Form <b>990</b>	)
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# EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information

**Open to Public** 

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest inform					Open to Public Inspection
Α	For th	e 2022 calendar year, or tax year beginning and er	nding		
	Check if applicab			D Employer identificat	on number
	Addre	UNITED WAY OF THE LAKESHORE			
	Name chang		38-1426895		
F	Initial		Room/suite	E Telephone number	
	Final	PO BOX 207	io o ni " o di to	231-722-31	34
	termi			<b>G</b> Gross receipts \$	3,511,407.
	Amer returr	MICKECON MT 10113-0207		H(a) Is this a group retur	
	Applition	for subordinates?			
	pendi	F Name and address of principal officer: CHRISTINE J. ROBERE SAME AS C ABOVE		H(b) Are all subordinates includ	
1	Tax-ex	empt status: X 501(c)(3) 501(c) ( ) (insert no.) 4947(a)(1) or	527	If "No," attach a list	
	Websi			H(c) Group exemption n	
κ	Form o	f organization: 🚺 Corporation 🔄 Trust 🔄 Association 📄 Other	L Year of	of formation: 1918 M S	
	art I	Summary	•		<b>U</b>
	1	Briefly describe the organization's mission or most significant activities:	NG TO	INSPIRE CHAN	GE AND
Governance		BUILD THRIVING COMMUNITIES.			
lian	2	Check this box if the organization discontinued its operations or disposed	d of more	than 25% of its net assets	
Nel	3			3	30
Ğ	4	Number of independent voting members of the governing body (Part VI, line 1b)			30
ŝ	5				17
Activities &	6	Total number of volunteers (estimate if necessary)			2498
cti	7a			7a	0.
•	b	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
				Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		2,575,074.	3,286,273.
Revenue	9	Program service revenue (Part VIII, line 2g)		0.	0.
eve	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		126,775.	33,180.
ŭ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		124,250.	133,421.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,826,099.	3,452,874.
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		1,692,496.	2,227,417.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
ģ	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		608,423.	776,469.
lse	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 403,700	6.		
ŵ	i   17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		562,550.	546,646.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,863,469.	3,550,532.
	19	Revenue less expenses. Subtract line 18 from line 12		-37,370.	-97,658.
or			Be	ginning of Current Year	End of Year
Net Assets or	<b>20</b>	Total assets (Part X, line 16)		3,996,514.	3,704,368.
Asi	21	Total liabilities (Part X, line 26)		232,177.	265,027.
Net	22	Net assets or fund balances. Subtract line 21 from line 20		3,764,337.	3,439,341.
P	art II	Signature Block			
11				nto and to the beat of multiplice	and a share is and the Black Date.

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Т

Т

Sign	Signature of officer				Date				
-									
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature		Dat	te	Check	PTIN		
Paid	JEFFREY E. HERT, CPA	JEFFREY E.	HERT,	CPA 11	/14/23	if self-employed	P00066715		
Preparer	Firm's name <b>REHMANN ROBSON LI</b>	LC			Firm's	EIN 38-	3567911		
Use Only	Firm's address 570 SEMINOLE RD,	STE 200							
	MUSKEGON, MI 4944	14			Phone	no.231-	739-9441		
May the IF	RS discuss this return with the preparer shown ab	ove? See instructions					X Yes No		
232001 12-13	12001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2022)								

Form	990 (2022) UNITED WAY OF THE LAKESHORE	38-1426895	Page <b>2</b>
Par	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III		X
1	Briefly describe the organization's mission:		
	OUR MISSION IS TO INSPIRE CHANGE AND BUILD THRIVING COMMUSION FOR MUSKEGON, OCEANA AND NEWAYGO COUNTIES IN THE	MUNITIES. OUR NEXT TEN YEAR	<u> </u>
	IS BOLD, THAT THE PEOPLE OF OUR REGION HAVE THE EDUCATION		<u>م</u>
	ECONOMIC OPPORTUNITIES NEEDED TO SUCCEED AND THRIVE AS N		
2	Did the organization undertake any significant program services during the year which were not listed on the		
-	prior Form 990 or 990-EZ?	Yes	XNo
	If "Yes," describe these new services on Schedule O.		
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes [	XNo
	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	s measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, and	1
	revenue, if any, for each program service reported.		
4a			)
		ONVENING AND	
	ENGAGING THE COMMUNITY TO ASSESS THE NEEDS, BUILDING CAN DELIVER HUMAN CARE SOLUTIONS, PROGRAM EVALUATION AND INV		
	DOLLARS IN LOCAL HUMAN SERVICES THAT MAXIMIZE THEIR USE		
	NEEDS. COMMUNITY IMPACT AND PLANNING - INCLUDES TIME SPI		<u>с</u>
	TO DISCUSS COMMUNITY PROBLEMS, SOLUTIONS, FUNDING OPPORT		
	COLLABORATION WITH OTHER AGENCIES AND ORGANIZATIONS, NEI		
	DATA COLLECTION, AND IN GENERAL, WORK THAT IS DONE TO AN		/
	GENERAL COMMON GOOD.		
4b	(Code:) (Expenses \$205 , 419 including grants of \$) (Reve		)
	PROMOTING VOLUNTEERISM - INCLUDES DAY OF CARING, VOLUNTE		
	RECRUITING COMMUNITY VOLUNTEERS FOR EVENTS, COMMITTEES,		
		K, YOUNG	
	LEADERS, YOUTH AS LEADERS, MINORITY AFFAIRS, AND DIVERS	ITY INITIATIVE	•
4c	(Code:) (Expenses \$103 , 920 . including grants of \$) (Reve	enue \$	)
		F FOSTERS	
	IMPROVED COLLABORATION AND EFFICIENCY.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$ ) (Revenue \$	)	
4e	Total program service expenses 2,829,404.		
		Form <b>99</b>	<b>0</b> (2022)
232002	2 12-13-22		
	2		

