0.	0.			Ο.
(21) STRAHN-KOLLER, BROOKE	1.00											
BOARD MEMBER		х						0.	0.			Ο.
(22) SWARTZ, RYAN	1.00									<u> </u>		<u> </u>
	1.00	37							•			^
BOARD MEMBER	- 1	Х						0.	0.	<u> </u>		0.
(23) TOVAR, LIZ	1.00											
BOARD MEMBER		Х						0.	0.			0.
(24) VAN ROEKEL, TRICIA	1.00											
BOARD MEMBER		Х						0.	0.			Ο.
				_								
								100.050				
1b Subtotal								189,958.	0.		3,46	.6.
c Total from continuation sheets to Part VI	, Section A							0.	0.			0.
d Total (add lines 1b and 1c)								189,958.	0.	18	3,46	6.
2 Total number of individuals (including but n								eceived more than \$100.0	000 of reportable	-		
compensation from the organization					,	,		· · · · · · · · · · · · · · · · · · ·				1
compensation non the organization											Yes	No
											100	
<b>3</b> Did the organization list any <b>former</b> officer,	-		•	•	•		Ŭ					37
line 1a? If "Yes," complete Schedule J for s										3		X
4 For any individual listed on line 1a, is the su	m of reportabl	e co	mpe	nsat	tion	and	oth	ner compensation from th	e organization			
and related organizations greater than \$150	,000? If "Yes,	" coi	mple	te S	Sche	dule	Jf	or such individual		4		Х
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com	-				-			-		5		Х
Section B. Independent Contractors	olete ochedule	<u>,                                    </u>	1 54	<u>un p</u>	20/30						t	
· · ·									100 000 of company			
1 Complete this table for your five highest con										LION ITO	m	
the organization. Report compensation for t	he calendar ye	ear e	ndin	g wi	ith o	or wi	thin	the organization's tax ye	ear.			
(A)								(B)		) (C	)	
Name and business	address	NC	)NE					Description of se	ervices (	Compen	isation	I
							+					
							-+					
2 Total number of independent contractors (ir	cluding but no	ot lin	nited	to t	thos	e lis	ted	above) who received mo	re than			
\$100.000 of compensation from the organiz				-	0		-	,				

Form **990** (2023)

UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.

Ра	rt V	<u>Ш</u>						
			Check if Schedule O contains a response	or note to any lin	e in this Part VIII (A)	(B)	(C)	(D)
					Total revenue	Related or exempt		Revenue excluded
					Total revenue	function revenue	business revenue	from tax under
								sections 512 - 514
ts t	1	а	Federated campaigns 1a					
irar		b	Membership dues 1b					
Contributions, Gifts, Grants and Other Similar Amounts		с	Fundraising events 1c	54,702.				
			Related organizations 11					
s, G		е	Government grants (contributions) 1e	204,798.				
Sij			All other contributions, gifts, grants, and		1			
her			similar amounts not included above <b>1f 1</b>	,880,871.				
Ģti		a	Noncash contributions included in lines 1a-1f	35,083.				
no'		-	Total. Add lines 1a-1f		2,140,371.			
0.0				Business Code				
	~	_		Dusiness Odde				
rice	2	a						
er,		b						
n S /en		C.						
Jrar Sev		d						
Program Service Revenue		е						
٩			All other program service revenue					
		g	Total. Add lines 2a-2f					
	3		Investment income (including dividends, inter	•				
			other similar amounts)		26,160.	26,160.		
	4		Income from investment of tax-exempt bond p	oroceeds				
	5		Royalties					
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a					
		b	Less: rental expenses 6b					
		с	Rental income or (loss) 6c					
		d	Net rental income or (loss)					
	7	а	Gross amount from sales of (i) Securities	(ii) Other				
			assets other than inventory <b>7a</b>		1			
		b	Less: cost or other basis					
ē			and sales expenses	135.				
ent		с	Gain or (loss) 7c	-135.				
Revenue			Net gain or (loss)		-135.			-135.
۳	8		Gross income from fundraising events (not					
Othe	0	ŭ	including \$ 54,702. of					
0			contributions reported on line 1c). See					
			Part IV, line 18	0.				
		h	Less: direct expenses					
			Net income or (loss) from fundraising events	-	-30,115.			-30,115.
	•		Gross income from gaming activities. See		50,115.			50,115.
	Э	a	Part IV, line 19	10,660.				
		•						
			· · · · · · · · · · · · · · · · · · ·	<b>) 0</b>	10,660.			10,660.
			( , ) ) ]	 	10,000.			10,000.
	10	а	Gross sales of inventory, less returns					
			and allowances 10					
			Less: cost of goods sold10	b				
		С	Net income or (loss) from sales of inventory					
S				Business Code				
e e	11	а						
ane		b						
cell eve		с						ļ
Miscellaneous Revenue			All other revenue					
_		е	Total. Add lines 11a-11d					
	12		Total revenue. See instructions		2,146,941.	26,160.	0.	
33200	9 12-	-21-	23					Form <b>990</b> (2023)

Form 990 (2023)

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### UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.

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Form 990 (2023) Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respons				
Do	not include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	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		CAPCINCO	general expenses	скреньев
•	and domestic governments. See Part IV, line 21	1,361,366.	1,361,366.		
2	Grants and other assistance to domestic	_,,	_,,		
2	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
3	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,	193,179.	164,530.	19,512.	0 1 2 7
•	trustees, and key employees	193,119.	104,550.	19,512.	9,137.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	256 422	250 212	CC 107	21 012
7	Other salaries and wages	356,423.	259,213.	66,197.	31,013.
8	Pension plan accruals and contributions (include		0 050	101	286
	section 401(k) and 403(b) employer contributions)	3,355.	2,858.	121.	376. 3,192.
9	Other employee benefits	67,457.	57,451.	6,814.	3,192.
10	Payroll taxes	36,954.	28,193.	5,966.	2,795.
11	Fees for services (nonemployees):				
а	Management	3,682.	1,724.	1,498.	460.
b	Legal				
с	Accounting	36,029.	16,868.	14,659.	4,502.
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	5,762.	90.	5,659.	13.
g	Other. (If line 11g amount exceeds 10% of line 25,				
-	column (A), amount, list line 11g expenses on Sch 0.)	22,988.	10,762.	9,354.	2,872.
12	Advertising and promotion	6,353.	4,225.	535.	2,872. 1,593.
13	Office expenses	20,664.	15,136.	3,764.	1,764.
14	Information technology	78,009.	35,303.	8,127.	34,579.
15	Royalties				
16	Occupancy	37,543.	26,773.	7,334.	3,436.
17	Travel	6,622.	5,889.	473.	260.
18	Payments of travel or entertainment expenses	.,			
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	12,736.	8,569.	2,554.	1,613.
20	· · · · · · · · · · · · · · · · · · ·	1277300	0,0001		1/0101
		28,653.	20,637.	5,459.	2,557.
21 22	Payments to affiliates Depreciation, depletion, and amortization	8,790.	6,090.	1,839.	861.
22	. Г	6,239.	4,323.	1,305.	611.
23		0,239.	4,525.	1,303.	011.
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.)	100 450		102 452	
a	BAD DEBT EXPENSE	123,452.	40 000	123,452.	
b	GRANT RELATED EXPENSES	48,696.	48,696.	0.054	0 000
С	CAMPAIGN SUPPLIES/EVENT	20,440.	9,316.	2,354.	8,770.
d	VOLUNTEER CENTER	14,368.	14,368.		
е	All other expenses	0 400 - 55	0.100.000		440
25	Total functional expenses. Add lines 1 through 24e	2,499,760.	2,102,380.	286,976.	110,404.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
33201	0 12-21-23				Form <b>990</b> (2023)
		10			

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Form 990 (2023) Part X Balance Sheet

# UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or	note to any lii	ne in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			237,019.	1	1,114,087.
	2	Savings and temporary cash investments			1,681,743.	2	928,271.
	3	Pledges and grants receivable, net		I	1,124,442.	3	617,430.
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any curren					
		trustee, key employee, creator or founder, su	bstantial con	tributor, or 35%			
		controlled entity or family member of any of t	hese persons	;		5	
	6	Loans and other receivables from other disqu	alified persor	ns (as defined			
		under section 4958(f)(1)), and persons descri	oed in sectior	n 4958(c)(3)(B)		6	
ŝ	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
Ř	9				5,954.	9	5,608.
	10a	Land, buildings, and equipment: cost or othe	r				
		basis. Complete Part VI of Schedule D		<u>111,778.</u> 96,882.			
	b	Less: accumulated depreciation	10b	96,882.	17,393.	10c	14,896.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, lir	ne 11			12	
	13	Investments - program-related. See Part IV, li	ne 11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	419,064.	15	458,639.		
	16	Total assets. Add lines 1 through 15 (must equal line 33)			3,485,615.	16	3,138,931.
	17	Accounts payable and accrued expenses	42,396.	17	86,640.		
	18	Grants payable			1,715,155.	18	1,631,081.
	19	Deferred revenue			4,517.	19	29,317.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Comple				21	
es	22	Loans and other payables to any current or fo					
iliti		trustee, key employee, creator or founder, su					
Liabilities		controlled entity or family member of any of t			00.000	22	46.000
_	23	Secured mortgages and notes payable to un	-		82,863.	23	46,893.
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on li	nes 17-24). C	omplete Part X			
		of Schedule D		·····	1,844,931.	25	1,793,931.
	26	Total liabilities. Add lines 17 through 25		X	1,044,951.	26	1,795,951.
ŝ		Organizations that follow FASB ASC 958, o	check here				
nce	07	and complete lines 27, 28, 32, and 33.			830,746.	27	758,563.
ala	27 28				809,938.	27	586,437.
Б	20	Organizations that do not follow FASB AS		horo	000,000.	20	500,457.
'n		and complete lines 29 through 33.	5 950, CHECK				
P	20	Capital stock or trust principal, or current fun	de			29	
ets	29 30	Paid-in or capital surplus, or land, building, or				29 30	
Assi	31	Retained earnings, endowment, accumulated		Г		31	
Net Assets or Fund Balances	32			Γ	1,640,684.	32	1,345,000.
Ž	33	Total liabilities and net assets/fund balances			3,485,615.	33	3,138,931.
	33	TOTAL HADIILIES AND HEL ASSELS/TUNU DAIANCES			J, TOJ, OTJ.	აა	<u> </u>

Form 990 (2023)

UNITED	WAY	OF	JOHNSON	&	WASHINGTON
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Form	990 (2023) COUNTIES, INC.	42-606	2055	Pag	<sub>je</sub> 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)		<u>2,146</u>		
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,499		
3	Revenue less expenses. Subtract line 2 from line 1	3	-352		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	1,640	,68	34.
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	57	13,13	35.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	1,345	,00	)0.
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 on Schedule	О.			
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	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	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,			
	consolidated basis, or both:				
	X Separate basis 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 the	,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required				
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b		

Form **990** (2023)

SCHEDULE A (Form 990)		Co	OMB No. 1545-0047							
Department of the Treasury Internal Revenue Service					Attach to Form 990 or Form 990-EZ. o www.irs.gov/Form990 for instructions and the latest information.					
Name of the organization UNITED WAY OF JOHNSON & WASHINGTON Employer						identification number $2-6062055$				
Pa	rt I	Reason	or Public (	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instructior	s.	
The	organ	ization is not a	private found	lation because it is: (F	For lines 1 through 12, cl	neck only o	one box.)			