07571115 759633 22990.00000

Form 990 (202					THE	LAKESHORE
Part IV C	hecklist of F	Required Sc	hedule	es		

1         In the organization denoting in (SQ) or 447/q(1) (Life that a private bundation?)         1         X           2         Is the organization required to complete Schedule A Combutors? See instructions         2         X           2         Is the organization required to complete Schedule A Combutors?         3         X           3         Section 501(g(3) organizations.         4         X           4         Section 501(g(3) organizations.         5         X           5         Bettion 501(g(3) organizations.         501(g(3) organizations.         5         X           6         Det the organization magner in obtains in such throat a cacculate C, Part II.         6         X           7         Det the organization magner in obtains in such throat or cacculate I. Part II.         6         X           7         Det the organization magner in obtains in such throat or cacculate I. Part I.         7         X           8         Det the organization magner in obtains in such throat schedule C, Part II.         7         X           8         Det the organization magner in obtains in such throats cacculate assets I. Part II.         7         X           9         Diff the organization magner in obtains in such throats.         7         X         X           9         Diff the organization magner in obtains. <t< th=""><th></th><th></th><th></th><th>Yes</th><th>No</th></t<>				Yes	No
2         bit the organization engage in direct or index objects and applies of contribution? See instructions         2         X           3         Diff the organization engage in the organization engage in lobbing activities on behall of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I         3         X           4         Section 501(k)(3) organization and the organization engage in lobbing activities, or have a section 501(k) election of engage in lobbing activities, or have a section 501(k) election of engage in lobbing activities, or have a section 501(k) election of engage in lobbing activities, or have a section 501(k) election of engage in lobbing activities, or have a section 501(k) election of engage in lobbing activities, or have a section 501(k) election of mathem of the formation or investment of anomaruts in sub funds or account? If Yes, 'complete Schedule C, Part I         4         X           6         Dift the organization reace or hold a conservation assemment, including essemments to preserve open space.         7         X           7         Dift the organization reaction the TX, line 21, for socrow or custodial account liability, serve as a custodian for amounts in part the anagement, and freque, or debit negatition services?         8         X           9         Dift the organization reaction and the following questions is "Yes, 'than complete Schedule D, Part I         1         1         X           10         Dift the organization reaction anount for fank buildings, and exignments in Part X, line 12/ If "Yes, 'complete Schedule D, Part X         1         1	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
<ul> <li>3 Did the organization engage in direct or indirect patical campaign activities on bahal of or in opposition to candidate for public office? if "Yes," complete Schedule C, Part I</li> <li>4 Section 501(b) organizations. Did the organization engage in kobying activities, or have a section 501(b) election in effect during the tax year? If "Yes," complete Schedule C, Part II.</li> <li>6 Did the organization maxima and yoon advised tunko or any similar funds or accounts? (IF "Yes," complete Schedule D, Part II.</li> <li>7 Did the organization requeres or tool accounts and endown of the organization that receives membership dues, assessments, or interaction to a conservation assertment, including or any similar funds or accounts? (IF "Yes," complete Schedule D, Part II.</li> <li>9 Did the organization requeres or tool accounts? (IF "Yes," complete Schedule D, Part II.</li> <li>9 Did the organization requeres or thool a conservation assertment, including asserts? If "Yes," complete Schedule D, Part II.</li> <li>9 Did the organization requeres or through a related organization, hold assets in donorrestricted endowments or ingues endowments? (IF "Yes," complete Schedule D, Part IV.</li> <li>9 Did the organization report an amount for instements - other securities in Part X, line 12, for sizow or custodial account lability serve as a custodian for any other thorugh a related organization, hold assets in donorrestricted endowments or ingues endowments? (IF "Yes," complete Schedule D, Part IV.</li> <li>10 Did the organization report an amount for instements - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 12, Part S, "omplete Schedule D, Part V.</li> <li>11 Did the organization report an amount for instements - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 12, Part X, "omplete Schedule D, Part V.</li> <li>12 Did the organization report an amount for instements -</li></ul>		If "Yes," complete Schedule A			
public office? If 'Yes,' complete Schedule Q, Part I         3         X           Section 501(k)(0) organization. Bit the organization engage to liciblying activities, or have a section 501(k) election in effect         4         X           5         the organization assection 501(k) 501(k) 501(k) (501(k) for 501(k))         501(k) election 501(k) election 501(k)         5           6         Did the organization matania any done advised tunds or any similar backs caccounts for which dones have the right to provide advise on the distribution or investment of anounts in such tunds or accounts? If 'Yes,' complete Schedule D, Part I         5         X           7         Did the organization measure to any other similar abset? J 'Yes,' complete Schedule D, Part I         7         X           8         Did the organization matania or provide cadds construits asket. J 'H'se,' complete Schedule D, Part I         8         X           9         Did the organization measure to any of the following questions is in donor restricted endowments? If 'Yes,' complete Schedule D, Part V         8         X           10         Did the organization measure to any of the following questions is 'Yes,' then complete Schedule D, Part V, VI, VII, VI, VI, VI, VI, VI, VI, VI,	2		2	X	
<ul> <li>Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? // 'Yes,' complete Schedule C, Part II.</li> <li>Is the organization a section 501(c)(k), 501(c)(k), or 501(c)(k) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 81:197 // 'Yes,' complete Schedule C, Part II.</li> <li>Did the organization certain organization assement, including easements to prove or preserve open space, the environment, historic land areas, or historic structures? // 'Yes,' complete Schedule D, Part II.</li> <li>Did the organization review on a mount in Part X. Ine 21, for ecrow or custodial account liability, serve as a custodian for serve open space, the environment, historic or trough a related organization, hold assets in donor-restricted endowments or in quasi endowment? // 'Yes,' complete Schedule D, Part II.</li> <li>Did the organization answort on yor the following questions is "Yes,' then complete Schedule D, Part V, 'I's,' complete Schedule D, Part V, II's,' complete Schedule D, Part V, II's,' complete Schedule D, Part V, as applicable.</li> <li>Did the organization encore or yor the following questions is "Yes,' then complete Schedule D, Part X, V, NU, NU, NU, X, or X, as applicable.</li> <li>Did the organization encore or an amount for investments - other securities in Part X, line 10? II'Yes,' complete Schedule D, Part X, as applicable.</li> <li>Did the organization report an amount for investments - other securities in Part X, line 10? II'Yes,' complete Schedule D, Part X, III 11 X.</li> <li>Did the organization report an amount for investments - other securities in Part X, line 10? II'Yes,' complete Schedule D, Part X, III 11 X.</li> <li>Did the organization report an amount for investments - other securities in Part X, line 10? II'Yes,' complete Schedule D, Part X.</li> <li>Did the organization report an amount for investments</li></ul>	3				
during the tax year? "Yes," complete Schedule C, Part II         4         X           5         is the organization a section Sol (K)(K) S01(K)(K) S01(K)(K) S01(K)(K) S01(K)(K) S01(K)(K) S01(K)(K) S01(K) S			3		<u> </u>
5         Is the organization ascelore 501(c)(4), 501(c)(5), or 501(c)(6), or 501(	4				37
similar amounts as defined in Rev. Proc. 98-197. If Yes," complete Schedule D, Part II         5         X           O Did the organization maintain eases. In Micro Y and yointing funds or accounts? If 'Yes," complete Schedule D, Part II         6         X           7         Did the organization maintain collections of works of art, historical treasures, or other semilar assets? If 'Yes,' complete Schedule D, Part II         7         X           8         Did the organization maintain collections of works of art, historical treasures, or other semilar assets? If 'Yes,' complete Schedule D, Part II         8         X           9         Did the organization report an amount in Part X, line 21, for sercew or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repart, or debt negotiation services?         9         X           10         Did the organization, directly or through a related organization, hold assets in donor-restricted endowments         10         X           11         If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V         11a         X           12         Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part V         11a         X           13         X         Did the organization report an amount for investments - program related in Part X, line 10? If 'Yes,' complete Schedule D, Part V         11a <td>_</td> <td></td> <td>4</td> <td></td> <td><u> </u></td>	_		4		<u> </u>
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 for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts for which donors have the right (b).         Image: Complete Schedule D, Part II         Image: CompleteSchedule D, Part III         Image: Complete	5				37
provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part II       6       X         7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic bitructures? III "Yes," complete Schedule D, Part II       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? III "Yes," complete Schedule D, Part IV       8       X         9       Did the organization report an amount in Part X, line 21, for escrew 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? III "Yes," complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? III "Yes," complete Schedule D, Part VI       10       X         12       Did the organization report an amount for investments - organized in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? III "Yes," complete Schedule D, Part XIII       11       X         13       X       11       X       11       X         14       Did the organization report an amount for investments - ordare related in Part X, line 13, that is 5% or mo	_		5		
7       Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II.       7       X         8       Did the organization maintain collections of works of art, historical treasures, or other similar assess? If "Yes," complete Schedule D, Part II.       8       X         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?       9       X         10       Did the organization report an amount for Part X.       10       X       10       X         11       It the organization sanset to any of the following questions is "Yes," then complete Schedule D, Part V       10       X       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       X       11       X         13       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 VI       11       X       11       X         14       Did the organization report an amount for investments - porgram related in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 17 If "Yes	6				v
the environment, historic and areas, or historic structures? If "Yes," complete Schedule D, Part II         7         X           8         Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes," complete Schedule D, Part II         8         X           9         Did the organization report an amount in Part X, line 21, for escrew 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?         9         X           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         X           10         Did the organization report an amount for indu, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI         10         X           11a         X         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         11a         X           11b         X         Did the organization report an amount for investments for the tax year include a footnote that addresses the organization sparate. Independent audited financial statements for the tax year?         11a         X           11b         X         Did the organization report an amount for other assets in Part X, line 25? If 'Yes,' complete Schedule D, Part X <td>_</td> <td></td> <td>6</td> <td></td> <td></td>	_		6		
8       Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrew 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?       9       X         10       Did the organization for any of the following questions is "Yes," then complete Schedule D, Part V       9       X         11       If the organization report an amount for line following questions is "Yes," then complete Schedule D, Part VI, VII, VII, IX, or X, as applicable.       10       X       10       X         12       Did the organization report an amount for line, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI       11       X         13       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assess reported in Part X, ine 16? If "Yes," complete Schedule D, Part XI       11       X         14       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       114       X         15       Did the organization submit of the faibilities in Part X, line 15, that is 5% or more of its total assets reported in Part X, and PAI (SC 740?) "Yes," complete Schedule D, Part X       114       X         14       Did the	7		_		v
Schedule D, Part III       8       X         9       Did the organization report an amount in Part X, line 21, for escrew 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?       9       X         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       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part V       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part V       111       X         13       Did the organization report an amount for investments - other securities 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 VI       116       X         14       Did the organization report an amount for investments or the tax year include a foothoth that addresses the organization report an amount for other liabilities in Part X, line 27? If 'Yes,' complete Schedule D, Part X       111       X         14       X       112       X       114       X       114       X         14       X       116       X, line 16? If 'Yes,' complete Schedule D, Part X       1112       X <td>•</td> <td></td> <td>7</td> <td></td> <td></td>	•		7		
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?       9       X         10       Uid the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? (#''ves, "complete Schedule D, Part V       10       X         11       If the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         11       If the organization report an amount for land, buildings, and equipment in Part X, line 12? (#'Yes," complete Schedule D, Part V       10       X         11       It due organization report an amount for investments - other securities in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? (#'Yes," complete Schedule D, Part VI       110       X         11       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? (#'Yes," complete Schedule D, Part X       111       X         11       Did the organization report an amount for other assets in Part X, line 25? (#'Yes," complete Schedule D, Part X       111       X         11       Did the organization solution solution solution and Part N and Nil Soc ofform (#'Yes," complete Schedule D, Part X       111       X         12       Did the organization	8				v
amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negoliation services?       y       X         b) Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       y       X         11       If the organization, directly or through a related organization, hold assets in donor-restricted endowments       y       X         11       If the organization, directly or through a related organization, hold assets in donor-restricted endowments?       y       X         11       If the organization report an answer to any of the following questions is 'Yes,' then complete Schedule D, Part VI.       10       X         12       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 VI.       11       X         13       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 X       114       X         14       Did the organization report an amount for investments - part X, line 25? If 'Yes,' complete Schedule D, Part X       114       X         14       Did the organization separate or consolidated financial statements for the tax year? If 'Yes,' complete Schedule D, Part X       114       X         15       Did the organization insubard thore tamointo a stru	•		8		
# 'Yes, "complete Schedule D, Part IV       9       X         10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         11       If the organization, directly or through a related organization, hold assets in donor-restricted endowments       10       X         11       If the organization is answer to any of the following questions is 'Yes," then complete Schedule D, Part V       10       X         12       Did the organization report an amount for investments - other securities in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11a       X         13       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 VI       11c       X         14       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 X       11d       X         111       Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X       11d       X         112       Did the organization separate in dependent audited financial statements for the tax year?       11d       X         113       X and XII       Did the organization included in consolidated, independent audited financial statements for the tax year?       <	9				
10       Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If 'Yes,' complete Schedule D, Part V       10       X         11       If the organization's answer to any of the following questions is 'Yes,'' then complete Schedule D, Parts VI, VIII, VIII, VI, VIII, VX, VX, as applicable.       10       X         a       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,'' complete Schedule D, Part VI       11a       X         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         c       Did the organization report an amount for investments - program related in Part X, line 15% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII       11c       X         c       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 X       11e       X         12a       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 X       11e       X         12a       Did the organization report an amount for other labilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X       11e       X					v
or in quasi endowments? If "Yes," complete Schedule D, Part V     10     X       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.     11a     X       a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI     11b     X       b Did the organization report an amount for investments - other securities in Part X, line 12? If "Yes," complete Schedule D, Part VI     11b     X       c Did the organization report an amount for investments - other securities 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 VII     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 VII     11c     X       e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X     11e     X       11a     X     11e     X     11d     X       11a     X     11d     X     11e     X       11d     X     11e     X     11d     X       11d     X     11e     X     11d     X       11d     X     11e     X     11e     X       11d     X     11d     X     11e <td>10</td> <td></td> <td>9</td> <td></td> <td></td>	10		9		
11       If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.       11       X         a       Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>II</i> "Yes," complete Schedule D, Part VI       11a       X         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? <i>II</i> "Yes," complete Schedule D, Part VII       11b       X         c       Did the organization report an amount for investments - program related in Part X, line 139, that is 5% or more of its total assets reported in Part X, line 16? <i>II</i> "Yes," complete Schedule D, Part VIII       11c       X         c       Did the organization report an amount for other assets in Part X, line 15% or more of its total assets reported in Part X, line 16? <i>II</i> "Yes," complete Schedule D, Part X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? <i>II</i> "Yes," complete Schedule D, Part X       11d       X         11d       X       Did the organization asparate or consolidated financial statements for the tax year include a foothorte that addresses the organization asparate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization ashould described in secton 170(b(I)(VI)(VI)?       Yes," complete Schedule D, Part X       11a       X         12a	10		10	x	
as applicable.       a) Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI       11a       X         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       11a       X         c) Did the organization report an amount for investments - orgoram 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 VII       11b       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 X       11e       X         e) 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 sibility for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,'' complete Schedule D, Part X       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         13a       X       11a       X       12a       X         14a       Did the organization aschol described in section 170(b)(1)(A)(ii)? If 'Yes,'' complete Schedule D, Part X and XII is optional       13b       X         14a       Did the organization aschol descri	44			-73	
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? // *Yes," complete Schedule D, Part VI       11a       X         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 VI       11b       X         c 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 VII       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 X       11c       X         d Did the organization report an amount for other lassibilities in Part X, line 25? // if *Yes,* complete Schedule D, Part X       11e       X         f Did the organization separate or consolidated financial statements for the tax year?       11f       X         12a       Did the organization aschool described in section 170b()1/A)(0)? // *Yes,* complete Schedule D, Part X       11e       X         13       If the organization aschool described in section 170b()1/A)(0)? // *Yes,* complete Schedule E       13a       X         14a       Did the organization aschool described in section 170b()1/A)(0)? // *Yes,* complete Schedule E       13a       X         14b       X       11d       X       11d       X <td>••</td> <td></td> <td></td> <td></td> <td></td>	••				
Part VI       11a       X         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         c       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 VII       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 XI       11c       X         e       Did the organization report an amount for other assets 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? in Complete Schedule D, Part X       11t       X         12a       Did the organization neluded in consolidated, independent audited financial statements for the tax year?       11t       X         13       Is the organization neluded in consolidated, independent audited States?       14a       X         14a       Did the organization aschool described in section 170(b)(1)(A)(A)(P)?       14b       X         14a       Did the organization neport on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign individuals? If "Yes," com	2				
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         c       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 VII       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 X       11c       X         e       Did the organization report an amount for other assets in Part X, line 25? If "Yes," complete Schedule D, Part X       11e       X         f       Did the organization report an amount for other liabilities in Part X, line 26? If "Yes," complete Schedule D, Part X       11e       X         11d       X       11e       X       11e       X         11d       X       11e       X       11e       X         11d       X       11e       X       11e       X         12a       Did the organization orbit separate, independent audited financial statements for the tax year?       11f       X       11e       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule D, Part X and XII is optional	a		112	x	
assets reported in Part X, line 16? /f "Yes," complete Schedule D, Part VII       11b       X         c 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? /f "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? /f "Yes," complete Schedule D, Part X       11c       X         e Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X       11e       X         f Did the organization's separate or consolidated financial statements for the tax year include a tootnote that addresses the organization included in consolidated, independent audited financial statements for the tax year?       11f       X         12a Did the organization included in consolidated, independent audited financial statements for the tax year?       12a       X         13 Is the organization a school described in section 170(0)(1)/A(ii)? /f "Yes," complete Schedule E       13a       X         14a Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garge grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other assistance to or for any foreign individual? /f "Yes," complete Schedule F, Part II and IV       14b       X         15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of gargegate grants or other as	h				
c       Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i> 11c       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? <i>If "Yes," complete Schedule D, Part IX</i> 11d       X         e       Did the organization report an amount for other assets in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> 11e       X         f       Did the organization separate or consolidated financial statements for the tax year include a tootnote that addresses the organization otal in separate, independent audited financial statements for the tax year?       11t       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11t       X         13       Is the organization aschool described in section 170(b)(1)(A)(iii? <i>II "Yes," complete Schedule D, Part X and XII as the organization aschool described in section 170(b)(1)(A)(iii? <i>II "Yes," complete Schedule E</i>       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         15       X       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garets or other assistance to or for any foreign organization? <i>II "Yes," complete Schedule F, Parts II and IV</i>       15       X  </i>			11b		х
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 X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         12a       Did the organization othain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Part X and XII       11d       X         b Was the organization included in consolidated, independent audited financial statements for the tax year?       11d       X         14a       Did the organization asswered "No" to line 12a, then completing Schedule D, Part X and XII is optional       12b       X         14a       Did the organization namintain an office, employees, or agents outside of the United States?       14a       X         15       Did the organization neport on Part IX, column (A), line 3, more than \$5,000 of garets or other assistance to or for any foreign 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 G, Part II       16       X         17       Did the organization report more than	с				
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 X       11d       X         e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X       11d       X         f Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11e       X         12a       Did the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization assertation included in consolidated financial statements for the tax year?       If "Yes," complete Schedule D, Parts XI and XII       12a       X         b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       11a       X         114       Did the organization nantain an office, employees, or agents outside of the United States?       11a       X         114a       Did the organization have aggregate revenues or expenses of more than \$5,000 of garnts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of garges parts or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of garges parte orentibutions on Part IX, column (A), line 3, more than \$5,000 of garges partes or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16 <td>-</td> <td></td> <td>11c</td> <td></td> <td>х</td>	-		11c		х
Part X, line 16? If "Yes," complete Schedule D, Part IX       11d       X         e 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 the organization obtain separate, independent audited financial statements for the tax year?       11f       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax year?       11e       X         b Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII       12b       X         13       Is the organization maintain an office, employees, or agents outside of the United States?       14a       X         14b       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garts or other assistance to or for any foreign 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 II and IV       16       X         17       Did the organization report nore than \$15,000 of expenses for professional fundraising services 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 G, Part II and IV       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part X	d				
<ul> <li>e Did the organization report an amount for other liabilities in Part X, line 25? /f "Yes," complete Schedule D, Part X</li> <li>f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization obtain separate, independent audited financial statements for the tax year? /// "Yes," complete Schedule D, Part X /// "Yes," and if the organization included in consolidated, independent audited financial statements for the tax year?</li> <li>if "Yes," and if the organization a school described in section 170(b)(1)(A)(0)? // "Yes," complete Schedule D, Parts XI and XII is optional</li> <li>in the organization a school described in section 170(b)(1)(A)(0)? // "Yes," complete Schedule E</li> <li>in the organization maintain an office, employees, or agents outside of the United States?</li> <li>b Did the organization report on Part IX, column (A), line 3, more than \$10,000 form grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV</li> <li>14 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 individual? // "Yes," complete Schedule F, Parts II and IV</li> <li>16 Did the organization report more than \$15,000 of expenses for profesional fundraising services on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individual? // "Yes," complete Schedule G, Part I.</li> <li>17 X</li> <li>18 K 1</li> <li>18 X</li> <li>19 X</li> <li>20 Did the organization report more than \$15,000 of grants or other assistance to or for foreign individual? // "Yes," complete Schedule G, Part II.</li> <li>18 X</li> <li>19 X</li> <li>20 Did the organization report</li></ul>			11d	х	
f       Did the organization's isability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X       11f       X         12a       Did the organization separate, independent audited financial statements for the tax yea?? If "Yes," complete Schedule D, Part XI and XII       12a       X         12a       Did the organization included in consolidated, independent audited financial statements for the tax yea??       If "Yes," complete Schedule D, Part XI and XII       12a       X         13       Is the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         14a       Did the organization naintain an office, employees, or agents outside of the United States?       14a       X         b       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 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 II and IV       14       X         15       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 G, Part II and IV       16       X         17       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 G, Part II and IV       16       X	е		11e		Х
12a       Did the organization obtain separate, independent audited financial statements for the tax year? // ff "Yes," complete       12a       X         12b       X       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       11       12b       X         13       Is the organization askered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization neoptic schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report a total of more than \$10,000 from grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         16       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 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       X         17       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 G, Part II See instructions       16 <td< td=""><td></td><td></td><td></td><td></td><td></td></td<>					
12a       Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete       12a       X         b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12b       X         b       Was the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization aschool described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13a       X         14a       Did the organization neutration and office, employees, or agents outside the United States?       14a       X         b       Did the organization report on Part IX, column (A), line 3, more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       16       X         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 G, Part II and IV       16       X         17       Did the organization report more than \$15,000 of expenses for professional fundraising services on Part		the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
b       Was the organization included in consolidated, independent audited financial statements for the tax year?       12       12         if "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       13       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization nave aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States?       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign 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 II and IV       15       X         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 G, Part I I and IV       16       X         17       Did the organization report atotal 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	12a				
If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional       12b       X         13       Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14a       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         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 II and IV       16       X         17       Did the organization report a total of more than \$15,000 of expenses for professional fundraising services 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 G, Part I. See instructions       17       X         18       Did the organization report more than \$15,000 otal of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If		Schedule D, Parts XI and XII	12a	Х	
13       Is the organization a school described in section 170(b)(1)(A)(ii)?       If "Yes," complete Schedule E       13       X         14a       Did the organization maintain an office, employees, or agents outside of the United States?       14a       X         b       Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV       14b       X         15       Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garets or other assistance to or for any foreign individuals? If "Yes," complete Schedule F, Parts II and IV       15       X         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 II and IV       16       X         17       Did the organization report an 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.       18       X       17       X         18       Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, lines 1c and 8a? If "yes," complete Schedule G, Part II       18       X       18       X         19       Did the organization operate one or more hospital facilities? If "Yes," complete Schedul	b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
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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       20b         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	40		18	Δ	<u> </u>
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b       If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?       20b         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	~~				
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					<u> </u>
domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		<u> </u>
	21		21	x	
	232000				(2022)

232003 12-13-22

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FUIII	990	(2022)

	· (contractor)		N/	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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	LL		
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		x
<b>24</b> a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the	20		
270	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
-	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	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			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			1
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see 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	28a		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 non-cash contributions? If "Yes," complete Schedule M	29		X
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	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
~~	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	34		x
25.2	Part V, line 1 Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	000		<u> </u>
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	000		
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		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			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 16			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		v	
0000-	(gambling) winnings to prize winners?	1c	X 990	 (2022)
232004	. 12-13-22	LOLU		(2022)

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Form	990 (2022) UNITED WAY OF THE LAKESHORE t V Statements Regarding Other IRS Filings and Tax Compliance (continued)		38-1426	895	P	age <b>5</b>
I U	Statements negaring other into rinings and rax compliance (continued)				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,	1				
	filed for the calendar year ending with or within the year covered by this return	2a	17			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ns?		2b	Х	
				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	Ο.		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accour	nt)?	4a		X
b	If "Yes," enter the name of the foreign country					
5-	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A			5.		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a 5b		X
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction file "Yes" to line 5a or 5b, did the organization file Form 8886-T?			50 50		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th			50		
Ua				6a		х
h	any contributions that were not tax deductible as charitable contributions?					
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices r	provided to the payor?	7a	Х	
				7b		Х
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	:t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	orm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fi	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	l by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	Did the sponsoring organization make any taxable distributions under section 4966?			9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:	1	1			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a		-		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		-		
11	Section 501(c)(12) organizations. Enter:		1			
a L	Gross income from members or shareholders	11a		1		
a	Gross income from other sources. (Do not net amounts due or paid to other sources against	11b				
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	•	2	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.	020	1			
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
-	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
14a				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu	le O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see 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	t incor	ne?	16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.				000	(0000)
232005	5 12-13-22 F			Form	1 330	(2022)

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1a Enter the number of voting members of the governing body at the end of the tax year

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30

1a

X

Yes No

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

Check if Schedule O contains a response or note to any line in this Part V	1
Section A. Governing Body and Management	

	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
•	organization's mailing address? If "Yes." provide the names and addresses on Schedule O	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This occion b requests mornation about policies not required by the internal neveral odde.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	on Schedule O how this was done	12c	х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	10.0		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
100		16a		х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	10.0		
17	List the states with which a copy of this Form 990 is required to be filed $\_$ MI			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availat	ole
10	for public inspection. Indicate how you made these available. Check all that apply.	ony)	avana	510
	X       Own website       Another's website       X       Upon request       Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan		
19	statements available to the public during the tax year.	mail	Jiai	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	UNITED WAY OF THE LAKESHORE - (231) 722-3134			
	31 E. CLAY AVENUE, MUSKEGON, MI 49442			
222004	12-13-22	Form	990	(2022)
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#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

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

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

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, 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)	(B)		(C)					(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one				ane	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	aad	Irecto	r/trus	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	e or di	ee			sated		organization	(W-2/1099-MISC/	from the
	related organizations	rustee	l trust		ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	dual ti	utiona	_	nploy	st cor	1	1000 NEO)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			o gamzanono
(1) CHRISTINE ROBERE	50.00									
PRESIDENT				Х				114,170.	0.	9,675.
(2) BRAD HILLEARY	1.00									
DIRECTOR		X						0.	Ο.	0.
(3) BRENDA K. JACOBS	1.00									
DIRECTOR		Х						0.	0.	0.
(4) CHRIS WREN	1.00									
DIRECTOR		X						0.	Ο.	0.
(5) DJ HILSON	1.00									
DIRECTOR		Х						0.	0.	0.
(6) ERIN KUHN	1.00									
DIRECTOR		Х						0.	0.	0.
(7) GARY NELUND	1.00									
DIRECTOR		Х						0.	0.	0.
(8) JILLIAN MELOCHE	1.00									
DIRECTOR		Х						0.	0.	0.
(9) JIM STEFFEL	1.00									
DIRECTOR		Х						0.	0.	0.
(10) JOHN SCHAUB	1.00									
DIRECTOR		Х						0.	0.	0.
(11) JONATHAN WILSON	1.00									
DIRECTOR		Х						0.	0.	0.
(12) KATHY MOORE	1.00									
CHAIRPERSON		Х		Х				0.	0.	0.
(13) KAY WILLIAMS	1.00									-
DIRECTOR - PARTIAL YEAR		Х						0.	0.	0.
(14) KIM SUAREZ	1.00									-
DIRECTOR		Х						0.	0.	0.
(15) LORI LITTLE	1.00									-
DIRECTOR - PARTIAL YEAR		Х						0.	0.	0.
(16) PAT SHAFER	1.00									-
DIRECTOR		Х						0.	0.	0.
(17) POPPY HERNANDEZ	1.00	l								-
DIRECTOR		Х						0.	0.	0.
232007 12-13-22				_	-					Form <b>990</b> (2022)

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Form 990 (2022) UNITED W	AY OF TH	ΙE	LA	KE	SH	IOR	E		38-1426	<b>895</b> Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A) Name and title	(B) Average hours per week	(do not check more than one			than d is both	n an	(D) Reportable compensation	(E) Reportable compensation	<b>(F)</b> Estimate amount c		
	(list any hours for related organizations below line)	Individual trustee or director	In stitutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensat from the organizatio and relate organizatio	e on ed
(18) RICH HOUTTEMAN DIRECTOR	1.00	x						0.	0.		0.
(19) RYAN BENNETT	1.00	Λ						0.	0.		0.
SECRETARY		х		x				0.	0.		0.
(20) SHAWN BUCKNER DIRECTOR	1.00	x						0.	0.		0.
(21) STACY MELLEMA	1.00										
TREASURER		х		х				0.	0.		0.
(22) STEVE JACKSON	1.00								0		•
DIRECTOR (23) TAMICA SAIN	1.00	Х						0.	0.		0.
DIRECTOR		x						0.	0.		0.
(24) KRIS COLLEE DIRECTOR - PARTIAL YEAR	1.00	x						0.	0.		0.
(25) JOCELYN HINES	1.00										
DIRECTOR - PARTIAL YEAR		х						0.	0.		0.
(26) SHAWNTAIN JENKINS	1.00	.,,							0		^
							0.	9,67	0.		
1b Subtotal c Total from continuation sheets to Part V								0.	0.	,,,,	0.
d Total (add lines 1b and 1c)								114,170.	0.	9,67	75.
2 Total number of individuals (including but r								ceived more than \$100,	000 of reportable		
compensation from the organization											1
3 Did the organization list any <b>former</b> officer	, director, trust	ee, k	key e	empl	oye	e, or	hig	hest compensated empl	oyee on	Yes	No
line 1a? If "Yes," complete Schedule J for s										3	X
4 For any individual listed on line 1a, is the s											77
and related organizations greater than \$15 5 Did any person listed on line 1a receive or										4	X
5 Did any person listed on line 1a receive or rendered to the organization? <i>If</i> "Yes." <i>cor</i>								•		5	Х
Section B. Independent Contractors			01 30		0013	011					
1 Complete this table for your five highest co	ompensated inc	lepe	nder	nt co	ontra	acto	rs th	at received more than \$	100,000 of compensa	tion from	
the organization. Report compensation for	the calendar ye	ear e	endin	ng w	ith c	or wi	thin T		ear.		
(A) Name and business	s address	NC	ONE	5				<b>(B)</b> Description of s	ervices C	(C) compensatior	ı
		140		-				2000.1210.1010			
2 Total number of independent contractors (		ot lir	nitec	d to			ted	above) who received mo	ore than		
\$100,000 of compensation from the organ				<u></u>	)	-		THE		000	
SEE PART VII, SECTIO	N A CONT	·τΝ	UΑ	.т.т	ON	S	нĽ	ets		Form <b>990</b> (2	2022)