1		A church, cor	vention of ch	urches, or associatio	n of churches described	in <b>sectio</b>	n 170(b)(1	I)(A)(i).		
2		A school dese	ribed in <b>sect</b>	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Form	ı 990).)				
3		A hospital or	a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical res	earch organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	)(iii). Enter	the hospital's name,
		city, and state	-							
5		An organizati	on operated fo	or the benefit of a col	lege or university owned	or operate	ed by a go	vernmental u	nit describe	ed in
		section 170(	b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, sta	e, or local go	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).		
7	X	An organizati	on that norma	Illy receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general p	oublic described in
		section 170(I	<b>)(1)(A)(vi).</b> (C	omplete Part II.)						
8		-			(1)(A)(vi). (Complete Part					
9		•	-		in section 170(b)(1)(A)(i	<i>·</i> ·			Ũ	•
			or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or
		university:								
10					than 33 1/3% of its supp					
					t to certain exceptions; a					-
					(less section 511 tax) fro	m busines	ses acqui	rea by the org	janization a	iller June 30, 1975.
11				mplete Part III.)	vely to test for public saf	oty Soo	coction 5(	0(a)(4)		
12	$\square$	-	-	-	vely for the benefit of, to	•			rny out the	nurnoses of one or
12		-	-	-	d in section 509(a)(1) o	-			•	
				-	f supporting organization					Sheek the box on
a		-	•	• •	upervised, or controlled l				-	aivina
					gularly appoint or elect a	•	-			
			-	complete Part IV, Se						
b		¬ ~		-	or controlled in connect	ion with its	s supporte	ed organizatio	n(s), by hav	ing
		control or n	nanagement o	of the supporting orga	anization vested in the sa	ime perso	ns that co	ntrol or mana	ge the supp	ported
		organizatio	n(s). You mus	t complete Part IV,	Sections A and C.					
с		] Type III fun	ctionally inte	grated. A supporting	g organization operated i	n connect	ion with, a	and functional	ly integrate	d with,
		its supporte	d organizatio	n(s) (see instructions)	). You must complete F	Part IV, Se	ctions A,	D, and E.		
Ċ		Type III no	n-functionally	y integrated. A supp	orting organization operation	ated in cor	nnection w	ith its suppo	ted organiz	zation(s)
		that is not f	unctionally int	egrated. The organiz	ation generally must sati	sfy a distr	ibution rec	quirement and	an attentiv	veness
	_	requiremen	t (see instruct	ions). You must con	nplete Part IV, Sections	A and D,	and Part	<b>V</b> .		
e					written determination from			Туре I, Туре	II, Type III	
					nally integrated supportir	ng organiz	ation.			
f		er the number of								
<u></u> g		i) Name of suppo		n about the supporte (ii) EIN	d organization(s). (iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount o	fmonetary	(vi) Amount of other
	```	organization		(,	(described on lines 1-10	in your governi		support (see in		support (see instructions)
					above (see instructions))	Yes	No			
<b>T</b> - 2	-1									 
Tota	ai									

# UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.

42-6062055 Page 2

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 failed to qualify under Part III. If the organization failed to qualify under Part III.

fails to qualify under the tests listed below, please complete Part III.)
---------------------------------------------------------------------------

Schedule A (Form 990) 2023

Calendar year (of fical year beginning in difficult year (of local year) (local year) (loca	See	ction A. Public Support						
membership fees received. (Do not include any Pursular) amatine 1       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         2 Tax revenues levied for the organization's benefit and ther pad to or expended in its behalf       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1	Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
include any 'unusual grants.')       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         2 Tax revenues levied for the organization in the organization in the organization without charge in the organization included on line 1 that seceeds 2% of the amount shown on line 11.       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that seceeds 2% of the amount shown on line 11.       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         Calcular year (of fical year beginning in)         7 Amounts from line 4         2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         Calcular year (of fical year beginning in)       7       Amounts from line 4.       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         Section B. Total Support         Calcular year (of fical year beginning in)       7       7.246.	1	Gifts, grants, contributions, and						
2       Tar versues levid for the organization is behalf         3       The value of services or facilities turnished by a governmental into the organization without charge         4       Tatal. Add lines 1 through 3         5       The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 thraceseds 2% of the amount shown on line 11, column (f)       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         5       The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 thaceseds 2% of the amount shown on line 11, column (f)       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         6       Public support.       Eactions form itersels       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         6       Gross income from itersels verse beginning in organization of total support.       Eactive second the second 2% of the amount shown on line 14.       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         7       Amounts from timesels       Eactive second the second 2% of the amount shown on line 14.       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         9		membership fees received. (Do not						
icreation's benefit and either paid to or expended on its behalf		include any "unusual grants.")	2484351.	2758329.	2368568.	2547325.	2234165.	12392738.
are expended on its behalf	2	Tax revenues levied for the organ-						
3       The value of services or facilities furnished by a governmental unit to the organization without charge         4       Total. Add lines 1 through 3         5       The portion of total contributions by each person (other than a governmental unit to publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         6       Public support contactines from the 4.         841.,152.         6       Public support contactines from the 4.         11551586.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (f) Total         7       Amount shown on line 11, column (in 4       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8       Gross income from line 4       22, 911.       10, 039.       7, 246.       11, 396.       26, 160.       77, 752.         9       Net income from unrelated business activities, whether or not the business is regularly carried on 10       12       -58, 556.         10       Other income. Do not include gain or loss from thestel of capital asset (Explain in Part V).       12       -58, 556.         12       Gross receipts from related activities, etc. (see instructi		ization's benefit and either paid to						
time organization without charge       2484351. 2758329. 2368568. 2547325. 2234165. 12392738.         5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included and governmental unit or publicly supported organization included and that exceeds 2% of the amount shown on line 11, column (f)       2484351. 2758329. 2368568. 2547325. 2234165. 12392738.         6 Public support. Subject inc 3 from the 4       115515866.         Section B. Total Support       2484351. 2758329. 2368568. 2547325. 2234165. 12392738.         8 Gross income from interest, divided support.       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         9 Net income from interest, oryalities, and income from interest, oryalities, and income from interest, oryalities, and income from interest, oryalities, second third, fourth, or fifth tax years a section 501(c)(3)       77,752.         9 Net income from interest oryalities, and income the organization's first, second, third, fourth, or fifth tax years as section 501(c)(3)       12       -58,556.         13 First Spears. If the Form 900 is for the organization's first, second, third, fourth, or fifth tax years as a section 501(c)(3)       141       92.6.3       9         14 Public support test- 2023. If the organization of dubles A part II, interest       141       92.6.3       9         15 Public support percentage form 2022 Schedule, A, Part II, interest       141       92.6.3       9       9         <		or expended on its behalf						
the organization without charge       2484351.2758329.2368568.2547325.2234165.12392738.         the portion of total carchibutions by each person (ofter than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11. column (i)       2484351.2758329.2368568.2547325.2234165.12392738.         Section B. Total Support       841,152.       841,152.         CaleBaryvar (or fisel year beginning in)       (a) 2019       (b) 2020       (c) 2021       (c) 2022       (c) 2023       (f) Total         Y Amounts from line 4       2484351.2758329.2368568.2547325.2234165.12392738.         8 Gross income from line 4       2484351.2758329.2368568.2547325.2234165.12392738.         9 Total support. Seitactive 5 tom line 4.       2484351.2758329.2368568.2547325.2234165.12392738.         9 Coss income from line 4       2484351.2758329.2368568.2547325.2234165.12392738.         9 Coss income from line 4       22.911.10,039.7,246.11,396.26,160.777,752.         9 Net income from unrelated business a activities, whether or not the business is regularly carried on 10       12.258329.2368568.2547325.2234165.12392738.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part V).       12.556.56.556.556.556.556.556.556.556.556	3	The value of services or facilities						
4       Total. Add lines 1 through 3       23683568.       2547325.       2234165.       12392738.         5       The portion of total contributions by each presson (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)       841,152.         6       Public support. Submettires from line 4.       11551586.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         Clenker year (of fiscal year beginning in)       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7       Amounts from line 4       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         8       Gross income from interest, dividends, payments received on securities loans, ents, royatiles, and income from similar sources as activities, whether or not the business is regularly carried on or 101       22, 911.       10, 039.       7, 246.       11, 396.       26, 160.       77, 752.         9       Net income from interest, dividing at through 10       124       -58, 556.       12470490.         11       Total support. Add lines 7 through 10       12       -58, 556.       12       -58, 556.         12       Gross recipits from related activities, etc. (se		furnished by a governmental unit to						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (i)       841,152.         6 Public support, Suttext the stom line 4       11551586.         Section B. Total Support       11551586.         Section B. Total Support       11551586.         Section B. Total Support       2484351.       2758329.         2368568.       2547325.       2234165.       12392738.         8 Gross income from interest, dividends, paymeths received on securities cans, rents, royatiles, and income from similar sources activities, whether or not the business is regularly carried on to Other income Do not include gain or loss from the sale of capital asset (Explain in Part VI)       12,2470490.         11 Total support. Add lines 7 through 10       12,2470490.       12,470490.         12 orses receipts from related activities, stc. (see instructions)       12       -58,556.         13 First years. If the Form 980 is for the organization first, second, third, fourth, or fifth tax year as a section 507(c)(3) organization, check this box and stop here.       14         9 Public support percentage form 2022 Schedule A, Part II, line 14       14       92.63 3/6 3/6 3/6 3/6 3/6 3/6 3/6 3/6 3/6 3		the organization without charge						
by each person (other than a governmental unit or publicly supported organization) nolloided on line 1 that exceeds 2% of the amount shown on line 11, column (f) 841,152. 6 Public support. Subtractine 5 term in 4 1284351. 2758329. 2368568. 2547325. 2234165. 12392738. Section B. Total Support Calendar year (or fiscal year beginning in) 7 Amounts from line 4 284351. 2758329. 2368568. 2547325. 2234165. 12392738. B Gross income from interest, dividends, payments received on securities loans, rents, royatiles, and line of the single of the organization interest, dividends, payments received on securities loans, rents, royatiles, and income from times success a stativities, whether or not the business is regularly carried on the business is regularly carried on the business is regularly carried on the sale of capital assests (Explain in Part VI). 11 Total support. Add lines 7 through 10 124704490. 12 Gross receipts from related activities, etc. (see instructions) 12 -58,556. 5ection C. Computation of Public Support Percentage 14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) 14 92.63 % 15 95.07 % 15 Support percentage for 2023 (line 6, column (f), divided by line 14, column (fi) 14 92.63 % 15 95.07 % 16 33 1/3% support test - 2023. If the organization did not check ta box on line 13 in 13, and line 14 is 33 1/3% or more, check this box and stop here. 17 10% -fact-and-circumstances test - 2023. If the organization did not check a box on line 13 in 13, fac, or 16b, and line 14 is 10% or more, and if the organization did not check ta box on line 13, fac, or 16b, and line 14 is 10% or more, and if the organization did not check ta box on line 13, fac, or 16b, and line 14 is 10% or more, and if the organization did not check ta box on line 13, fac, or 16b, and line 14 is 10% or more, and if the organization did not check ta box on line 13, fac, or 16b, and line 14 is 10% or more, and if the organization did not check ta box on line 13, fac, or 16b, and line 14 is 10% or	4	Total. Add lines 1 through 3	2484351.	2758329.	2368568.	2547325.	2234165.	12392738.