Form 990 UNITED WAY OF THE LAKESHOR						E					
Part VII Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ai	nd H	lighe	est (	Compensated Employe	es (continued)		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average			Pos		1		Reportable	Reportable	Estimated	
	hours	(c				app	ly)	compensation	compensation	amount of	
	per						,,	from	from related	other	
	week					/ee		the	organizations	compensation	
	(list any	ector				nplo		organization	(W-2/1099-MISC)	from the	
	hours for	r dire				ted ei		(W-2/1099-MISC)		organization	
	related	stee o	ustee			en sa				and related	
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest com pensated em ployee				organizations	
	below	vidua	itutio	Officer	emp	hesto	Former				
	line)	Indi	Inst	Offi	Key	Hig	For				
(27) JASON OLTHOFF	1.00								0	0	
DIRECTOR - PARTIAL YEAR	1 0 0	Х			<u> </u>			0.	0.	0.	
(28) JACK RUSSELL DIRECTOR – PARTIAL YEAR	1.00	x						0.	0.	0.	
(29) PAUL WATSON	1.00	~	-	-		-		0.	0.	0.	
DIRECTOR - PARTIAL YEAR	1.00	x						0.	0.	0.	
(30) MATTHEW WERKSMA	1.00	Δ						0.	0.		
DIRECTOR - PARTIAL YEAR	1.00	х						0.	0.	0.	
(31) WALTER CHRISTOPHERSEN	1.00										
SECRETARY - PARTIAL YEAR		х						0.	0.	0.	
(32) MARTHA GABRIELSE	1.00										
DIRECTOR - PARTIAL YEAR		Х						0.	0.	0.	
(33) ERIK GENTZKOW	1.00										
DIRECTOR - PARTIAL YEAR		Х						0.	0.	0.	
(34) STACEY GOMEZ	1.00									_	
DIRECTOR - PARTIAL YEAR		Х						0.	0.	0.	
(35) MIKE REYNOLDS	1.00								0	0	
DIRECTOR (36) LISA SABOURIN	1.00	Х						0.	0.	0.	
DIRECTOR - PARTIAL YEAR	1.00	x						0.	0.	0.	
(37) TOM SCHULTZ	1.00	21									
DIRECTOR - PARTIAL YEAR	1.00	х						0.	0.	0.	
(38) JOHN SEVERSON	1.00										
PAST BOARD CHAIR		х						0.	0.	0.	
		1									
		<u> </u>			-						
	1	L				1	I				
Total to Part VII, Section A, line 1c											
								1			

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		(2022) UNITED WAY OF T	THE LAKE	SHORE		38-1426	895 Page <b>9</b>
Pa	rt VI						
		Check if Schedule O contains a response or n	note to any line	e in this Part VIII (A)	(B)	(C)	(D)
				Total revenue	Related or exempt	Unrelated	Revenue excluded
					function revenue	business revenue	from tax under sections 512 - 514
s u	1 :	Federated campaigns 1a 16	52,483.				
ant		Membership dues 1b					
ي ق			11,340.				
ifts ar A	c	Related organizations 1d					
s, G Mila	e	Government grants (contributions)					
r Sign	f	All other contributions, gifts, grants, and					
Contributions, Gifts, Grants and Other Similar Amounts			12,450.				
ontr od O	ç	Noncash contributions included in lines 1a-1f					
Ŭ d	ł	Total. Add lines 1a-1f		3,286,273.			
	_		usiness Code				
ice	2 8						
serv ue	k						
am Ser evenue		; 					
Program Service Revenue	é	·					
Pro	f	All other program service revenue					
	ç						
	3	Investment income (including dividends, interest,					
		other similar amounts)		29,194.			29,194.
	4	Income from investment of tax-exempt bond proce	eeds				
	5	Royalties					
	_		(ii) Personal				
		Gross rents         6a         79,541.           Less: rental expenses         6b         0.					
		Not rontal incomo or (loss)		79,541.			79,541.
		Gross amount from sales of (i) Securities	(ii) Other	/ / / / / / / /			/ / / / / / / /
		assets other than inventory <b>7a 13,746</b> .					
	k	Less: cost or other basis					
ne		and sales expenses 7b 9,760.					
venue	c	Gain or (loss)					
Be		Net gain or (loss)		3,986.			3,986.
Other Re	8 8	Gross income from fundraising events (not					
δ		including \$ 11,340. of					
		contributions reported on line 1c). See	00,493.				
			48,773.				
		Net income or (loss) from fundraising events	10,1131	51,720.			51,720.
		Gross income from gaming activities. See		01,1100			0177200
		Part IV, line 19					
	k	Less: direct expenses					
		Net income or (loss) from gaming activities					
	10 a	Gross sales of inventory, less returns					
		and allowances 10a					
		Less: cost of goods sold 10b					
	(	Net income or (loss) from sales of inventory					
sn	44 -		usiness Code 900099	2,160.	2,160.		
neo	l i a k			2,100.			
ellai ver							
Miscellaneous Revenue		All other revenue					
Σ		• Total. Add lines 11a-11d		2,160.			
	12	Total revenue. See instructions		3,452,874.	2,160.	0.	164,441.
23200	9 12-1	3-22					Form <b>990</b> (2022)

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#### Form 990 (2022)

UNITED WAY OF THE LAKESHORE 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).

7b, 8 1 2 3	Check if Schedule O contains a respons ot include amounts reported on lines 6b, bb, 9b, and 10b of Part VIII. Grants and other assistance to domestic organizations	(A) Total expenses	(B) Program service	(C) Management and	(D)
7b, 8 1 2 3	b, 9b, and 10b of Part VIII.	lotal expenses	Program service	Management and 1	
2 3	Grants and other assistance to domestic organizations		expenses	general expenses	Fundraising expenses
2 3					·
3	and domestic governments. See Part IV, line 21	2,227,417.	2,227,417.		
3	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
٨	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	123,847.	61,948.	32,832.	29,067.
	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	504,395.	268,547.	25,015.	210,833.
	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	23,146.	8,416. 30,968.	9,807. 28,751.	4,923. 17,263. 18,986.
9	Other employee benefits	76,982.	30,968.	28,751.	17,263.
	Payroll taxes	48,099.	24,444.	4,669.	18,986.
	Fees for services (nonemployees):				
а	Management				
b	Legal				
с	Accounting	14,300.		14,300.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	11,268.		11,268.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	100,487.	6,733.	92,329.	<u>1,425.</u> 22,380.
	Advertising and promotion	32,888.	508.	10,000.	22,380.
	Office expenses	45,004.	11,530.	25,524.	7,950.
	Information technology	39,838.	10,128.	22,558.	7,152.
15	Royalties	10.000	2 2 2 2	4 000	
	Occupancy	12,000.	3,960.	4,800.	3,240.
17	Travel	8,364.	4,729.	115.	3,520.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	40 110	28 525	4 501	
	Conferences, conventions, and meetings	42,116.	37,535.	4,581.	
20		26 250	14.000	1 1 1 1 1	
	Payments to affiliates	36,259.	14,866.	14,141.	7,252.
	Depreciation, depletion, and amortization	31,277.	31,277.	1,350.	1 510
23		10,602.	7,739.	I,35U.	1,513.
	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.)				
	BUILDING AND EQUIPMENT	72,100.	68,557.	1,719.	1,824.
	FUNDRAISING EVENTS & ME	45,451.		<u> </u>	45,451.
	CAMPAIGN SUPPLIES	18,478.			18,478.
	MEMBERSHIP DUES & SUBSC	9,497.	1,157.	8,330.	10.
	All other expenses	16,717.	8,945.	5,333.	2,439.
	Total functional expenses. Add lines 1 through 24e	3,550,532.	2,829,404.	317,422.	403,706.
	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)				

11

232010 12-13-22

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33

Total liabilities and net assets/fund balances

33

Form 990 (2022)

Form 990 (2022)

UNITED WAY OF THE LAKESHORE Part X | Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 1,264,732. 683,138. 1 1 Cash - non-interest-bearing 116,684. 0. 2 Savings and temporary cash investments 2 761,258. 965,314. Pledges and grants receivable, net 3 3 12,430. 9,907. 4 4 Accounts receivable, net Loans and other receivables from any current or former officer, director, 5 trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 5 6 Loans and other receivables from other disqualified persons (as defined 6 under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) Notes and loans receivable, net 7 7 Assets 8 Inventories for sale or use 8 7,704. 7,622. 9 Prepaid expenses and deferred charges 9 **10a** Land, buildings, and equipment: cost or other 1,760,958. basis. Complete Part VI of Schedule D \_\_\_\_\_ 10a 952,163. 837,594. 808,795. b Less: accumulated depreciation 10b 10c 412,214. Investments - publicly traded securities 11 11 Investments - other securities. See Part IV, line 11 12 12 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets 996,194. 817,296. 15 15 Other assets. See Part IV, line 11 3,996,514. 3,704,368. 16 **Total assets.** Add lines 1 through 15 (must equal line 33) 16 39,288. 65,213. Accounts payable and accrued expenses 17 17 225,739. 166,964. 18 18 Grants payable 19 19 Deferred revenue Tax-exempt bond liabilities 20 20 Escrow or custodial account liability. Complete Part IV of Schedule D 21 21 22 Loans and other payables to any current or former officer, director, Liabilities trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons 22 Secured mortgages and notes payable to unrelated third parties 23 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 25 232,177. 265,027. 26 26 Total liabilities. Add lines 17 through 25 X Organizations that follow FASB ASC 958, check here Net Assets or Fund Balances and complete lines 27, 28, 32, and 33. 2,875,658. 27 2,340,334. 27 Net assets without donor restrictions Net assets with donor restrictions 888,679. 1,099,007. 28 28 Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. 29 Capital stock or trust principal, or current funds 29 Paid-in or capital surplus, or land, building, or equipment fund 30 30 31 Retained earnings, endowment, accumulated income, or other funds 31 3,439,341. 3,764,337. 32 Total net assets or fund balances 32 3,996,514. 3,704,368.