governmental unit or publicly supported organization) included on line 11 that exceeds 296 of the amount shown on line 11, column (f)       841,152.         6 Public support.       841,152.         7 Amounts from line 4       11551586.         Section B. Total Support       2484351.         Calendar year (of fiscal year beginning in)       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7 Amounts from line 4       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8 Gross income from interest, dividends, payments received on securities loans, rents, royatles, and income from unrelated business activities, whether or not the business is regularly carried on in o Other income. Do not include gain or loses from the sate of capital assets (Explain in Part VI)       22, 911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income Do not include gain or loses from treiated activities, etc. (see instructions)       12       -58,556.         13 First 5 years. If 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.       14       92.63.95         14 Public support percentage from 2022 Schedule A, Part II, line 14.       15       95.07.95         15 Public support percentage from 2022 Schedule A, Part II, line 14.       15       95.07.95	5	The portion of total contributions						
supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)       841,152.         6 Public support. Substatine 3 them is 4.       11551586.         Section B. Total Support       11551586.         Gross income from interest, dividends, payments received on securities loans, rents, royalites, and income from similar sources       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain Part VI).       12       -58,556.         13 First 5 years. If the Form 990 is for the organization 5 first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       12       -58,556.         Section C. Computation of Public Support Percentage       14       95.07.       9         16 a 31 /3% support test - 2023. If the organization first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.       15         9 10 /3 /3% support test - 2023. If the organization did not check a box on line 13, nal line 14 is 33		by each person (other than a						
on line 1 that exceeds 2% of the amount shown on line 11, column (f)       841,152.         6 Public support.       11551586.         Section B. Total Support       11551586.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7 Amounts from line 4       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8 Gross income from interest, dividends, payments received on securities loans, enets, royalties, and income from similar sources.       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income from include gain or loss from the sale of capital assets (Explain in Part VI)       12,2470490.       12,2470490.       12,-58,556.         11 Total support. Add lines 7 through 10       12,-58,556.       12,2470490.       12,-58,556.         15 First 5 years. If the Form elated activities, etc. (see instructions)       12,-58,556.       15,95.07.%       %         16 Aubic support percentage from 2022 Schedule A, Part II, line 14       14,92.63.3%       95.07.%       %         17 10% - facts-and-circumstances test. 2023. If the organization did not check a box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17 10% - facts-and-circumstances test.		governmental unit or publicly						
amount shown on line 11, column (f)       841,152.         6       Public support. Surfact time 5 from line 4.       11551586.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7       Amounts from line 4.       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8       Grass income from interest, dividends, payments received on securities loans, rents, royatiles, and income from unrelated business activities, whether or not the business is regularly carried on not not folding an or loss from the sale of capital assets (Explain in Part V).       22, 911.       10, 039.       7, 246.       11, 396.       26, 160.       77, 752.         9       Net income from unrelated business activities, whether or not the business is regularly carried on not not include gain or loss from the sale of capital assets (Explain in Part V).       10       12, -58, 556.         11       Total support. All lines 7 through 10       12       -58, 5556.         12       Computation of Public Support Percentage       14       92.6.3 %.         14       Public support percentage from 2022 (line 6, column (f), divided by line 11, column (f))       14       92.6.3 %.         15       Public support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization		supported organization) included						
column (f)       841,152.         6 Public support. Subtract time 5 from line 4.       11551586.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         Calendar year (or fiscal year beginning in)       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8 Gross income from interest,       dividends, payments received on securities loans, rents, royalties, and income from writeled business activities, whether or not the business is regularly carried on of the business is regularly carried on of the sale of capital assets (Explain in Part VI.)       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       12       -58,556.       12       -58,556.         13 First Syears. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14       92.63.95         14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)       14       92.63.95       9         15 Dybic support percentage for 2023. If the organization duin to check the box on line 13, and line 15 is 33 1/3% or more, ch		on line 1 that exceeds 2% of the						
6 Public support.       11551586.         Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7 Amounts from line 4       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8 Gross income from interest, dividends, paymeths received on securities loans, rents, royatiles, and income from similar sources       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       11       12       -58,556.         12 Gross receipts from related activities, etc. (see instructions)       12       -58,556.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here         4 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63.9%         15 Public support test - 2023. If the organization di not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization di not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization di not check the box on line 13, rol 6a, and line 14 is 33 1/3% or more, check this box and stop here. The organization di not check the box on line 13, rol 6a, and lin		amount shown on line 11,						
Section B. Total Support       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7 Amounts from line 4       2484351.       2758329.       2368568.       2547325.       2234165.12392738.         8 Gross income from interest, dividends, payments received on securities loans, ernets, royatiles, and income from sinterest, dividends, payments received on securities loans, ernets, royatiles, and income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         11 Total support. Add lines Through 10 organization, check this box and stop here.       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         12 Gross receipts from related activities, etc. (see instructions)       12       -58,556.         13 First Syears. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a sector 501(c)(3) organization, check this box and stop here.         24 Public support percentage from 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63.%         15 Public support percentage from 2023. If the organization did not check the box on line 13, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       Im         163 31/3% support t		column (f)						841,152.
Calendar year (or fiscal year beginning in)       (a) 2019       (b) 2020       (c) 2021       (d) 2022       (e) 2023       (f) Total         7 Amounts from line 4       2484351.       2758329.       2368568.       2547325.       2234165.       12392738.         8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       12       -58,556.         11 Total support. Add lines 7 through 10       12       -58,556.         12 Gross receipts from related activities, etc. (see instructions)       12       -58,556.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14         14 Public support percentage form 2022 Schedule A, Part II, line 14       14       95.07 %         15 Public support test - 2023. If the organization did not check ta box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         16 33 1/3% support test - 2023. If the organization did not check ta box on line 13, r18a, or 18b, and line 14 is 10% or more, and if the organization qualifies	6	Public support. Subtract line 5 from line 4.						11551586.
7 Amounts from line 4       2484351.2758329.2368568.2547325.2234165.12392738.         8 Gross income from interest, dividends, payments received on securities loans, rents, royatiles, and income from similar sources       22,911.10,039.7,246.11,396.26,160.77,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on	See	ction B. Total Support						
8       Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9       Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       12       -58,556.         12       Gross receipts from related activities, etc. (see instructions)       12       -58,556.         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       2         14       Public support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         15       95.07       %         16       31 1/3% support test - 2023. If the organization did not check ab ox on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         17a       10% -facts-and-circumstances test - 2023. If the organization did not check abox on line 13, 16a, or 16b, and line 14 is 10% or more	Cale	ndar year (or fiscal year beginning in)					(e) 2023	
dividends, payments received on securities loans, rents, royalties, and income from similar sources       22,911. 10,039. 7,246. 11,396. 26,160. 777,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on or loss from the sale of capital assets (Explain in Part VI.)       11,396. 26,160. 777,752.         10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       12,470490.         11 Total support. Add lines 7 through 10       12,2470490.         12 Gross receipts from related activities, etc. (see instructions)       12         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14         9 Public support percentage from 2022 Schedule A, Part II, line 14       15       95.07 %         16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization meets the facts-and-circumstances test. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization did not check a box on line 13, 16a, o	7	Amounts from line 4	2484351.	2758329.	2368568.	2547325.	2234165.	12392738.
securities loans, rents, royalties, and income from similar sources       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on       10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       12       -58,556.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14       92.63.9% 95.07.9%         14 Public support percentage form 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63.9% 95.07.9%         16 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization meets the facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization q	8	Gross income from interest,						
and income from similar sources       22,911.       10,039.       7,246.       11,396.       26,160.       77,752.         9 Net income from unrelated business activities, whether or not the business is regularly carried on       10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       11       Total support. Add lines 7 through 10       12       -58,556.         17 Total support. Add lines 7 through 10       12       -58,556.       12       -58,556.         18 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here       14       92.63.%         14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63.%       15       95.07.%         16 33 1/3% support test - 2022. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X       X         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in		dividends, payments received on						
9 Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       11 Total support. Add lines 7 through 10         11 Total support. Add lines 7 through 10       12 -58, 556.         12 Gross receipts from related activities, etc. (see instructions)       12 -58, 556.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here         24 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14 92.63 % 15 92.07 %         16 Ba 31 /3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         17 a 10% -Facts-and-circumstances test - 2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization         17a 10% -Facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization did not check a		securities loans, rents, royalties,						
activities, whether or not the business is regularly carried on		and income from similar sources	22,911.	10,039.	7,246.	11,396.	26,160.	77,752.
business is regularly carried on	9	Net income from unrelated business						
10       Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)       Image: transmission of the sale of capital assets (Explain in Part VI.)         11       Total support. Add lines 7 through 10       Image: transmission of the sale of capital assets (Explain in Part VI.)       Image: transmission of the sale of capital assets (Explain in Part VI.)         12       Gross receipts from related activities, etc. (see instructions)       Image: transmission of the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here         Section C. Computation of Public Support Percentage         14       Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       Image: transmission of the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       Image: transmission organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       Image: transmission organization meets the facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-an		activities, whether or not the						
or loss from the sale of capital assets (Explain in Part VI.)       12470490.         11 Total support. Add lines 7 through 10       12470490.         12 Gross receipts from related activities, etc. (see instructions)       12 -58,556.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here       14 92.63 %         14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14 92.63 %         15 Public support percentage form 2022 Schedule A, Part II, line 14       95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a		business is regularly carried on						
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11 Total support. Add lines 7 through 10       12470490.         12 Gross receipts from related activities, etc. (see instructions)       12 -58,556.         13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here         Section C. Computation of Public Support Percentage       14 92.63 %         14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14 92.63 %         15 Public support percentage from 2022 Schedule A, Part II, line 14       15 95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and stop here. The organization qualifies as a publicly supported organization       IX         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization       IX         17a 10% -facts-and-circumstances test. The organization did not check a box on line 13, 16a, 16b, or 17a, an		or loss from the sale of capital						
12       Gross receipts from related activities, etc. (see instructions)       12       -58,556.         13       First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)       organization, check this box and stop here         14       Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63 %         15       Public support percentage from 2022 Schedule A, Part II, line 14       15       95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         17a       10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization qualifies as a publicly supported organization       IX         17a       10% -facts-and-circumstances test. The organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization       IX         10% -facts-and-circumstances test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization       IX <tr< td=""><td></td><td>assets (Explain in Part VI.)</td><td></td><td></td><td></td><td></td><td></td><td></td></tr<>		assets (Explain in Part VI.)						
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3)         organization, check this box and stop here         Section C. Computation of Public Support Percentage         14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63 %         15 Public support percentage from 2022 Schedule A, Part II, line 14       15       95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       IX         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization         10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization m	11	Total support. Add lines 7 through 10						12470490.
organization, check this box and stop here       Image: Section C. Computation of Public Support Percentage         14       Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       Image:	12	Gross receipts from related activities,	etc. (see instructio	ons)			12	-58,556.
Section C. Computation of Public Support Percentage         14       Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63 %         15       Public support percentage from 2022 Schedule A, Part II, line 14       15       95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and and stop here. The organization qualifies as a publicly supported organization       Image: Column (f)         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization dualifies as a publicly supported organization         17a 10% -facts-and-circumstances test. The organization dualifies as a publicly supported organization       Image: Column test test is 10% or more, and if the organization meets the facts-and-circums	13	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, f	ourth, or fifth tax y	/ear as a section 5	01(c)(3)	
14       Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))       14       92.63 %         15       Public support percentage from 2022 Schedule A, Part II, line 14       15       95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       Image: Column (f)         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization         b 10% -facts-and-circumstances test - 2022. If the organization qualifies as a publicly supported organization       Image: Column (f)         b 10% -facts-and-circumstances test. The organization qualifies as a publicly supported organization       Image: Column (f)         b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the								
15       Public support percentage from 2022 Schedule A, Part II, line 14       15       95.07 %         16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization       X         17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization       D         b 10% -facts-and-circumstances test - 2022. If the organization qualifies as a publicly supported organization       D         b 10% -facts-and-circumstances test. The organization qualifies as a publicly supported organization       D         b 10% -facts-and-circumstances test. The organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization       D         18       Private foundation. If the organiza	See	ction C. Computation of Publi	ic Support Per	centage				
<ul> <li>16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</li> </ul>	14	Public support percentage for 2023 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	
<ul> <li>stop here. The organization qualifies as a publicly supported organization</li> <li>b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization</li> <li>17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>b 10% -facts-and-circumstances test - 2022. If the organization qualifies as a publicly supported organization</li> <li>b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</li> </ul>								
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<ul> <li>17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.</li> <li>B Private foundation. If the organization did not check a box on line 13, 16a, 17a, or 17b, check this box and see instructions</li> </ul>	b	<b>33 1/3% support test - 2022.</b> If the o	organization did no	t check a box on l	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box
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<ul> <li>meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions</li> </ul>	17a	10% -facts-and-circumstances test	- 2023. If the org	anization did not c	heck a box on line	e 13, 16a, or 16b, a	nd line 14 is 10%	or more,
<ul> <li>b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization</li> <li>18 Private foundation. If the organization did not check a box on line 13, 16a, 17a, or 17b, check this box and see instructions</li> </ul>		and if the organization meets the fact	s-and-circumstance	es test, check this	box and stop he	<b>re.</b> Explain in Part	VI how the organiz	ation
more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization       Image: Comparization in Part VI how the organization in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization         18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		meets the facts-and-circumstances te	est. The organizatio	n qualifies as a pu	blicly supported o	rganization		
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18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		-						
	18	Private foundation. If the organization	on did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box a		

Schedule A (Form 990) 2023

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COUNTIE	ES, I	ENC .	•		

Schedule A (Form 990) 2023

#### 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.)

Sec	ction A. Public Support		1		-		
Cale	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, 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 bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization'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						
	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
b	3 received from disqualified persons Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
Sec	ction B. Total Support		1		-		
	ndar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) 2023	i (f) Total
	Amounts from line 6 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						
	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	ne organization's fi	irst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) organ	ization,
							<u></u>
	ction C. Computation of Public					1 1	
	Public support percentage for 2023 (		•	column (f))		15	%
	Public support percentage from 2022					16	%
	tion D. Computation of Inves		•			. <b>_</b>	
17	1 0		'			17	%
18	Investment income percentage from		•	an line 14 and lin		18	%
198	<b>33 1/3% support tests - 2023.</b> If the						
ь	more than 33 1/3%, check this box as <b>33 1/3% support tests - 2022.</b> If the						
L.	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
	12-21-23			, <u>.</u> , short			lule A (Form 990) 2023

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## UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.

42-6062055 Page 4

1

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Yes No

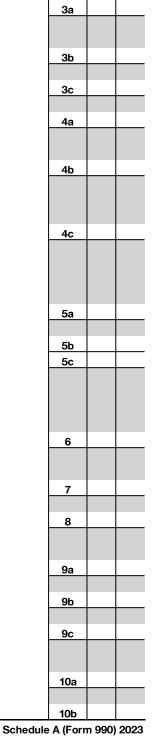
## Schedule A (Form 990) 2023 COUI

(Complete only if you checked a box on line 12 of 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in 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.)

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	edule A (Form 990) 2023 COUNTIES, INC. 4	2-606205	D Pa	age <b>5</b>
Pa	rt IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
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 more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offic			
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one support organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among to	he		
2	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. Did the organization operate for the benefit of any supported organization other than the supported	1		
	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,	2		
Sec	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations			
	tion of type in oupporting organizatione			
			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		100	
•				
	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 on line 2, above, did the organization's supported organizations have a			
•	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
<u></u>	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instru	ctions).		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
c	The organization supported a governmental entity. <i>Describe in</i> <b>Part VI</b> how you supported a governmental entity	(coo instructio		
	Activities Test. Answer lines 2a and 2b below.	เจยย แกรแนะเไปไ		No
2			Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			

- the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

**a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "No" provide details in **Part VI.** 

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 332025 12-21-23

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3b | | Schedule A (Form 990) 2023

2a

2b

3a

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	UNITED WAY OF JOHNSON &	WASE	IINGTON	
Sche	edule A (Form 990) 2023 COUNTIES, INC.			42-6062055 Page 6
Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting	y Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 ( <i>explain</i>	in Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complet	e 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):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
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	/ integra	ted Type III supporting o	rganization (see

instructions).

Schedule A (Form 990) 2023

_	dule A (Form 990) 2023 COUNTIES, INC			4	2-6062055 Page 7
Par	t V Type III Non-Functionally Integrated 509(	a)(3) Supporting Orga	nizations (continu	ied)	
Secti	on D - Distributions				Current Year
_1	Amounts paid to supported organizations to accomplish exer	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 organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2023 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		1	10	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2023	IS	(iii) Distributable Amount for 2023
1	Distributable amount for 2023 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2023 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2023				
a	From 2018				
b	From 2019				
c	From 2020				
d	From 2021				
e	From 2022				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2023 distributable amount				
i	Carryover from 2018 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2023 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2023 distributable amount				
C	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2023, 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 2023. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2024. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
<u>a</u>	Excess from 2019				
b	Excess from 2020				
C	Excess from 2021				
d	Excess from 2022				
е	Excess from 2023				

Schedule A (Form 990) 2023

Schedule A	(Form 990) 2023	UNITED WAY COUNTIES,			WASHINGTO	N 42-6062055 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1, line 1; Part IV, Section D,	mation. Provide the , 2, 3b, 3c, 4b, 4c, 5a, lines 2 and 3; Part IV,	explar 6, 9a, 9 Sectior	nations required by 9b, 9c, 11a, 11b, a n E, lines 1c, 2a, 2t	nd 11c; Part IV, Sect o, 3a, and 3b; Part V	II, line 17a or 17b; Part III, line 12; tion B, lines 1 and 2; Part IV, Section C, line 1; Part V, Section B, line 1e; Part V, r any additional information.
						0-1- 4/1- A /F 000) 0000
332028 12-21-2	23			20		Schedule A (Form 990) 2023

	•		
<b>.</b>		$\langle \mathbf{o} \rangle$	

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### General Rule

📙 For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \_\_\_\_\_\_\$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

#### Schedule B (Form 990) (2023)

#### LHA 323451 12-26-23

Filers of:	Section:
Form 990 or 990-EZ	X 501(c)( 3 ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation

## Attach to Form 990, 990-EZ, or 990-PF.

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

Schedule of Contributors

OMB No. 1545-0047

## 2023

Employer identification number

42-6062055

\*\* PUBLIC DISCLOSURE COPY \*\*

## Schedule B

Department of the Treasury

Internal Revenue Service

Ν	lame	of	the	organiza	tion	
						_

Organization type (check one):

UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.

501(c)(3) taxable private foundation

Check if your organization is covered by the General Rule or a Special Rule.

Schedule B (Form 990) (2023)	Page 2
Name of organization	Employer identification number
UNITED WAY OF JOHNSON & WASHINGTON	
COUNTIES, INC.	42-6062055
Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.	

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$103,039.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$85,674.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	· · · · ·	\$56,832.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$52,412.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u> </u>		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>6</u> <u>323452 12-26-23</u>		\$\$	Person X Payroll (Complete Part II for noncash contributions.) Schedule B (Form 990) (2023)

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Schedule B (Form 990) (2023)

09060822 131839 A518433

Schedule B (Form 990) (2023)					
Name of organization					
UNITED WAY OF JOHNSON & WASHINGTON					
COUNTIES, INC.					


Employer identification number

Page 2

12-6062055

#### Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. Part I (d) (a) (b) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 7 X Person Payroll 68,608. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 8 X Person Payroll 62,453. Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 9 X Person Payroll 200,137. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 10 X Person Payroll 74,809. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 11 X Person Payroll 60,614. Noncash (Complete Part II for noncash contributions.) (b) (c) (d) (a) **Total contributions** No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash \$ (Complete Part II for noncash contributions.)

Schedule B (Form 990) (2023)

-23

09060822 131839 A518433

23 2023.04010 UNITED WAY OF JOHNSON & W A5184331

323452 12-26-23

	3 (Form 990) (2023)		Page
Name of o			Employer identification number
	D WAY OF JOHNSON & WASHINGTON IES, INC.		42-6062055
Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed	
(a)		(c)	
No. from	(b)	FMV (or estimate	) (d)
from Part I	Description of noncash property given	(See instructions.	Date received
		\$	
(-)			
(a) No.	(b)	(c)	(4)
from	(5) Description of noncash property given	FMV (or estimate	
Part I		(See instructions.	)
		\$	
(a)			
No.	(b)	(c)	, (d)
from	Description of noncash property given	FMV (or estimate (See instructions.	
Part I			,
		—	
		—	
		_\$	
(a)		(c)	
No. from	(b)	FMV (or estimate	) (d)
Part I	Description of noncash property given	(See instructions.	Date received
		\$	
(a)			
No.	(b)	(c)	, (d)
from	Description of noncash property given	FMV (or estimate (See instructions.	Data received
Part I			,
		—	
		—	
		_\$	
		Ť	
(a)		(c)	
No.	(b)	(C) FMV (or estimate	) (d)
from Part I	Description of noncash property given	(See instructions.	
		—	
		\$	

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Schedule B (Form 990) (2023)

Page 3

Schedule	B (Form 990) (2023)			Page <b>4</b>			
	organization			Employer identification number			
	D WAY OF JOHNSON & WASH	INGTON					
Part III	IES, INC. Exclusively religious, charitable, etc., contribution	ons to organizations described in sec	tion 501(c)(7), (8), or (10) the	$\frac{42-6062055}{1000}$			
· are m	from any one contributor. Complete columns (a)	through (e) and the following line entry	V. For organizations				
	completing Part III, enter the total of exclusively religious, or Use duplicate copies of Part III if additional s	space is needed.	SS for the year. (Enter this info. on	cce.) Ψ			
(a) No. from				visition of house with in house			
Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
		(e) Transfer of gift	I				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Descr	ription of how gift is held			
Part I				iption of now girt is neid			
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relationship of tran	sferor to transferee			
			1				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
Part I				· · ·			
		(e) Transfer of gift					
	Transferee's name, address, a	nd <b>7I</b> P + 4	Relationship of tran	sferor to transferee			
		[					
(a) No. from							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desci	ription of how gift is held			
		e) Transfer of gift					
		(e) manaler of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of tran	sferor to transferee			
323454 12-26	l 6-23	I		Schedule B (Form 990) (2023)			
		25		· ····································			

### 09060822 131839 A518433

<sup>2023.04010</sup> UNITED WAY OF JOHNSON & W A5184331

SC	SCHEDULE D Supplemental Financial Statements							
	n 990)	Complete if the orga	nization answered "Yes" on Form 990,	2023				
Depart	ment of the Treasury		, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. .ttach to Form 990.	Open to Public				
Interna	I Revenue Service		0 for instructions and the latest information					
Nam	e of the organization		SON & WASHINGTON	Employer identification number 42-6062055				
Pa	rt I Organizati	COUNTIES, INC.	d Funds or Other Similar Funds or	Accounts Complete if the				
I UI		answered "Yes" on Form 990, Part IV, lin						
			(a) Donor advised funds	(b) Funds and other accounts				
1	Total number at end	of year						
2		contributions to (during year)						
3		rants from (during year)						
4	Aggregate value at e	nd of year						
5	-		writing that the assets held in donor advised					
			exclusive legal control?					