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Form	990 (2022) UNITED WAY OF THE LAKESHORE	38-14	426895	Pag	<sub>ge</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						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,452				
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,550				
3	Revenue less expenses. Subtract line 2 from line 1	3	-97				
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,764				
5	Net unrealized gains (losses) on investments	5	-227	, 33	38.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,						
	column (B))	10	3,439	, 34	<u>41.</u>		
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 O.						
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?						
	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	х			
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,					
	consolidated basis, or both:						
	X Separate basis Consolidated basis Both consolidated and separate basis						
с	c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,						
	review, or compilation of its financial statements and selection of an independent accountant?						
	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 requi	red audit					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits						

Form **990** (2022)

232012 12-13-22

Department of the Treasury Internal Revenue Service

(Form 990)

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

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public

1

## Name of the organization

UNITED WAY OF THE LAKESHORE 38-3	-1426895								
Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.									
The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)									
1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).									
2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)									
3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the h	e hospital's name,								
city, and state:									
5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in	'n								
section 170(b)(1)(A)(iv). (Complete Part II.)									
6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public	olic described in								
section 170(b)(1)(A)(vi). (Complete Part II.)									
8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)									
9 An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant colle	-								
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or									
university:									
10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gro	•								
activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from (	-								
income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after of	r June 30, 1975.								
See section 509(a)(2). (Complete Part III.)									
11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).									
12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purp	-								
more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check									
<ul> <li>a Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving</li> </ul>	ina								
a <b>Type I.</b> A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the support	•								
organization. You must complete Part IV, Sections A and B.	orting								
<b>b Type II.</b> A supporting organization supervised or controlled in connection with its supported organization(s), by having	1								
control or management of the supporting organization vested in the same persons that control or manage the supporte									
organization(s). You must complete Part IV, Sections A and C.									
c Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with	with.								
its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E.	,								
d Type III non-functionally integrated. A supporting organization operated in connection with its supported organization	on(s)								
that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentivenes									
requirement (see instructions). You must complete Part IV, Sections A and D, and Part V.									
e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III									
functionally integrated, or Type III non-functionally integrated supporting organization.									
f Enter the number of supported organizations									
g Provide the following information about the supported organization(s).									
(dependence in the second seco	(vi) Amount of other								
organization (described on lines 1-10 above (see instructions)) Yes No support (see instructions) supp	pport (see instructions)								
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization

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

Sec	ction A. Public Support								
Cale	ndar year (or fiscal year beginning in)	<b>(a)</b> 2018	<b>(b)</b> 2019	<b>(c)</b> 2020	(d) 2021	(e) 2022	(f) Total		
1	Gifts, grants, contributions, and								
	membership fees received. (Do not								
	include any "unusual grants.")	2675630.	2567223.	2812539.	2575074.	3286273.	13916739.		
2	Tax revenues levied for the organ-								
	ization's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	2675630.	2567223.	2812539.	2575074.	3286273.	13916739.		
	The portion of total contributions								
•	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						436,219.		
6	Public support. Subtract line 5 from line 4.						13480520.		
	ction B. Total Support						19400920.		
		<b>(a)</b> 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022			
	ndar year (or fiscal year beginning in) Amounts from line 4	2675630.	2567223.	2812539.	2575074.	3286273	(f) Total 13916739.		
		2075050.	2307223.	2012555.	2373074.	5200275.	13510735.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,	79,890.	90,344.	217,681.	212,010.	108,735.	708,660.		
•	and income from similar sources	19,090.	90,344.	217,001.	212,010.	100,755.	700,000.		
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	15 050	00.000	10 200	0 600	0 1 6 0			
	assets (Explain in Part VI.)	15,252.	22,226.	17,372.	9,620.	2,160.			
11	Total support. Add lines 7 through 10						14692029.		
12						12			
13	First 5 years. If the Form 990 is for the	-		-					
_	organization, check this box and stop	<u>here</u>	·····						
	ction C. Computation of Publi								
	Public support percentage for 2022 (li					14	91.75 %		
	Public support percentage from 2021					15	90.14 %		
16a	33 1/3% support test - 2022. If the c	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo			
	stop here. The organization qualifies		-						
b	33 1/3% support test - 2021. If the c	organization did no	t check a box on l	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	is box		
	and stop here. The organization qual								
17a	10% -facts-and-circumstances test	- 2022. 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,		
	and if the organization meets the facts	s-and-circumstance	es test, check this	box and stop her	r <b>e.</b> Explain in Part '	VI how the organiz	ation		
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization								
b	10% -facts-and-circumstances test	- 2021. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or		
	more, and if the organization meets th	ne facts-and-circum	istances test, cheo	k this box and <b>st</b>	op here. Explain ir	n Part VI how the			
	organization meets the facts-and-circu	umstances test. Th	e organization qua	lifies as a publicly	supported organiz	ation			
18	Private foundation. If the organizatio	n did not check a l	box on line 13, 16a	a, 16b, 17a, or 17b	, check this box ar	nd see instructions	s		
							(Form 990) 2022		

Schedule A							LAKESHORE	_
Part III	Support	: Schedule for	or Organizat	tions	Desci	ribed i	in Section 509	(a)(2)

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

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1 Gifts, grants, contributions, and						
membership fees received. (Do not						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
<b>3</b> 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						
6 Total. Add lines 1 through 5						
<b>7a</b> Amounts included on lines 1, 2, and						
3 received from disgualified persons						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support			-	1		
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9 Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
<b>b</b> Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> 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.)						
<b>13</b> 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) orga	nization,
check this box and stop here						
Section C. Computation of Publ	ic Support Per	rcentage				
<b>15</b> Public support percentage for 2022 (	line 8, column (f), c	divided by line 13,	column (f))		15	%
16 Public support percentage from 2021					16	%
Section D. Computation of Inves						
17 Investment income percentage for 20					17	%
<b>18</b> Investment income percentage from					18	%
19a 33 1/3% support tests - 2022. If the						line 17 is not
more than 33 1/3%, check this box a						
b 33 1/3% support tests - 2021. If the	-					
line 18 is not more than 33 1/3%, che			•		0	ation
20 Private foundation. If the organization	on did not check a	box on line 14, 19	a, or 19b, check t	his box and see ins		
232023 12-09-22					Sche	dule A (Form 990) 2022

1

Yes No

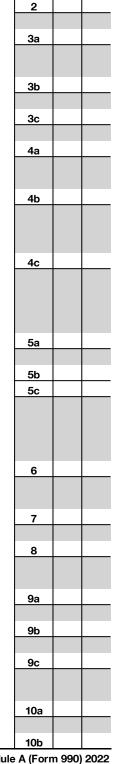
#### Part IV | Supporting Organizations

(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")? // "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?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to 6 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 disgualified 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.)

232024 12-09-22



Schedule A (Form 990) 2022

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#### Schedule A (Form 990) 2022 UNITED WAY OF THE LAKESHORE

1

2

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						
b	b 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 or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported						

	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.
2	Did the organization operate for the benefit of any supported organization other than the supported
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization.	
Section C. Type II Supporting Organizations	

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		

Section D. All Type III Supporting Organizations	
--	--

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
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			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used	l to satisfy the	e Integral Part Test d	uring the year	see instructions).
-					

- a 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.*

с		The organization supported a governmental entity.	Describe in Part VI how	v you supported a governmental entity	(see instruction <u>s).</u>
---	--	---	-------------------------	---------------------------------------	-----------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- 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.* 

 Yes
 No

 2a
 ...

 2a
 ...

 2b
 ...

 2b
 ...

 3a
 ...

 3b
 ...

232025 12-09-22

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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	on 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	on C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	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-functional	ly integrat	ed Type III supporting orga	anization (see
	instructions).			
				Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

Section A - Adjusted Net Income

Net short-term capital gain

Recoveries of prior-year distributions

1

1

2

All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( *explain in* **Part VI**). See instructions.

1

2

(B) Current Year

(optional)

(A) Prior Year

232026 12-09-22

Schedule A	(Form 990)	2022 (	UNI	TED	WAY	OF	THE	LAKESH	ORE	
Part V	Type III	Non-F	unctionally	Integ	rated	509(a	a)(3) S	upporting	Organi	zation
Section D -	Distributi	ons								

ounts paid to supported organizations to accomplish exer ounts paid to perform activity that directly furthers exemp anizations, in excess of income from activity ministrative expenses paid to accomplish exempt purpose ounts paid to acquire exempt-use assets alified set-aside amounts (prior IRS approval required - pro- ner distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. <b>Ital annual distributions.</b> Add lines 1 through 6. tributions to attentive supported organizations to which the <i>ovide details in</i> <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions)	t purposes of supported es of supported organizations pvide details in <b>Part VI</b> )	1 2 3 3 4 5 6 7 6 7 8 9 10 10 (ii) Underdistributions Pre-2022	
anizations, in excess of income from activity ministrative expenses paid to accomplish exempt purpose ounts paid to acquire exempt-use assets alified set-aside amounts (prior IRS approval required - pro- ner distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. <b>Ital annual distributions.</b> Add lines 1 through 6. tributions to attentive supported organizations to which the <i>poide details in</i> <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions) tributable amount for 2022 from Section C, line 6	es of supported organizations by ide details in <b>Part VI</b> ) ne organization is responsive (i)	s 3 4 5 6 7 7 8 9 10 (ii) Underdistributions	
anizations, in excess of income from activity ministrative expenses paid to accomplish exempt purpose ounts paid to acquire exempt-use assets alified set-aside amounts (prior IRS approval required - pro- ner distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. <b>Ital annual distributions.</b> Add lines 1 through 6. tributions to attentive supported organizations to which the <i>poide details in</i> <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions) tributable amount for 2022 from Section C, line 6	es of supported organizations by ide details in <b>Part VI</b> ) ne organization is responsive (i)	s 3 4 5 6 7 7 8 9 10 (ii) Underdistributions	
ministrative expenses paid to accomplish exempt purpose ounts paid to acquire exempt-use assets alified set-aside amounts (prior IRS approval required - pro- ner distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. tal annual distributions. Add lines 1 through 6. tributions to attentive supported organizations to which the <i>povide details in</i> <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions) tributable amount for 2022 from Section C, line 6	ovide details in Part VI) ne organization is responsive (i)	s 3 4 5 6 7 7 8 9 10 (ii) Underdistributions	
ounts paid to acquire exempt-use assets alified set-aside amounts (prior IRS approval required - pro- ner distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. tal annual distributions. Add lines 1 through 6. tributions to attentive supported organizations to which the <i>byide details in</i> <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions) tributable amount for 2022 from Section C, line 6	ovide details in Part VI) ne organization is responsive (i)	4 5 6 7 8 9 10 (ii) Underdistributions	
alified set-aside amounts (prior IRS approval required - pro- ner distributions ( <i>describe in</i> <b>Part VI</b> ). See instructions. tal annual distributions. Add lines 1 through 6. tributions to attentive supported organizations to which the <i>bvide details in</i> <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions) tributable amount for 2022 from Section C, line 6	e organization is responsive	5 6 7 8 9 10 (ii) Underdistributions	
<ul> <li>her distributions (<i>describe in</i> Part VI). See instructions.</li> <li>hal annual distributions. Add lines 1 through 6.</li> <li>tributions to attentive supported organizations to which the bound of the end of th</li></ul>	e organization is responsive	6 7 8 9 10 (ii) Underdistributions	
al annual distributions. Add lines 1 through 6.         tributions to attentive supported organizations to which the point of the	(i)	8 9 10 (ii) Underdistributions	
tributions to attentive supported organizations to which th ovide details in <b>Part VI</b> ). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount <b>E - Distribution Allocations</b> (see instructions) tributable amount for 2022 from Section C, line 6	(i)	9 10 (ii) Underdistributions	
by ide details in Part VI). See instructions. tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount E - Distribution Allocations (see instructions) tributable amount for 2022 from Section C, line 6	(i)	9 10 (ii) Underdistributions	
tributable amount for 2022 from Section C, line 6 e 8 amount divided by line 9 amount E - Distribution Allocations (see instructions) tributable amount for 2022 from Section C, line 6		9 10 (ii) Underdistributions	
e 8 amount divided by line 9 amount E - Distribution Allocations (see instructions) tributable amount for 2022 from Section C, line 6		(ii) Underdistributions	
E - Distribution Allocations (see instructions) tributable amount for 2022 from Section C, line 6		(ii) Underdistributions	
tributable amount for 2022 from Section C, line 6	Excess Distributions		
· · · · ·		P1e-2022	Distributable Amount for 2022
derdistributions, if any, for years prior to 2022 (reason-			
e cause required - explain in Part VI). See instructions.			
cess distributions carryover, if any, to 2022			
m 2017			
m 2018			
m 2019			
m 2020			
m 2021			
al of lines 3a through 3e			
plied to underdistributions of prior years			
blied to 2022 distributable amount			
ryover from 2017 not applied (see instructions)			
nainder. Subtract lines 3g, 3h, and 3i from line 3f.			
tributions for 2022 from Section D,			
e7: \$			
plied to underdistributions of prior years			
blied to 2022 distributable amount			
nainder. Subtract lines 4a and 4b from line 4.			
naining underdistributions for years prior to 2022, if			
0			
cess distributions carryover to 2023. Add lines 3j			
14c.			
akdown of line 7:			
cess from 2018			
cess from 2019			
cess from 2021			
	n 2021 al of lines 3a through 3e lied to underdistributions of prior years lied to 2022 distributable amount yover from 2017 not applied (see instructions) nainder. Subtract lines 3g, 3h, and 3i from line 3f. ributions for 2022 from Section D, 7: \$ lied to underdistributions of prior years lied to 2022 distributable amount nainder. Subtract lines 4a and 4b from line 4. naining underdistributions for years prior to 2022, if Subtract lines 3g and 4a from line 2. For result greater a zero, explain in Part VI. See instructions. naining underdistributions for 2022. Subtract lines 3h 4b from line 1. For result greater than zero, explain in <b>VI</b> . See instructions. ess distributions carryover to 2023. Add lines 3j 4c. akdown of line 7: ess from 2018	n 2021       Image: State of the state of t	n 2021       n         al of lines 3a through 3e       n         lied to underdistributions of prior years       n         lied to 2022 distributable amount       n         yover from 2017 not applied (see instructions)       n         nainder. Subtract lines 3g, 3h, and 3i from line 3f.       n         ributions for 2022 from Section D,       n         7:       \$         lied to underdistributions of prior years       n         lied to underdistributions of prior years       n         lied to 2022 distributable amount       n         haining underdistributions for years prior to 2022, if       n         Subtract lines 3g and 4a from line 4.       n         naining underdistributions for 2022. Subtract lines 3h       n         4b from line 1. For result greater than zero, explain in       n         xIV. See instructions.       n         naining underdistributions for 2023. Add lines 3j       n         4c.       n         akdown of line 7:       n         ses from 2018       n         ses from 2019       n