6	•		dvisors in writing that grant funds can be us	•				
			r donor advisor, or for any other purpose cor					
Pa			ganization answered "Yes" on Form 990, Pa					
1		vation easements held by the organization						
•		f land for public use (for example, recrea	11 57	historically important land area				
	Protection of r			certified historic structure				
	Preservation o	f open space						
2	Complete lines 2a th	rough 2d if the organization held a qualif	ied conservation contribution in the form of	a conservation easement on the last				
	day of the tax year.			Held at the End of the Tax Year				
а	Total number of con	servation easements		2a				
b	•							
С			ucture included on line 2a	<u>2c</u>				
d		tion easements included on line 2c acqu	• • •					
•			eased, extinguished, or terminated by the or					
3	year	tion easements mouned, transferred, re-	eased, extinguished, or terminated by the or	ganization during the tax				
4		 here property subject to conservation eas	sement is located					
5			iodic monitoring, inspection, handling of					
		cement of the conservation easements it		Yes No				
6	Staff and volunteer h	nours devoted to monitoring, inspecting,	handling of violations, and enforcing conser-	vation easements during the year				
		_						
7	Amount of expenses	incurred in monitoring, inspecting, hand	lling of violations, and enforcing conservation	n easements during the year				
•		<u> </u>						
8		-	satisfy the requirements of section 170(h)(4)					
9	and section 170(h)(4)		on easements in its revenue and expense sta					
5		•	note to the organization's financial statement					
		inting for conservation easements.						
Pa	rt III Organizati	ions Maintaining Collections of	Art, Historical Treasures, or Othe	er Similar Assets.				
	Complete if th	ne organization answered "Yes" on Form	990, Part IV, line 8.					
1a	If the organization el	ected, as permitted under FASB ASC 95	8, not to report in its revenue statement and	balance sheet works				
	of art, historical treas	sures, or other similar assets held for pub	olic exhibition, education, or research in furth	nerance of public				
			ncial statements that describes these items.					
b	-		8, to report in its revenue statement and bal					
			exhibition, education, or research in further	ance of public service,				
	-	amounts relating to these items.		\$				
	(ii) Assets included	•						
2			asures, or other similar assets for financial g					
		ts required to be reported under FASB A						
а	-			\$				
b	Assets included in F	orm 990, Part X						
LHA	For Paperwork Red	luction Act Notice, see the Instructions	s for Form 990.	Schedule D (Form 990) 2023				
33205	1 09-28-23		26					
			26					

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		WAY OF JOH	NSON	& WASI	HINGTON			•• ••			•
	dule D (Form 990) 2023 COUNTIE		4 11:44				4	12-60	62055	Pa	ige <b>2</b>
	t III Organizations Maintaining C								(continu	ied)	
3	Using the organization's acquisition, accession collection items (check all that apply).	on, and other record	ls, check	any of the f	following that	make sigi	nificant u	se of its			
а	Public exhibition	(	1 🗌 I	Loan or exc	hange progra	m					
b	Scholarly research	e	• 🗌 (	Other							
с	Preservation for future generations										
4	Provide a description of the organization's co	ellections and explai	n how the	ey further th	ne organizatio	n's exemp	ot purpos	e in Part	XIII.		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma								Yes		No
Par	t IV Escrow and Custodial Arran								_		
	reported an amount on Form 990, Par			5			,	,			
1a	Is the organization an agent, trustee, custodi	an. or other interme	diary for	contribution	s or other ass	ets not in	cluded				
	on Form 990, Part X?	•							Yes		No
h	If "Yes," explain the arrangement in Part XIII							∟			110
			nowing a	2010.					Amount		
~	Beginning balance						1c				
	Additions during the year						1d				
-	Distributions during the year						1e				
t	Ending balance						1f		7 22		
	Did the organization include an amount on Fe						r?	L	Yes		No
Par	If "Yes," explain the arrangement in Part XIII.										
Fai	<b>t V Endowment Funds</b> Complete if							ooro book	(a) Four	looro k	
		(a) Current year	(D) P	rior year	(c) Two years	S DACK (C	<b>a)</b> Three y	ears dack	<b>(e)</b> Four y	lears i	Jack
	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										
g	End of year balance										
2	Provide the estimated percentage of the curr	ent year end balanc	e (line 1g	, column (a)	)) held as:						
а	Board designated or quasi-endowment	-	%		-						
b	Permanent endowment	%									
с		%									
	The percentages on lines 2a, 2b, and 2c show	uld equal 100%									
3a	Are there endowment funds not in the posse		ation that	rare held ar	nd administer	ed for the					
	organization by:									/es	No
	(i) Unrelated organizations?								3a(i)	x	
									3a(ii)		
h	If "Yes" on line 3a(ii), are the related organization of the second seco								3b	-	
1	Describe in Part XIII the intended uses of the								50		
Par	t VI Land, Buildings, and Equipm	ent		unus.							
	Complete if the organization answere		) Part IV	line 11a S	ee Form 990	Part X lir	ne 10				
			ľ					4			
	Description of property	(a) Cost or o basis (investr		• •	or other (other)	• •	cumulate reciation	u	(d) Book	value	,
	Land		nong	04315		uepi	colation				
	Land				1 0 0 0		1 00				0
	Buildings				4,008.		$\frac{4,00}{2}$		1 /	0 0	$\frac{0}{6}$
	Leasehold improvements			10	7,770.		92,87	4.	14	,89	.0
	Equipment										
	Other										
Tota	. Add lines 1a through 1e. (Column (d) must e	<u>qual Form 990, Part</u>	<u>X, line 10</u>	Dc, column	<u>(B))</u>				14	,89	16.
							9	Schedule	D (Form	990)	2023

332052 09-28-23

UNITED	WAY	OF	JOHNSON	&	WASHINGTON
COLINITI	הם ו	INC			

	(Form 990) 2023	COUNTIES, I	NC.	4	2-6062055 Page <b>3</b>
Part VII		Other Securities			
				11b. See Form 990, Part X, line 12.	
(a) Descrip	tion of security or cate	GOTY (including name of security)	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1) Financia	al derivatives				
(2) Closely	held equity interests				
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (	b) must equal Form 990	0, Part X, line 12, col. (B))			
Part VIII	Investments -	Program Related.			
	Complete if the org	anization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.	
	(a) Description of	investment	(b) Book value	(c) Method of valuation: Cost or e	nd-of-year market value
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Part IX	Other Assets		on Form 990, Part IV, line Description	11d. See Form 990, Part X, line 15.	(b) Book value
(1) BE	NEFICIAL I	NTEREST IN AS	SETS HELD BY C	COMMUNITY	
(2) FC	UNDATION				411,882.
(3) RI	GHT OF USE	ASSET, NET			46,757.
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Colu	ımn (b) must equal Fo	orm 990, Part X, line 15, co	ol. (B))		458,639.
Part X	Other Liabilitie	es			
	Complete if the org	anization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 2	5.
1.	<b>(a)</b> D	escription of liability			(b) Book value
(1) Fed	leral income taxes				
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
	imn (h) must equal Er	orm 990 Part X line 25 or	(B)		
				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 .... 🔀

Schedule D (Form 990) 2023

	UNITED WAY OF JOHNSON & WAS	SHINGTO	N							
Sche	dule D (Form 990) 2023 COUNTIES, INC.			42-	6062055	Page 4				
Par	Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return									
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.									
1	Total revenue, gains, and other support per audited financial statements			1	1,990	,612.				
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	41,567.							
с	Recoveries of prior year grants									
d	Other (Describe in Part XIII.)	2d	57,135.							
е	Add lines 2a through 2d			2e	98	<u>,702.</u>				
3	Subtract line 2e from line 1			3	1,891	<u>,910.</u>				
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:									
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a								
b	Other (Describe in Part XIII.)	4b	255,031.							
с	Add lines 4a and 4b			4c		<u>,031.</u>				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	2,146	<u>,941.</u>				
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	ents With E	Expenses per F	Retur	n					
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.									
1	Total expenses and losses per audited financial statements			1	2,286	<u>,296.</u>				
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:									
а	Donated services and use of facilities	2a	41,567.							
b	Prior year adjustments	2b								
с	Other losses									
d	Other (Describe in Part XIII.)	2d								
е	Add lines 2a through 2d			2e		<u>,567.</u>				
3	Subtract line 2e from line 1			3	2,244	<u>,729.</u>				
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:									
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a								
b	Other (Describe in Part XIII.)	4b	255,031.							
с	Add lines 4a and 4b			4c		,031.				
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	2,499	,760.				
Pa	t 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 V, LINE 4:

THE	GEN	ERAI	J PUI	RPOSE	OF	DIST	RIBUT	IONS	MADE	FROM	THE (	GENE	RAL (	UNI	ED WA	Y
END	OWME	NT E	UND	WILL	BE	TO SI	JPPOR	г тне	CHA	RITAB	LE AC	rivi	TIES	OF	THE	AGENCY
AS	SUCH	ACI	IVI	TIES	ARE	DEFI	NED BY	Y THE	AGE	NCY'S	BOAR	D OF	DIR	ЕСТС	ORS AN	ID ARE
IN	ACCO	RD V	<b>I</b> TH	THE	DIRE	CTIO	NS COI	NTAIN	IED II	N ANY	DEED	OF	GIFT	BY	ORIGI	NAL
DON	ORS	то 1	HE A	AGENC	Y'S	FUND	. THE									

PART X, LINE 2:

UWJWC IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL

REVENUE CODE AND A SIMILAR SECTION OF THE IOWA INCOME TAX LAW, WHICH

PROVIDES AN INCOME TAX EXEMPTION FOR ORGANIZATIONS OPERATED EXCLUSIVELY

FOR RELIGIOUS, CHARITABLE, OR EDUCATIONAL PURPOSES. THE INTERNAL REVENUE 332054 09-28-23

Schedule D (Form 990) 2023

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09060822 131839 A518433
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29

Schedule D (Form 990) 2023

332055 09-28-23

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	C	DMB No. 1545-0047			
(Form 990)		e organization answered "Yes" on I organization entered more than \$15				r 19, or if the	,	2023			
Department of the Treasury		Attach to Form 990 o						Open to Public			
Internal Revenue Service		o www.irs.gov/Form990 for instruc						Inspection			
Name of the organization	ONITED COUNTIE	WAY OF JOHNSON & WA S. INC.	ASHI	LNG'.	L'ON	42-6	-	ntification number 055			
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not											
required to complete this part.  1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.											
<ul> <li>a Ail solicitat</li> <li>b Internet and</li> <li>c Phone solicitat</li> <li>d In-person so</li> <li>2 a Did the organization</li> <li>key employees list</li> </ul>	a       Mail solicitations       e       Solicitation of non-government grants         b       Internet and email solicitations       f       Solicitation of government grants         c       Phone solicitations       g       Special fundraising events										
compensated at le	•	· / / /	ant to a	ayreer	nents under which ti		15 10 00	-			
(i) Name and addres or entity (func		(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	fundraiser to (or retained		(vi) Amount paid to (or retained by) organization			
			Yes	No							
Total											
		n is registered or licensed to solicit c		utions	or has been notified	it is exempt f	rom re	gistration			

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

Schedule G (Form 990) 2023

LHA 332081 09-13-23

				ON & WASHINGT		
-	edul Irt I	le G (Form 990) 2023 COUNTIE				6062055 Page 2
Pa	ar t I	Fundraising Events. Complete if the of fundraising event contributions and groups of fundraising event contribu				
			(a) Event #1	(b) Event #2	(c) Other events	5 greater than \$5,000.
			POWER OF THE	.,	NONE	(d) Total events
				HOOPS & HOPS	NONE	(add col. <b>(a)</b> through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
ne						
Revenue	4	Gross receipts	41,667.	13,035.		54,702.