Schedule A (Form 990) 2022

(Form 990) 2022	UNITED	WAY	OF THE	LAKESHOR	E	38-1426895	Page
Section D, lines 5, 6, ar	ormation. Pro s 1, 2, 3b, 3c, 4b, D, lines 2 and 3; I nd 8; and Part V,	vide the e 4c, 5a, 6 Part IV, Se Section E	explanations , 9a, 9b, 9c, ection E, line , lines 2, 5, a	required by Part I 11a, 11b, and 110 s 1c, 2a, 2b, 3a, a nd 6. Also compl	, line 10; Part II, line 17a ;; Part IV, Section B, line nd 3b; Part V, line 1; Pa ete this part for any add	a or 17b; Part III, line 12; es 1 and 2; Part IV, Section rt V, Section B, line 1e; Pa itional information.	C, rt V,
(See instructions.)							

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<del>9</del> 0)

## **Supplemental Financial Statements**

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

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



Employer identification number

Name of the organization

Department of the Treasury

Internal Revenue Service

#### UNITED WAY OF THE LAKESHORE

	UNITED WAY OF THE	LAKESHORE	38-1426895
Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lir	ne 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
	Aggregate value of contributions to (during year)		
2			
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	-	
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	advisors in writing that grant funds can be used o	nly
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose conferr	ing
Par	t II Conservation Easements. Complete if the or	ganization answered "Yes" on Form 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea		prically important land area
	Protection of natural habitat	Preservation of a certi	• •
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form of a co	nservation easement on the last
-	day of the tax year.		Held at the End of the Tax Year
~			2a
a L	Total number of conservation easements		
b	<b>c</b>		2b
c	Number of conservation easements on a certified historic str		2c
d	Number of conservation easements included in (c) acquired		
	historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the organi	zation during the tax
	year		
4	Number of states where property subject to conservation ear	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conservatio	on easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation eas	sements during the year
8	Does each conservation easement reported on line 2(d) abov	ve satisfy the requirements of section 170(h)(4)(B)	(i)
9	In Part XIII, describe how the organization reports conservati		
·	balance sheet, and include, if applicable, the text of the foot	•	
	organization's accounting for conservation easements.		
Par		f Art, Historical Treasures, or Other S	imilar Assets
	Complete if the organization answered "Yes" on Form		
10	If the organization elected, as permitted under FASB ASC 95		anaa ahaat warka
Id		· ·	
	of art, historical treasures, or other similar assets held for pul		ice of public
_	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	c exhibition, education, or research in furtherance	e of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financial gain, p	provide
	the following amounts required to be reported under FASB A		
а	Revenue included on Form 990, Part VIII, line 1		\$
	Assets included in Form 990, Part X		
	For Paperwork Reduction Act Notice, see the Instruction		Schedule D (Form 990) 2022
	09-01-22		

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Sche		WAY OF THE					38-14	2689	5 ра	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art,	, Historical Tre	asures, or O	ther S	Similar	Assets	(contir	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that ma	ke sign	nificant u	ise of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	hange program						
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	•		•	•	• •	se in Part	XIII.		
5	During the year, did the organization solicit or		,	,	milar as	ssets		-		_
	to be sold to raise funds rather than to be ma					<u></u>		Yes		No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered "Yes	s" on Fo	orm 990	, Part IV, I	ine 9, or		
	reported an amount on Form 990, Par									
1a	Is the organization an agent, trustee, custodia		•					7		-
	on Form 990, Part X?						∟	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	owing table:					<b>A</b>		
								Amoun	t	
	Beginning balance					1c				
	Additions during the year					1d				
e	Distributions during the year					1e				
T	Ending balance					1f		<b>X</b>		
	Did the organization include an amount on Fo					<i>c</i>	L	Yes		_ No
Par	If "Yes," explain the arrangement in Part XIII. <b>t V</b> Endowment Funds. Complete in									
		(a) Current year	(b) Prior year	(c) Two years ba			ears back	(e) Four	vears	hack
10	Beginning of year balance	1,864,423.	1,659,600.	1,516,9	`		06,404.		,010,	
		675.	1,800.				27,866.	-		299.
b	Contributions Net investment earnings, gains, and losses	-297,791.	242,330.	,			68,378.		,	550.
с А	Grants or scholarships	30,462.	30,150.	37,8			75,500.		,	310.
u	Other expenditures for facilities								,	
e		4,386.							3	076.
f	Administrative expenses	15,444.	9,157.	13,5	45.		10,201.			933.
g		1,517,015.	1,864,423.	-			16,947.			404.
2	Provide the estimated percentage of the curr		, ,						<u> </u>	
- a	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
c		/~ %								
-	The percentages on lines 2a, 2b, and 2c shou									
3a	Are there endowment funds not in the posses		ion that are held ar	d administered f	or the					
	organization by:	5						]	Yes	No
	(i) Unrelated organizations							3a(i)	Х	
	(ii) Related organizations							3a(ii)		х
b	If "Yes" on line 3a(ii), are the related organiza							3b		
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Pa	rt X, lin	ie 10.				
	Description of property	<b>(a)</b> Cost or ot basis (investm	. ,		• •	umulate	d	<b>(d)</b> Boo	k valu	е
1a	Land		15	3,833.				15	3,8	33.
	Buildings			1,238.	55	54,49	95.		6,7	
	Leasehold improvements									
	Equipment		43	5,887.	39	97,60	58.	3	8,2	19.
	Other									
Tota	. Add lines 1a through 1e. (Column (d) must ed		. column (B). line 10	Dc.)	<u></u>	<u></u>		80	8,7	95.
		-								

Schedule D (Form 990) 2022

Part VII Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990 Part IV line	11b See Form 990 Part X line 12	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	-of-vear market value
(1) Financial derivatives	(-)	(-)	
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	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 end	-of-vear market value
(1)			,
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)           Part IX         Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990, Part X, line 15.	
(a)	Description		(b) Book value
(1) BENEFICIAL INTEREST IN AS	SETS HELD BY C	DTHERS	817,296.
(2)			
(3)			
(4)			
(5)			
<u>(6)</u>			
(7)			
(8)			
(9) Total. (Column (b) must equal Form 990, Part X, col. (B) line	e 15.)		817,296.
Part X Other Liabilities.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25.	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4) (5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990. Part X, col. (B) line	25.)		
2. Liability for uncertain tax positions. In Part XIII, provide			at reports the
organization's liability for uncertain tax positions under			

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Schedule D (Form 990) 2022

	dule D (Form 990) 2022 UNITED WAY OF THE LAKESHOR			1426895 Page 4		
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	2,806,725.	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	. 2a	-227,338.			
b	Donated services and use of facilities	. 2b	10,600.			
с	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	48,016.			
е	Add lines 2a through 2d			2e	-168,722.	
3	Subtract line 2e from line 1			3	2,975,447.	
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	11,268.			
b	Other (Describe in Part XIII.)	4b	466,159.			
c Add lines 4a and 4b					477,427.	
С				4c		
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990. Part I. line 12.</i> )			5	3,452,874.	
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b>	ents With		5	3,452,874.	
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990. Part I. line 12.</i> )	ents With		5	3,452,874. n.	
5	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b>	ents With	n Expenses per R	5	3,452,874.	
5 Pa	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a	ents With	1 Expenses per R	5 Retur	3,452,874. n.	
5 Pa 1	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII Reconciliation of Expenses per Audited Financial Stateme</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements	ents With	n Expenses per R	5 Retur	3,452,874. n.	
5 Pa 1 2	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII Reconciliation of Expenses per Audited Financial Statement</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents With	1 Expenses per R	5 Retur	3,452,874. n.	
5 Pa 1 2	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c.</b> ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII Reconciliation of Expenses per Audited Financial Statemen</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents With	10,600.	5 Retur	3,452,874. n.	
5 Pa 1 2 a b	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents With	1 Expenses per R	5 Retur	3,452,874. n. 3,131,721.	
5 Pa 1 2 a b c	Add lines <b>4a</b> and <b>4b</b> Total revenue. Add lines <b>3</b> and <b>4c</b> . ( <i>This must equal Form 990, Part I, line 12,</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses	ents With	10,600. 48,773.	5 Retur	3,452,874. n. 3,131,721. 59,373.	
5 Pa 1 2 a b c	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	ents With	10,600. 48,773.	5 Return	3,452,874. n. 3,131,721.	
5 Pa 1 2 a b c d e	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	ents With	10,600. 48,773.	5 leturn 1 2e	3,452,874. n. 3,131,721. 59,373.	
5 Pa 1 2 a b c d e 3	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	ents With	10,600. 48,773. 11,268.	5 leturn 1 2e	3,452,874. n. 3,131,721. 59,373.	
5 Pa 1 2 a b c d e 3 4	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ents With 2a 2b 2c 2d 2d	10,600. 48,773.	5 leturn 1 2e	3,452,874. n. 3,131,721. 59,373. 3,072,348.	
5 Pa 1 2 a b c d e 3 4	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a           2b           2c           2d	10,600. 48,773. 11,268. 466,916.	5 leturn 1 2e	3,452,874. n. 3,131,721. 59,373. 3,072,348. 478,184.	
5 Pa 1 2 a b c d e 3 4 a b c 5	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. ( <i>This must equal Form 990, Part I, line 12.</i> ) <b>rt XII</b> Reconciliation of Expenses per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part IV, line 12a Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents With 2a 2b 2c 2d 2d	10,600. 48,773. 11,268. 466,916.	5 Return 1 2e 3	3,452,874. n. 3,131,721. 59,373. 3,072,348.	

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

PART X, LINE 2:

THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATION EXEMPT FROM INCOME TAX
UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND IS EXEMPT FROM
SIMILAR STATE AND LOCAL TAXES. ALTHOUGH THE ORGANIZATION WAS GRANTED
INCOME TAX EXEMPTION BY THE INTERNAL REVENUE SERVICE, SUCH EXEMPTION DOES
NOT APPLY TO "UNRELATED BUSINESS TAXABLE INCOME." SUCH INCOME, PURSUANT TO
THE INTERNAL REVENUE CODE AND RELATED REGULATIONS, INCLUDES INVESTMENT
INCOME SUCH AS INTEREST RECEIVED FROM SOURCES OTHER THAN DIRECTLY FROM THE
MEMBERSHIP. THE ORGANIZATION HAS BEEN CLASSIFIED AS NOT A PRIVATE
FOUNDATION.

 THE ORGANIZATION ANALYZES ITS INCOME TAX FILING POSITIONS IN THE FEDERAL

 232054 09-01-22
 Schedule D (Form 990) 2022

 30
 30

 07571115 759633 22990.00000
 2022.05000 UNITED WAY OF THE LAKESHO 22990.01

AS WELL AS ALL OPEN TAX YEARS IN THESE JURISDICTIONS, TO IDENTIFY

POTENTIAL UNCERTAIN TAX POSITIONS.

THE ORGANIZATION HAS EVALUATED ITS INCOME TAX FILING POSITIONS FOR 2019 THROUGH 2022, THE YEARS WHICH REMAIN SUBJECT TO EXAMINATION AS OF DECEMBER 31, 2022. THE ORGANIZATION CONCLUDED THAT THERE ARE NO SIGNIFICANT UNCERTAIN TAX POSITIONS REQUIRING RECOGNITION IN THE ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION DOES NOT EXPECT THE TOTAL AMOUNT OF UNRECOGNIZED TAX BENEFITS ("UTB") (E.G. TAX DEDUCTIONS, EXCLUSIONS, OR CREDITS CLAIMED OR EXPECTED TO BE CLAIMED) TO SIGNIFICANTLY CHANGE IN THE NEXT TWELVE MONTHS. THE ORGANIZATION DOES NOT HAVE ANY AMOUNTS ACCRUED FOR INTEREST AND PENALTIES RELATED TO UTBS AT DECEMBER 31, 2022 OR 2021, AND IS NOT AWARE OF ANY CLAIMS FOR SUCH AMOUNTS BY FEDERAL OR STATE INCOME TAX AUTHORITIES.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DIRECT FUNDRAISING EXPENSES NETTED AGAINST REVENUE ON PART

VIII48,773.GRANT AWARD NETTED WITH INVESTMENT INCOME-757.TOTAL TO SCHEDULE D, PART XI, LINE 2D48,016.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DESIGNATED CONTRIBUTIONS - FAS 116

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

DIRECT FUNDRAISING EXPENSES

Schedule D (Form 990) 2022

466,159.

48,773.

232055 09-01-22

Schedule D (Form 990) 2022       UNITED WAY OF THE LAKESHORE         Part XIII       Supplemental Information (continued)	38-1426895 Page 5
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
DESIGNATED CONTRIBUTIONS - FAS 116	466,159.
GRANT AWARD NETTED WITH INVESTMENT INCOME	757.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	466,916.
232055 09-01-22	Schedule D (Form 990) 2022

SCHEDULE G	Suppleme	ntal Information Regarding	Fund	Iraisi	ng or Gaming A	ctivities	OMB No. 1545-0047
(Form 990)	Complete if the	r 19, or if the	2022				
	organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ.						Open to Public
Department of the Treasury Internal Revenue Service	Go t	o www.irs.gov/Form990 for instru				ı.	Inspection
Name of the organization		WAY OF THE LAKESHO					identification number
Part I Fundrais	26895						
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.							
<ul> <li>Indicate whether the organization raised funds through any of the following activities. Check all that apply.</li> <li>a Mail solicitations</li> <li>b Internet and email solicitations</li> <li>f Solicitation of government grants</li> <li>c Phone solicitations</li> <li>g Special fundraising events</li> <li>d In-person solicitations</li> <li>2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?</li> <li>Yes</li> <li>No</li> <li>b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.</li> </ul>							
(i) Name and addres or entity (func		(ii) Activity	have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	<b>(v)</b> Amount pa to (or retained fundraiser listed in col. <b>(</b>	by) to (or retained by)
			Yes	No			
Total		1	1	1			
Total       Image: Control of the second state							

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

Schedule G (Form 990) 2022

232081 10-27-22

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

		(a) Event #1 GOLF UNITED (event type)	(b) Event #2 RIDE UNITED & SPECIAL EV (event type)	(c) Other events 3 (total number)	(d) Total events (add col. (a) through col. (c))
.	1 Gross receipts	34,078.	12,687.	42,918.	89,683
	2 Less: Contributions		11,340.		11,340
1	3 Gross income (line 1 minus line 2)		1,347.	42,918.	78,343
4	4 Cash prizes				
I 1	5 Noncash prizes			2,984.	2,984
	6 Rent/facility costs			1,920.	1,920
-	7 Food and beverages	3,178.	611.	10,717.	14,506
Ι.	8 Entertainment	300.			300
9	9 Other direct expenses	7,182.	2,533.	19,348.	29,063
1	10 Direct expense summary. Add lines 4 throu	ugh 9 in column (d)			48,773
	\$15,000 on Form 000 E7, line 62				
	\$15,000 on Form 990-EZ, line 6a.	(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	
	\$15,000 on Form 990-EZ, line 6a.  1 Gross revenue			(c) Other gaming	
				(c) Other gaming	
2	1 Gross revenue			(c) Other gaming	
2	Gross revenue 2 Cash prizes			(c) Other gaming	
2	Gross revenue     Cash prizes     Noncash prizes	· · · · · · · · · · · · · · · · · · ·		(c) Other gaming	(d) Total gaming (ad col. (a) through col. (d
:	<ol> <li>Gross revenue</li></ol>		bingo/progressive bingo	(c) Other gaming	
	<ol> <li>Gross revenue</li></ol>	Yes%	bingo/progressive bingo	%	
	1 Gross revenue         2 Cash prizes         3 Noncash prizes         4 Rent/facility costs         5 Other direct expenses         6 Volunteer labor		bingo/progressive bingo	Yes % No	
	1 Gross revenue         2 Cash prizes         3 Noncash prizes         4 Rent/facility costs         5 Other direct expenses         6 Volunteer labor         7 Direct expense summary. Add lines 2 through	yes% 	bingo/progressive bingo	Yes%	col. (a) through col. (

232082 10-27-22

Schedule G (Form 990) 2022

Sch	edule G (Form 990) 2022	UNITED WAY OF THE LAKESHORE	38-1426895 Page 3
		aming activities with nonmembers?	
		eficiary or trustee of a trust, or a member of a partnership or other entity fo	
13	Indicate the percentage of gamir		
		· · · · · · · · · · · · · · · · · · ·	<b>13a</b> %
		ne person who prepares the organization's gaming/special events books a	
•••			
	Name		
	Address		
15a	Does the organization have a co	ntract with a third party from whom the organization receives gaming rever	we? Yes No
101			
ł	If "Ves " enter the amount of gar	ning revenue received by the organization \$ an	d the amount
	of gaming revenue retained by th		
	If "Yes," enter name and address		
Ľ		of the third party.	
	Name		
	Name		
	Addross		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation	\$	
	Description of services provided		
	Director/officer	Employee Independent contractor	
17	Mandatory distributions:		
â	a Is the organization required unde	r state law to make charitable distributions from the gaming proceeds to	
	retain the state gaming license?		Ves No
k	Enter the amount of distributions	required under state law to be distributed to other exempt organizations of	or spent in the
_	organization's own exempt activ		
Pa	rt IV Supplemental Info	mation. Provide the explanations required by Part I, line 2b, columns (ii	i) and (v); and Part III, lines 9, 9b, 10b,
	15b, 15c, 16, and 17b, a	s applicable. Also provide any additional information. See instructions.	
_			
2320	83 10-27-22	35	Schedule G (Form 990) 2022
		JJ	

Schedule G	(Form	990
<b>D</b>		

Part IV	Supplemental Information	(continued)
232084 04-01-	22	Schedule G (Form 990)

2022.05000 UNITED WAY OF THE LAKESHO 22990.01

07571115 759633 22990.00000

SCHEDULE I	C	Grants and Oth	er Assistan	ce to Organ	izations,		OMB No.	1545-0047		
(Form 990)	Go	vernments, an	d Individual	s in the Ŭni	ted States		20	22		
Department of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22. Attach to Form 990. Open to Public									
Internal Revenue Service										
Name of the organization UNITED WAY OF THE LAKESHORE Employer identification number 38-1426895										
Part I General Information on Grants a							50 14	20075		
1 Does the organization maintain records	to substantiate the	e amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	tance, and the selection	on			
criteria used to award the grants or assis	_						X Yes	🗌 No		
2 Describe in Part IV the organization's pro										
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990, Part	t IV, line 21, for any			
recipient that received more than S	\$5,000. Part II can	be duplicated if addition	onal space is neede	ed.	(f) Mathad of	1	1			
1 (a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of or assistance			
ACSET - MICHIGAN WORKS										
1550 LEONARD STREET NE										
GRAND RAPIDS, MI 49505	38-2631431	501(C)(3)	115,000.	0.			SUMMER YOUTH PROG	SRAM		
AGEWELL SERVICES										
275 WEST CLAY AVE, STE 100										
MUSKEGON, MI 49440	38-2033822	501(C)(3)	22,498.	0.			GENERAL SUPPPORT			
AMERICAN RED CROSS										
313 W. WEBSTER AVE.										
MUSKEGON, MI 49440	53-0196605	501(C)(3)	19,998.	0.			GENERAL SUPPORT			
ARBOR CIRCLE										
1115 BALL AVENUE NE			10.070							
GRAND RAPIDS, MI 49505	38-3263853	501(C)(3)	12,872.	0.			GENERAL SUPPORT			
ASSOCIATION FOR THE BLIND										
456 CHERRY ST. SE										
GRAND RAPIDS, MI 49503	38-1387122	501(C)(3)	2,106.	0.			GENERAL SUPPORT			
	30 1307122	501(0)(5)	2,100.							
BIG BROTHERS/BIG SISTERS OF THE										
LAKESHORE - PO BOX 1018 -										
MUSKEGON, MI 49443	61-1736056	501(C)(3)	58,500.	0.			GENERAL SUPPORT			
2 Enter total number of section 501(c)(3) a	nd government or	ganizations listed in the	e line 1 table			•	·			

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

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

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

38-2243550 501(C)(3)

AVE. - LUDINGTON, MI 49431

(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	<b>(h)</b> Purpose of grant or assistance
BLACK WALL STREET MICHIGAN PO BOX 344							
MUSKEGON, MI 49443	87-2969383	501(C)(3)	6,500.	0.			COVID GRANT
BOY SCOUTS OF AMERICAN/GERALD R. FORD COUNCIL - 3213 WALKER AVE. NW - GRAND RAPIDS, MI 49544	38-1359240	501(C)(3)	14,508.	0.			GENERAL SUPPORT
BOYS AND GIRLS CLUB P.O BOX 1312 MUSKEGON, MI 49443	61-1736056	501(C)(3)	24,996.	0.			GENERAL SUPPORT
CALL 211 PO BOX 1101 MUSKEGON, MI 49443	38-3171086	501(C)(3)	65,438.	0.			GENERAL SUPPORT
CATHOLIC CHARITIES 1095 THIRD STREET SUITE 10 MUSKEGON, MI 49441	38-2596252	501(C)(3)	67,872.	0.			GENERAL SUPPORT
CHILD ABUSE COUNCIL 1781 PECK STREET, SUITE 1 MUSKEGON, MI 49441	38-2195091	501(C)(3)	56,944.	0.			GENERAL SUPPORT
COMMUNITY ENCOMPASS 1105 TERRACE ST MUSKEGON, MI 49442	38-3279226	501(C)(3)	7,000.	0.			COVID-19 GRANT
COMMUNITY ENCOMPASS 1105 TERRACE ST MUSKEGON, MI 49442	38-3279226	501(C)(3)	69,000.	0.			GENERAL SUPPORT
COMMUNITIES OVERCOMING VIOLENT ENCOUNTERS - 906 EAST LUDINGTON							

Schedule I (Form 990)

GENERAL SUPPORT

10,596.