Re	'		11,0070	10,000		51//020
	2	Less: Contributions	41,667.	13,035.		54,702.
	-					
	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
	5	Noncash prizes	8,433.	14,298.		22,731.
Se			0,100	11/2501		22,751
ense	6	Rent/facility costs	2,160.			2,160.
Expe						
Direct Expenses	7	Food and beverages				
Dire						
		Entertainment				
	9	Other direct expenses		9.		5,224.
	10	Direct expense summary. Add lines 4 through	( )			30,115.
Pa	irt I	Net income summary. Subtract line 10 from li II Gaming. Complete if the organization		000 Dort IV line 10 or		-30,115.
		\$15,000 on Form 990-EZ, line 6a.	answered res on rom	1990, Part IV, III e 19, 01	eported more than	
				(b) Pull tabs/instant		(d) Total gaming (add
anı			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c)
Revenue						
Re	1	Gross revenue			10,660.	10,660.
s	2	Cash prizes				
xpenses						
xpe	3	Noncash prizes				
ct E						
Direct	4	Rent/facility costs				
	_					
	5	Other direct expenses			X Yes 100 %	
	6	Volunteer labor	Yes %	Yes%	<u>     Xes 100</u> %	
		Volunteer labor				
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
			( )			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			10,660.
9		ter the state(s) in which the organization condu				
		he organization licensed to conduct gaming ac				X Yes No
b	) If "	No," explain:				
10-		ere any of the organization's gaming licenses re	wokod guopopdad arta	rminated during the torr	(00r?	Yes X No
		Yes," explain:			(cai (	
U						

332082 09-13-23

Schedule G (Form 990) 2023

UNITED WAY OF JOHNSON & WASHINGTON	
Schedule G (Form 990) 2023 COUNTIES, INC.	42-6062055 Page 3
11 Does the organization conduct gaming activities with nonmembers?	X Yes No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity forme	
to administer charitable gaming?	Yes X No
<b>13</b> Indicate the percentage of gaming activity conducted in:	
a The organization's facility	
<b>b</b> An outside facility	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and re	ecords:
Name MARIA UPAH	
Address 1150 5TH ST, STE 290 - CORALVILLE, IA 52241	
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes X No
<b>b</b> If "Yes," enter the amount of gaming revenue received by the organization \$ and the	le amount
of gaming revenue retained by the third party \$	
c If "Yes," enter name and address of the third party:	
Name	
Address	
16 Gaming manager information:	
Name MARIA UPAH	
Coming manager companyation	
Gaming manager compensation \$	
Description of services provided OVERSIGHT OF ENTIRE FUNDRAISING EVENT	1 •
Director/officer	
17 Mandatory distributions:	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	
retain the state gaming license?	X Yes 🗌 No
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or sp	pent in the
organization's own exempt activities during the tax year \$ 21,513.	
Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and	ıd (v); and Part III, lines 9, 9b, 10b,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
332083 09-13-23	Schedule G (Form 990) 2023
33	

09060822 131839 A518433

		UNITED	WAY	OF	JOHNSON	I &	WASHINGTON	
Schedule G	(Form 990) Supplemental Inform	COUNTII	ES,	INC	•			
		(001	<u>unueu)</u>					
								Schedule G (Form 99

332084 04-01-23

SCHEDULE I (Form 990) Department of the Treasury Internal Revenue Service	Go	irants and Oth vernments, ar ete if the organizatio	nd Individual n answered "Yes" Attach to Form	s in the Ŭni <sup>:</sup> on Form 990, Par 990.	ted States rt IV, line 21 or 22.		OMB No. 1545-0047 <b>2023</b> Open to Public Inspection
	Y OF JOHN	SON & WASHI	s.gov/Form990 for NGTON	the latest informa	ation.		Employer identification number
COUNTIES,							42-6062055
Part I General Information on Grants a	nd Assistance						
<ol> <li>Does the organization maintain records criteria used to award the grants or assis</li> <li>Describe in Part IV the organization's pro- tile</li> </ol>	stance?	oring the use of grant	funds in the United	States.			X Yes No
Part II Grants and Other Assistance to recipient that received more than the second se	-				anization answered "Y	es" on Form 990, Part	IV, line 21, for any
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
							FOR PROGRAMS TO
4CS COMMUNITY COORDINATED CHILD							EDUCATION, FINANCIAL
CARE - 1500 SYCAMORE ST IOWA							STABILITY, AND HEALTH AND
CITY, IA 52240	23-7351124	501C3	30,301.	0.			DONOR DESIGNATED FUNDS
VISITING NURSE ASSOCIATION 1524 SYCAMORE ST.							FOR PROGRAMS TO EDUCATION, FINANCIAL STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-0703760	501C3	10,000.	0.			DONOR DESIGNATED FUNDS
UNITED ACTION FOR YOUTH 1700 S. FIRST AVE., SUITE 14 IOWA CITY, IA 52240	42-0954860	501C3	71,500.	0.			FOR PROGRAMS TO EDUCATION, FINANCIAL STABILITY, AND HEALTH AND DONOR DESIGNATED FUNDS
TABLE TO TABLE 840 S. CAPITOL ST. IOWA CITY, IA 52240	42-1457219	501C3	54,065.	0.			FOR PROGRAMS TO EDUCATION, FINANCIAL STABILITY, AND HEALTH AND DONOR DESIGNATED FUNDS
SHELTER HOUSE 429 SOUTHGATE AVE. IOWA CITY, IA 52240	42-1231451	501C3	83,064.	0.			FOR PROGRAMS TO EDUCATION, FINANCIAL STABILITY, AND HEALTH AND DONOR DESIGNATED FUNDS
NORTH LIBERTY COMMUNITY PANTRY 89 NORTH JONES BLVD. NORTH LIBERTY, IA 52317	42-1233284		24,575.	0.			FOR PROGRAMS TO EDUCATION, FINANCIAL STABILITY, AND HEALTH AND DONOR DESIGNATED FUNDS
<ul> <li>2 Enter total number of section 501(c)(3) a</li> <li>3 Enter total number of other organization</li> </ul>			e line 1 table				242.

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

Schedule I (Form 990) 2023

Schedule I (Form 990) COUNTIES, INC.

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

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							FOR PROGRAMS TO
NEIGHBORHOOD CENTERS OF JOHNSON							EDUCATION, FINANCIAL
COUNTY - PO BOX 2491 - IOWA CITY,							STABILITY, AND HEALTH AND
IA 52244	42-1060964	501C3	125,333.	٥.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
IOWA VALLEY HABITAT FOR HUMANITY							EDUCATION, FINANCIAL
2401 SCOTT BLVD. SE							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-1410210	501C3	15,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
IOWA LEGAL AID							EDUCATION, FINANCIAL
1700 SOUTH FIRST AVE., SUITE 10							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-1079227	501C3	37,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
IOWA CITY FREE MEDICAL & DENTAL							EDUCATION, FINANCIAL
CLINIC - 2440 TOWNCREST DR IOWA							STABILITY, AND HEALTH AND
CITY, IA 52240	42-0960955	501C3	115,011.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
THE HOUSING FELLOWSHIP							EDUCATION, FINANCIAL
322 EAST SECOND ST.							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-1362432	501C3	21,765.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
HORIZONS							EDUCATION, FINANCIAL
819 5TH ST. SE							STABILITY, AND HEALTH AND
CEDAR RAPIDS, IA 52406	42-1135083	501C3	20,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
HACAP - IOWA CITY							EDUCATION, FINANCIAL
367 SOUTHGATE AVE.							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-0898405	501C3	20,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
GOODWILL OF THE HEARTLAND							EDUCATION, FINANCIAL
1410 S. FIRST AVE.							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-0923563	501C3	20,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
FREE LUNCH PROGRAM							EDUCATION, FINANCIAL
1105 S. GILBERT CT., SUITE 100							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	26-4722790	501C3	5,407.	0.			DONOR DESIGNATED FUNDS

Schedule I (Form 990)

# UNITED WAY OF JOHNSON & WASHINGTON

Schedule I (Form 990) COUNTIES, INC.

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

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOMESTIC VIOLENCE INTERVENTION							FOR PROGRAMS TO
PROGRAM (DVIP) - 1105 S. GILBERT							EDUCATION, FINANCIAL
CT., SUITE 300 - IOWA CITY, IA							STABILITY, AND HEALTH AND
52240	42-1124902	501C3	75,200.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
CORALVILLE COMMUNITY FOOD PANTRY							EDUCATION, FINANCIAL
1002 5TH ST.							STABILITY, AND HEALTH AND
CORALVILLE, IA 52241	47-3509757	501C3	17,694.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
COMMUNITY CRISIS SERVICES AND FOOD							EDUCATION, FINANCIAL
BANK - 1121 GILBERT CT IOWA							STABILITY, AND HEALTH AND
CITY, IA 52240	42-0955992	501C3	108,130.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
BIG BROTHERS BIG SISTERS OF							EDUCATION, FINANCIAL
JOHNSON COUNTY - 3109 OLD HWY 218							STABILITY, AND HEALTH AND
SOUTH - IOWA CITY, IA 52246	42-6021441	501C3	44,835.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
THE ARC OF SOUTHEAST IOWA							EDUCATION, FINANCIAL
2620 MUSCATINE AVE.							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-0933140	501C3	28,458.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
AGING SERVICES/PATHWAYS ADULT DAY							EDUCATION, FINANCIAL
HEALTH CENTER - 817 PEPPERWOOD							STABILITY, AND HEALTH AND
LANE - IOWA CITY, IA 52240	23-7085316	501C3	29,490.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
ABBE MENTAL HEALTH CENTER							EDUCATION, FINANCIAL
1039 ARTHUR ST.							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-1045257	501C3	25,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
GERIATRIC & SPECIAL NEEDS DENTAL							EDUCATION, FINANCIAL
PROGRAM - UNIVERSITY OF IOWA, W329							STABILITY, AND HEALTH AND
DSB - IOWA CITY, IA 52242	42-6004813	GOVT	7,373.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
RVAP							EDUCATION, FINANCIAL
332 S. LINN ST., SUITE 100							STABILITY, AND HEALTH AND
IOWA CITY, IA 52240	42-6004813	GOVT	19,660.	Ο.			DONOR DESIGNATED FUNDS

Schedule I (Form 990)

UNITED	WAY	OF	JOHNSON	&	WASHINGTON
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COUNTIES, INC.

 Schedule I (Form 990)
 COUNTIES, INC.

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

42-6062055 Page 1

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	( <b>h)</b> Purpose of grant or assistance
							FOR PROGRAMS TO
OAN BUXTON SCHOOL CHILDREN'S AID							EDUCATION, FINANCIAL
725 N. DODGE ST.							STABILITY, AND HEALTH AN
OWA CITY, IA 52245	42-6023567	OTHER	10,000.	0.			DONOR DESIGNATED FUNDS
							FOR PROGRAMS TO
EALTHY KIDS SCHOOL-BASED CLINICS							EDUCATION, FINANCIAL
725 N. DODGE ST.							STABILITY, AND HEALTH AN
OWA CITY, IA 52245	42-6023567	OTHER	71,759.	0.			DONOR DESIGNATED FUNDS

Schedule I (Form 990)

### UNITED WAY OF JOHNSON & WASHINGTON

Schedule I (Form 990) 2023

COUNTIES, INC.

42-6062055

Page 2

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	<b>(e)</b> Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Part IV Supplemental Information Provide the information rec	<u> </u>		<u> </u>	<u> </u>	

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

PART I, LINE 2:

ALLOCATIONS: ORGANIZATIONS RECEIVING DISCRETIONARY FUNDING FROM UWJWC

(DETERMINED BY COMMUNITY IMPACT COUNCIL VOLUNTEERS) UNDERGO INTENSIVE

PRE-SCREENING BEFORE BEING AWARDED FUNDING. SUCH SCREENING INCLUDES:

- AN APPLICATION PROCESS THAT INCLUDES EXPLANATION OF THE PROPOSED USE AND

RESULTS FROM THE USE OF THE FUNDING

- FINANCIAL REVIEW OF THE ORGANIZATION TO GAIN A LEVEL OF ASSURANCE THAT

THE ORGANIZATION FOLLOWS SOUND FISCAL POLICIES

## - VERIFICATION OF COMPLIANCE WITH THE PROVISIONS OF THE PATRIOT ACT

Schedule I (Form 990) COUNT
Part IV Supplemental Information

- VERIFICATION OF CURRENT STATUS AS AN IRS CODE SECTION 501(C)(3) PUBLIC

CHARITY OR GOVERNMENTAL AGENCY

- ARE REQUIRED TO PROVIDE UWJWC WITH QUARTERLY PROGRESS REPORTS THAT SHOW

HOW THE FUNDING HAS BEEN UTILIZED TO DATE AND HOW THAT FUNDING HAS IMPACTED

THE MISSION ACHIEVEMENTS

- ARE REQUIRED TO PROVIDE UWJWC WITH A FINAL REPORT AT THE END OF THE

ALLOCATION PERIOD THAT VERIFIES THAT ALL FUNDING HAS BEEN USED FOR THE

PURPOSES INTENDED AND WHAT THE RESULTS WERE COMPARED TO THE PROPOSED

RESULTS FROM THE ORIGINAL APPLICATION

Schedule I (Form 990)

332291 04-01-23

# SCHEDULE M

Department of the Treasury Internal Revenue Service

# **Noncash Contributions**

OMB No. 1545-0047

**Open to Public** 

23

(Form 990)	

### 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.

Inspection Employer identification number 42-6062055

ſ **/**U

(d) Method of determining noncash contribution amounts

Name of the organization	UNITED WAY O	F JOHN	SON & WASH	IINGTON
	COUNTIES, IN	с.		
Part I Types of P	Property			
		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	<b>(c)</b> Noncash contribution amounts reported on Form 990, Part VIII, line 1g

1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications	Х		1,797.	FAIR VALUE
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded				
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or				
	trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution -				
	Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ( <u>SPECIAL EVENT</u> )	X	4		FAIR VALUE
26	Other ( OTHER )	X	2,077	3,171.	FAIR VALUE
27	Other ( )				
28	Other ( )				
29	Number of Forms 8283 received by the organiz	ation during	the tax year for cor	ntributions	
	for which the organization completed Form 828	33, Part V, Do	onee Acknowledger	ment <b>29</b>	

30a	During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for			
	exempt purposes for the entire holding period?	30a		Х
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	Х	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	x	
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

Schedule M (Form 990) 2023

Yes No

LHA 332141 09-11-23 UNITED WAY OF JOHNSON & WASHINGTON

Schedule M (Form 990) 2023 COUNTIES, INC.

42-6062055 Page 2

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

### SCHEDULE M, PART I, COLUMN (B):

### AMOUNT IN COLUMN B INDICATES THE NUMBER OF CONTRIBUTORS.

SCHEDULE M, LINE 32B:

THE ORGANIZATION UTILIZES A THIRD PARTY TO SELL GIFTS OF STOCK. STOCK

IS SOLD AS SOON AS POSSIBLE AFTER IT IS RECEIVED INTO THE

ORGANIZATION'S ACCOUNT. THE ORGANIZATION HAS DEFINED PROCESSES TO

ENSURE THE GIFTS ARE PROPERLY RECORDED.

Schedule M (Form 990) 2023

332142 09-11-23

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization 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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information. UNITED WAY OF JOHNSON & WASHINGTON



FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

INC.

COUNTIES

DIVERSIFIES, DONATING TO UNITED WAY REMAINS THE MOST EFFECTIVE WAY TO

SUPPORT THE ENTIRE COMMUNITY. TOGETHER, WE ADDRESS THE NEEDS IN JOHNSON

& WASHINGTON COUNTIES ACROSS AREAS SUCH AS BIRTH THROUGH ADULT

EDUCATION, BUILDING FINANCIAL STABILITY, AND ACCESS TO HEALTH.

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

MISSION IS TO INSPIRE, MOBILIZE, AND EQUIP INDIVIDUALS AND GROUPS TO

TAKE POSITIVE ACTION IN ADDRESSING PRESSING CHALLENGES, SUPPORTING

NONPROFITS, PREPARING FOR AND RESPONDING TO DISASTERS, AND ENHANCING

THE QUALITY OF LIFE IN JOHNSON AND WASHINGTON COUNTIES. DEDICATED TO

INCREASING VOLUNTEERISM, ENGAGEMENT, AND SERVICE, THE VOLUNTEER CENTER

BUILDS A VIBRANT COMMUNITY OF VOLUNTEERS. WE ENCOURAGE ADULTS TO SERVE,

YOUTH TO VOLUNTEER AND BUILD CHARACTER, FAMILIES TO BOND, YOUNG

PROFESSIONALS TO LEAD, MATURE ADULTS TO SHARE THEIR WISDOM, AND

BUSINESSES TO SUPPORT OUR COMMUNITY. THROUGH ORGANIZED VOLUNTEER

PROJECTS AND BY CONNECTING INDIVIDUALS WITH NONPROFIT ORGANIZATIONS,

THE UNITED WAY VOLUNTEER CENTER EMPOWERS PEOPLE TO TAKE MEANINGFUL

ACTION.

 55+ RSVP PROGRAM: RSVP ENGAGES INDIVIDUALS AGED 55 AND OLDER IN CITIZEN

 SERVICE. IT IS ONE OF THE LARGEST VOLUNTEER NETWORKS IN THE NATION FOR

 PEOPLE 55 AND OVER AND ENCOURAGES INDIVIDUALS TO USE THE SKILLS AND

 TALENTS THEY HAVE LEARNED OVER THE YEARS, OR DEVELOP NEW ONES, WHILE

 SERVING IN A VARIETY OF VOLUNTEER ACTIVITIES. THE UNITED WAY 55+ RSVP

 PROGRAM PROVIDES VOLUNTEERS BOTH ON AN ONGOING BASIS AND FOR SPECIAL

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

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EVENTS AND NEEDS TO LOCAL PARTNERS. VOLUNTEERS ASSIST IN M	ULTIPLE WAYS,
INCLUDING WORKING IN FOOD PANTRIES, DELIVERING MEALS, BECO	MING LITERACY
VOLUNTEERS, DRIVING FOR OUR MEDICAL TRANSPORTATION PROGRAM	, AS WELL AS
SUPPORTING MAILINGS, CLERICAL ASSISTANCE AND MANY MORE OPP	ORTUNITIES.
55+ RSVP COUNTIES SERVED INCLUDE: JOHNSON, WASHINGTON, DES	MOINES, AND
MUSCATINE.	

PEN PALS PROGRAM: THE PEN PALS PROGRAM MOTIVATES STUDENTS BY PROVIDING AN AUDIENCE FOR THEIR IDEAS, HELPING THEM TO EXPRESS THEMSELVES CLEARLY. IT CONNECTS EVERY STUDENT WITH A PEN PAL, ALLOWING FOR FUN AND ENGAGING COMMUNICATION. THROUGH FRIENDLY CORRESPONDENCE, STUDENTS LEARN ABOUT VARIOUS TOPICS, PRACTICE WRITING, INCREASE LITERACY SKILLS, AND BUILD POSITIVE RELATIONSHIPS. THIS PROGRAM SUPPORTS AUTHENTIC WRITING EXPERIENCES FOR LOCAL ELEMENTARY SCHOOL STUDENTS.

HOLIDAY ADOPT A FAMILY: FOR MANY FAMILIES, THE HOLIDAYS CAN BE AN EXTREMELY DIFFICULT TIME. ADOPT A FAMILY IS DESIGNED TO SUPPORT FAMILIES WHO OTHERWISE WOULDN'T HAVE THE RESOURCES TO CELEBRATE THE HOLIDAYS. THIS PROGRAM PROVIDES A WONDERFUL HOLIDAY EXPERIENCE FOR FAMILIES AT A CRITICAL TIME IN THEIR LIVES. IN THIS PROGRAM, BUSINESSES, ORGANIZATIONS, CHURCHES, GROUPS, OR INDIVIDUALS AGREE TO SPONSOR A LOCAL FAMILY OR FAMILIES FOR THE HOLIDAY BY PROVIDING GIFTS, GIFT CARDS, HOUSEHOLD ITEMS, FOOD, AND MORE.

EARLY LITERACY & GRADE LEVEL READING INITIATIVE: A GROWING BODY OF RESEARCH SUGGESTS THAT READING PROFICIENCY BY THIRD GRADE IS ONE OF THE MOST POWERFUL PREDICTORS OF FUTURE ACADEMIC AND CAREER SUCCESS. MANY CHILDREN IN THE COMMUNITY DO NOT HAVE ACCESS TO BOOKS AT HOME OR DO NOT 332212 11-14-23 Schedule O (Form 990) 2023 44

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COUNTIES, INC.	42-6062055			
HAVE THE OPPORTUNITY TO BENEFIT FROM READING A BOOK WITH A	CARING			
ADULT. THE EDUCATIONAL GAP FOR CHILDREN FALLING BEHIND IN READING GROWS				
WIDER AS THEY ENTER FOURTH GRADE AND SWITCH FROM "LEARNING	TO READ"			
INTO "READING TO LEARN." KIDS WHO FALL BEHIND FIND IT HARDER TO CATCH				
UP, CAUSING FRUSTRATION AND OFTEN A SENSE OF "GIVING UP." THE				
INITIATIVE INCLUDES A COMMUNITY-WIDE BOOK DRIVE, READING VOLUNTEER				
PROGRAM AND LITERACY KITS.				

MY VERY OWN BOOK DRIVE: A COMMUNITY-WIDE BOOK DRIVE LAUNCHED IN JUNE 2016 TO HARNESS THE CARING POWER OF THE COMMUNITY AND COLLECT CHILDREN'S BOOKS. ALL COLLECTED BOOKS WILL BE DISTRIBUTED TO CHILDREN IN ELEMENTARY SCHOOLS THAT HAVE A HIGHER FREE AND REDUCED LUNCH PARTICIPATION PERCENTAGE. IN ADDITION, ACTIVITIES FOR CHILDREN AND FAMILIES TO READ TOGETHER AT HOME WILL BE PROMOTED. UNITED WAY READING BUDDIES: THE PROGRAM PARTNERS COMMUNITY VOLUNTEERS WITH YOUNG STUDENT READERS TO HELP DEVELOP LANGUAGE AND LITERACY SKILLS

AND SUPPORT THEM BECOMING LIFELONG READERS.

LITERACY KITS: RESEARCH HAS SHOWN THAT CHILDREN LEARN BEST WHEN THEY
ARE ENGAGED AND HAVING FUN. LITERACY KITS MAKE READING INTERACTIVE AND
FUN BY COMBINING A BOOK WITH RELATED OBJECTS, GAMES, AND ACTIVITIES.
THEY ARE USED IN VOLUNTEER READING PROGRAMS AND DISTRIBUTED TO FAMILIES
WITH EARLY ELEMENTARY-AGED CHILDREN THROUGH SCHOOLS AND SERVICE
AGENCIES. DESIGNED FOR EARLY READERS (K-3), THESE KITS ENHANCE READING
EXPERIENCES AND DIRECTLY IMPACT SCHOOL SUCCESS BY ENCOURAGING CHILDREN
TO READ OR BE READ TO BY AN ADULT.