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38-1426895 Page 1

1100 3RD ST

HOPE NETWORK

MUSKEGON, MI 49440

GRAND RAPIDS, MI 49456

P.O BOX 890, 3075 ORCHARD VISTA DRI

	() = 0.				(0.14.1)		
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DISABILITY NETWORK WEST							
27 EAST CLAY AVENUE							
MUSKEGON, MI 49442	38-3476797	501(C)(3)	6,750.	٥.			GENERAL SUPPORT
DOLLYWOOD FOUNDATION							
111 DOLLYWOOD LANE							GENERAL SUPPORT / IL BO
PIGEON FORGE, TN 37863	62-1348105	501(C)(3)	108,300.	0.			MAILING
	02 1340103	501(0)(3)	100,500.	0.			FATHING
EMPOWERMENT NETWORK							
5 EAST MAIN ST.							
FREMONT, MI 49412	81-0568467	501(C)(3)	1,426.	٥.			GENERAL SUPPORT
EVERY WOMANS PLACE, INC.							
1221 WEST LAKETON AVENUE							
MUSKEGON, MI 49441	38-2072675	501(C)(3)	109,386.	0.			GENERAL SUPPORT
FEEDING AMERICA WEST MI							
864 WEST RIVER CENTER							
COMSTOCK PARK, MI 49321	38-2439659	501(C)(3)	4,000.	0.			MOBILE FOOD PANTRIES
· · · ·							
GIRL SCOUTS OF AMERICA MICHIGAN							
SHORE TO SHORE - 3275 WALKER AVE							
NW - GRAND RAPIDS, MI 49544	38-1366924	501(C)(3)	9,698.	0.			GENERAL SUPPORT
GOODWILL INDUSTRIES							
271 APPLE AVENUE							
MUSKEGON, MI 49442	38-1357148	501(C)(3)	20,172.	0.			GENERAL SUPPORT
	50-155/140	501(0)(3)	20,172.	<u> </u>			SEMERAL SUFFORI
HERCO							
	1		1				

EMERGENCY SHELTER

GENERAL SUPPORT

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501(C)(3)

38-3323617 501(C)(3)

Page 1

38-1426895

		LAKESHOKE					00-1420095 Page
Part II Continuation of Grants and Other	Assistance to Do	mestic Organizations	s and Domestic Go	overnments (Scho	edule I (Form 990), Pa I	rt II.) T	1
(a) 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 non-cash assistance	(h) Purpose of grant or assistance
HOPE PROJECT							
1887 HOLTON RD							
NORTH MUSKEGON, MI 49445	35-2270341	501(C)(3)	18,000.	0.			GENERAL SUPPORT
LEGAL AID OF WESTERN MICHIGAN 450 MORRIS, SUITE 202							
MUSKEGON, MI 49440	38-2156874	501(C)(3)	58,600.	0.			GENERAL SUPPORT
LOVE, INC. 2735 EAST APPLE AVENUE - SUITE A MUSKEGON, MI 49442	38-2450507	501(C)(3)	15,000.	0.			GENERAL SUPPORT
MEDIATION & RESTORATIVE SERVICES 27 EAST CLAY AVENUE							BARJ PROGRAM AND GENERAL
MUSKEGON, MI 49442	38-3214950	501(C)(3)	48,198.	0.			SUPPORT
MICHIGAN WORKS! WEST CENTRAL 14330 NORTHLAND DRIVE							MI CAREERQUEST 2021 &
BIG RAPIDS, MI 49307	38-2217024	501(C)(3)	17,500.	٥.			SUMMER YOUTH PROGRAM
MISSION FOR AREA PEOPLE 2500 JEFFERSON STREET MUSKEGON HEIGHTS, MI 49444	38-3220964	501(C)(3)	105,369.	0.			EMERGENCY NEEDS FUNDING, SHELTER FOR THE HOMELESS GENERAL SUPPORT
OCEANA COLLEGE ACCESS NETWORK 200 N WASHINGTON SQUARE SUITE 420							
LANSING, MI 48933	36-4619621	501(C)(3)	4,500.	0.			GENERAL SUPPORT
ORCHARD VIEW SCHOOL 35 S SHERIDAN DR							
MUSKEGON, MI 49441	38-2529687	501(C)(3)	22,500.	0.			GENERAL SUPPORT
PATHFINDERS 2500 JEFFERSON ST							
MUSKEGON, MI 49444	45-2445595	501(C)(3)	25,000.	٥.			GENERAL SUPPORT

Schedule I (Form 990)

541 E SLOCUM DR WHITEHALL, MI 49441

YOUTH SOLUTIONS 330 W MAIN ST

BENTON HARBOR, MI 49022

WHITE LAKE COMMUNITY EDUCATION

	7100101011000 10 20	Jan San San San San San San San San San S		(			
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	(e) 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
PIONEER RESOURCES							
601 TERRACE ST - SUITE 100							
MUSKEGON, MI 49440	38-1367329	501(C)(3)	7,000.	0.			COVID-19 GRANT
READ MUSKEGON							
PO BOX 1312							
MUSKEGON, MI 49443	41-2176728	501(C)(3)	29,998.	٥.			GENERAL SUPPORT
SALVATION ARMY							
PO BOX 1116							
MUSKEGON, MI 49443	38-1359297	501(C)(3)	21,246.	0.			GENERAL SUPPORT
TRUE NORTH CONSTRUCT OF CONSTRUCT							
TRUE NORTH COMMUNITY SERVICES 6308 S WARNER AVE							
FREMONT, MI 49412	38-6158533	501(C)(3)	16,280.	0.			GENERAL SUPPORT
UNITED WAY OF MASON COUNTY -							
OCEANA-NEWAYGO 211 - 108 SW RATH							
AVE - LUDINGTON, MI 49431	38-2943115	501(C)(3)	9,062.	0.			GENERAL SUPPORT
VOLUNTEER FOR DENTAL							
31 E CLAY AVE							
MUSKEGON, MI 49442	83-1299804	501(C)(3)	12,498.	0.			GENERAL SUPPORT
WHITE LAKE COMMUNITY EDUCATION							
541 E SLOCUM DR							LIGHTS ON AFTER SCHOOL
WHITEHALL, MI 49441	38-6002973	501(C)(3)	12,195.	0.			PROGRAM
,,		, ,	,				

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

38-6002973 501(C)(3)

82-1416934 501(C)(3)

JMG - SCHOLARSHIP MONEY Schedule I (Form 990)

GENERAL SUPPORT

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26,000.

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#### Schedule I (Form 990) UNITED WAY OF THE LAKESHORE

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

45-3576131 501(C)(3)

920 SOUTH STATE ST.

HART, MI 49420

(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
FRESH COAST ALLIANCE 1190 EAST APPLE AVE. MUSKEGON, MI 49442	46-1973615	501(C)(3)	15,998.	0.			RESPONSE GRANT FUNDS AI GENERAL SUPPORT
HELPING EVERY LIVING PERSON SURVIVE – 717 BRIDGEVIEW BAY LN – MUSKEGON, MI 49441		501(C)(3)	4,998.	0.			GENERAL SUPPORT
HGA NONPROFIT HOMES INC. 917 WEST NORTON AVENUE MUSKEGON, MI 49441	38-2310386	501(C)(3)	4,000.	0.			COVID-19 GRANT
LAKE HAWKS IN FLIGHT FOUNDATION INC – 95 W BROADWAY – MUSKEGON HEIGHTS, MI 49444	47-1637526	501(C)(3)	4,000.	0.			COVID-19 GRANT
LAKESHORE REGIONAL COMMUNITY DEVELOPMENT CORP - 4821 RAMBLING CREEK DR - MUSKEGON, MI 49441	83-2414416	501(C)(3)	8,748.	0.			general support
NEWAYGO COUNTY COMPASSION HOME 20 S. STEWART AVE FREMONT, MI 49412	46-3838415	501(C)(3)	7,230.	0.			GENERAL SUPPORT
NEWAYGO COUNTY PREVENTION OF CHILD ABUSE & NEGLECT - 601 N EVERGREEN DR - WHITE CLOUD, MI 49349	38-2577323	501(C)(3)	914.	0.			general support
NEWAYGO COUNTY RESA 4747 WEST 48TH ST. FREMONT, MI 49412	38-1717623	501(C)(3)	12,890.	0.			GENERAL SUPPORT & IL PROGRAM
OCEANA COUNTY HOUSING COMMISSION							

Schedule I (Form 990)

GENERAL SUPPORT

5,200.

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38-1426895 Page 1

AND

	VAY OF THE			. (2.1			<u>88-1426895 Ра</u>
Continuation of Grants and Oth           (a) Name and address of organization or government	er Assistance to Do	mestic Organizations (c) IRC section if applicable	and Domestic Go (d) Amount of cash grant	(Scher (e) Amount of noncash assistance	edule I (Form 990), Pa (f) Method of valuation (book, FMV,	rt II.) (g) Description of non-cash assistance	(h) Purpose of grant or assistance
				23313121100	appraisal, other)		
PROJECT 7:14 REVIVAL OUTREACH							
431 EAST LAKETON AVENUE				_			
AUSKEGON, MI 49442	80-2711395	501(C)(3)	5,000.	0.			COVID-19 GRANT
STAIRCASE YOUTH SERVICES							
920 E TINKHAM AVE							
LUDINGTON, MI 49431	38-2709547	501(C)(3)	2,652.	0.			GENERAL SUPPORT
		501(0)(3)	2,002.	<b>.</b>			
STEP UP							
PO BOX 1626							
MUSKEGON, MI 49443	32-0469895	501(C)(3)	6,252.	Ο.			GENERAL SUPPORT
·							
THE ARC MUSKEGON							
601 TERRACE ST - SUITE 100							
MUSKEGON, MI 49440	38-1586705	501(C)(3)	19,998.	0.			GENERAL SUPPORT
YMCA MUSKEGON							
1115 3RD ST							
MUSKEGON, MI 49441	38-2000172	501(C)(3)	7,500.	Ο.			GENERAL SUPPORT

Schedule I (Form 990)

Part III

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

(a) Type of grant or assistance	(b) Number of recipients	<b>(c)</b> 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 required in Part I, line 2; Part III, column (b); and any other additional information.

UNITED WAY OF THE LAKESHORE Schedule I (Form 990) 2022

Part III can be duplicated if additional space is needed.

Page 2

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

## 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.



Name of the organization UNITED WAY OF THE LAKESHORE

38-1426895

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

10,000 MORE WORKING FAMILIES MEETING THEIR BASIC NEEDS BY 2025.

FORM 990, PART VI, SECTION A, LINE 6:

ALL DONORS TO UNITED WAY OF THE LAKESHORE ARE CONSIDERED MEMBERS.

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

BOARD MEMBERS ARE ELECTED AT THE ANNUAL MEETING BY MEMBERS OF THE

ORGANIZATION.

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

CHANGES TO BOARD MEMBERS AND CHANGES TO BY-LAWS ARE SUBJECT TO APPROVAL BY MEMBERS.

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

A COPY OF THE COMPLETED 990 IS E-MAILED TO ALL OF THE BOARD MEMBERS FOR

REVIEW PRIOR TO FILING.

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

IN MAY OF EACH CALENDAR YEAR ALL BOARD MEMBERS AND KEY EMPLOYEES ARE

REQUIRED TO COMPLETE A CODE OF ETHICS STATEMENT. THE STATEMENTS FOR THE

BOARD MEMBERS ARE REVIEWED BY THE BOARD CHAIRMAN, AND EMPLOYEE STATEMENTS

ARE REVIEWED BY THE CHIEF EXECUTIVE FOR CONFLICTS OF INTEREST.

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

ALL COMPENSATION FOR THE ORGANIZATION'S EMPLOYEES ARE REVIEWED BY THE

 LHA
 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
 Schedule O (Form 990) 2022

 232211
 10-28-22
 Image: Comparison of Comparis

Schedule O (Form 990) 2022					Page <b>2</b>		
Name of the organization							Employer identification number
	UNITED	WAY	OF	THE	LAKESHORE		38-1426895

PERSONNEL COMMITTEE. THE CEO'S COMPENSATION IS REVIEWED AND APPROVED BY

THE BOARD. COMPENSATION FOR THE KEY EMPLOYEES ARE REVIEWED AND APPROVED BY

THE CEO.

FORM 990, PART VI, SECTION C, LINE 18:

FORM 990 IS POSTED ELECTRONICALLY TO THE ORGANIZATION'S WEBSITE FOR PUBLIC INSPECTION.

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

UNITED WAY CURRENTLY MAKES GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY

AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST. AUDITED

FINANCIAL STATEMENTS AND FORM 990 ARE MADE AVAILABLE ON ITS WEBSITE.

PART XII, LINE 2(C)

THE UNITED WAY FINANCE COMMITTEE, MADE UP OF SEVERAL MEMBERS OF THE

BOARD OF DIRECTORS, ALSO SERVES AS THE AUDIT COMMITTEE AND REVIEWS THE

RESULTS OF THE ANNUAL AUDIT WITH THE INDEPENDENT AUDITORS.

Schedule O (Form 990) 2022

232212 10-28-22