<u>MATH KITS: MATH KITS H</u>	IELP CHILDREN ACQUIRE F	OUNDATIONAL MATH	SKILLS
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WHILE STAYING ENGAGED AND HAVING FUN. THEY FOCUS ON BASE-1	0 матн,
NUMBER SENSE, AND UNDERSTANDING NUMBERS AS QUANTITIES AND	VALUES,
INCLUDING LEARNING ABOUT COINS AND THEIR MONETARY VALUE. T	HESE KITS ARE
DISTRIBUTED TO ELEMENTARY-AGED CHILDREN THROUGH SCHOOLS AND	D SERVICE
AGENCIES.	

DISASTER SERVICES INCLUDE COORDINATING THE COMMUNITY ORGANIZATIONS ACTIVE IN DISASTER (COAD) COALITION AND ITS SUBCOMMITTEES FOR LONG-TERM RECOVERY, VOLUNTEER AND DONATIONS MANAGEMENT, AND NEEDS ASSESSMENT. THE EMERGENCY VOLUNTEER CENTER (EVC) PREPARES FOR DISASTERS, MANAGING VOLUNTEERS THROUGH A DEDICATED LOCATION FOR LARGE DISASTERS AND A PHONE BANK FOR SMALLER ONES. IN PARTNERSHIP WITH JOHNSON COUNTY EMERGENCY MANAGEMENT, THE EVC MOBILIZES TRAINED VOLUNTEERS TO EFFICIENTLY DEPLOY DISASTER ASSISTANCE. THE DISASTER CALL CENTER, STAFFED BY UNITED WAY PERSONNEL AND VOLUNTEERS, PROVIDES THE COMMUNITY WITH DISASTER-RELATED INFORMATION AND VOLUNTEER ASSISTANCE, ALLOWING MUNICIPAL STAFF TO FOCUS ON EMERGENCY OPERATIONS.

THE COMMUNITY BOARD FAIR IS A COLLABORATIVE EFFORT BETWEEN UNITED WAY, THE IOWA CITY AREA BUSINESS PARTNERSHIP, AND COMMUNITY PARTNERS. IT SERVES AS A REGION-WIDE HUB FOR COMMITTEE, COMMISSION, AND BOARD OPPORTUNITIES FOR COMMUNITY LEADERS LOOKING TO GET INVOLVED. THIS EVENT PROVIDES COMMUNITY-MINDED INDIVIDUALS WITH THE CHANCE TO FIND OPPORTUNITIES TO SERVE ON LOCAL TASK FORCES, COMMISSIONS, COMMITTEES, AND BOARDS, FOSTERING GREATER CIVIC ENGAGEMENT AND LEADERSHIP.

 SUMMERSHIPS: A "SUMMERSHIP" PROVIDES A K-12 STUDENT FROM JOHNSON AND

 WASHINGTON COUNTIES, WHO IS ELIGIBLE FOR FREE & REDUCED LUNCH, WITH A

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Name of the organization UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.	Employer identification number $42-6062055$
CAMP SCHOLARSHIP. SUMMERSHIPS PROVIDE ACCESS TO SUMMER-TIM	E, HIGH
QUALITY CAMPS AND ACTIVITIES FOR CHILDREN WHO OTHERWISE MI	GHT NOT HAVE
THE OPPORTUNITY. EACH "SUMMERSHIP" SCHOLARSHIP WILL FUND U	P TO \$350 OF
ONE SUMMER CAMP OR SUMMER ACTIVITY PER CHILD. UNITED WAY O	F JOHNSON &
WASHINGTON COUNTIES AND THE COMMUNITY FOUNDATION OF JOHNSO	N COUNTY ARE
PROUD TO PARTNER TO COORDINATE THIS SCHOLARSHIP PROGRAM.	

2-1-1: A NATIONAL UNITED WAY INITIATIVE AND REGIONAL PARTNERSHIP OF LOCAL UNITED WAYS. 2-1-1 IS A 24-HOUR TOLL-FREE INFORMATION AND REFERRAL HOTLINE AND WEBSITE FOR HEALTH AND HUMAN SERVICES. TRAINED INFORMATION AND REFERRAL OPERATORS PROVIDE ASSISTANCE TO CALLERS SEEKING SERVICES SUCH AS CHILDCARE, RENT AND UTILITY ASSISTANCE OR CARE FOR THE ELDERLY.

UNITED WAYS OF IOWA: STATEWIDE ORGANIZATION OF LOCAL UNITED WAYS FOCUSED ON SHARING RESOURCES, ACHIEVING OPERATIONAL EFFICIENCIES, AND FOLLOWING BEST PRACTICES FOR COMMUNITY IMPACT AND RESOURCE DEVELOPMENT. IT ADVOCATES FOR PUBLIC POLICY AT STATE AND FEDERAL LEVELS ON ISSUES RELATED TO EDUCATION, INCOME, AND HEALTH. THIS INCLUDES EARLY CHILDHOOD EDUCATION, CHILDCARE ACCESS, K-12 AND HIGHER EDUCATION, POVERTY, HOUSING, INCOME SUPPORTS, WORKFORCE TRAINING, ECONOMIC STABILITY, HEALTHCARE ACCESS, PREVENTIVE SERVICES, AGING SUPPORT, AND SERVICES FOR MENTAL HEALTH AND DEVELOPMENTAL DISABILITIES.

FORM 990, PART VI, SECTION A, LINE 1A: THE EXECUTIVE COMMITTEE CONSISTS OF THE OFFICERS OF THE ORGANIZATION (CHAIR, VICE OR PAST CHAIR, COMMITTEE CHAIRS OF INTERNAL OPERATIONS, COMMUNITY INVESTMENT, RESOURCE DEVELOPMENT & STRATEGIC PLANNING). THE 322212 11-14-23 Schedule O (Form 990) 2023 47

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Name of the organization UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.	Employer identification number $42-6062055$
PRESIDENT & CEO IS AN EX-OFFICIO NON-VOTING MEMBER OF THE	EXECUTIVE
COMMITTEE. THE EXECUTIVE COMMITTEE'S DUTIES CONSIST OF CAR	RYING ON THE
GOVERNANCE AND DIRECTION OF OPERATIONS OF THE CORPORATION,	AS DELEGATED BY
THE BOARD, IN THE INTERIM BETWEEN BOARD OF DIRECTOR'S MEET	INGS. THE
EXECUTIVE COMMITTEE MAY RECOMMEND CHANGES IF THEY AFFECT P	OLICY OR
LONG-RANGE PLANNING. ANY DUTIES OR RESPONSIBILITIES NOT SP	ECIFICALLY
ADDRESSED IN THE BYLAWS WILL BECOME THE RESPONSIBILITY OF	THE EXECUTIVE
COMMITTEE. AN ADDITIONAL DUTY WILL BE TO CONDUCT THE EVALU	ATION OF THE
PRESIDENT & CEO.	

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

THE INDEPENDENT TAX PREPARER REVIEWS A DRAFT OF THE FORM 990 WITH MANAGEMENT, THE INTERNAL OPERATIONS COMMITTEE, AND EXECUTIVE COMMITTEE. A FINAL DRAFT OF THE FORM 990 IS REVIEWED AND APPROVED BY MANAGEMENT AND THE BOARD OF DIRECTORS. AFTER ANY AND ALL CHANGES ARE MADE, THE FINAL COPY OF THE FORM 990 IS PROVIDED TO THE FULL BOARD OF DIRECTORS AND APPROVED PRIOR TO FILING WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C: UNITED WAY OF JOHNSON & WASHINGTON COUNTIES REQUIRES ALL STAFF MEMBERS, BOARD MEMBERS, AND COMMUNITY IMPACT COUNCIL VOLUNTEERS TO SIGN CONFLICT OF INTEREST DISCLOSURES ANNUALLY, AND REQUESTS CONTEMPORANEOUS NOTIFICATION OF ANY STATUS CHANGES (E.G. BOARD APPOINTMENTS, VENDOR AGREEMENTS, ETC.). ORGANIZATIONS THAT RECEIVE FUNDING FROM UWJWC ARE ALSO REQUIRED TO PROVIDE CURRENT LISTINGS OF THEIR DIRECTORS, WHICH ARE CROSS REFERENCED TO DETERMINE IF THERE HAVE BEEN ANY UNDISCLOSED CONFLICTS. THE DIRECTOR OF FINANCE AND OPERATIONS AND THE VICE PRESIDENT OF COMMUNITY IMPACT & ENGAGEMENT MONITORS COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY. IF A 302212 11-14-23

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Name of the organization UNITED WAY OF JOHNSON & WASHINGTON COUNTIES, INC.	Employer identification number $42-6062055$
CONFLICT OR PERCEIVED CONFLICT IS BELIEVED TO EXIST, THE M	ATTER IS BROUGHT
TO THE INTERNAL OPERATIONS COMMITTEE FOR REVIEW. A RECOMME	NDATION FOR
ADDRESSING THE ISSUE IS SUBMITTED BY THE INTERNAL OPERATIO	NS COMMITTEE TO
THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS. THE EXE	CUTIVE COMMITTEE
REVIEWS AND MAY TAKE ACTION OR PRESENT TO THE FULL BOARD F	OR ACTION, WHICH
MIGHT INCLUDE REQUEST FOR RESIGNATION OR TERMINATION FROM	AN APPOINTED OR
ELECTED POSITION, OR OTHER CONSEQUENCE AS DEEMED APPROPRIA	TE AND IN
ACCORDANCE WITH UWJWC POLICIES AND NONPROFIT STANDARDS OF	CONDUCT.

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

THE COMPENSATION OF THE PRESIDENT & CEO IS REVIEWED BY THE UWJWC INTERNAL OPERATIONS COMMITTEE. THE REVIEW INCLUDES THE USE OF COMPARABILITY DATA FROM UNITED WAY WORLDWIDE FOR SIMILARLY SIZED UNITED WAYS, THE PRESIDENT & CEO'S PERFORMANCE AND YEARS OF RELEVANT EDUCATION AND WORK EXPERIENCE, ALONG WITH MARKET ANALYSIS FOR WORK OF SIMILAR COMPLEXITY AND RESPONSIBILITY. THE PRESIDENT & CEO SALARY IS THEN REVIEWED BY THE ORGANIZATION'S EXECUTIVE COMMITTEE, AND THE ANNUAL OPERATIONS BUDGET, FOR FUNDRAISING, ADMINISTRATION AND PROGRAMS, ARE APPROVED BY THE BOARD OF DIRECTORS AND DOCUMENTED IN THE BOARD MINUTES. THE PROCESS LAST TOOK PLACE IN 2024.

CEO GIVES ANNUAL REVIEW AND SETS COMPENSATION AMOUNT. CEO LOOKS AT COMPARISON SALARY DATA FROM UNITED WAY WORLDWIDE FOR UNITED WAYS OF OUR SIZE. REVIEWED BY INTERNAL OPERATIONS COMMITTEE AND EXECUTIVE COMMITTEE AND APPROVED AS PART OF ENTIRE OPERATING BUDGET BY BOARD OF DIRECTORS.

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

THE GOVERNING	DOCUMENTS,	CONFLICT	OF	INTEREST	POLICY	AND	FINANCIAL		
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OUNDATION	57,135.
DRM 990, PART XII, LINE 2C:	
HE OVERSIGHT PROCESS DID NOT CHANGE IN 2023.	
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STATEMENTS ARE AVAILABLE AT THE UWJWC OFFICE UPON REQUEST.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

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