



TAX RETURN FILING INSTRUCTIONS

PUBLIC INSPECTION COPY

Prepared by	Grant Thornton LLP 100 E. Wisconsin Avenue, Suite 2100 Milwaukee, WI 53202
Special Instructions	<p>The return should be signed and dated by the appropriate officer(s).</p> <p>Exempt organizations are required to provide copies of their returns for a period of three years from the filing date for public inspection upon request. On the Form 990 the names of any contributors should not be disclosed, so we have deleted them. Charities must also provide copies of: 1) Forms 990-T filed after August 17, 2006. 2) Forms 4720 filed by the organization. Form 990-PF contributors must be disclosed.</p>
Application for Recognition of Exemption	<p>Exempt Organizations are also required to provide a copy of the Application for Recognition of Exemption (Form 1023 or 1024) including all documents and statements submitted in support of such application and any letter or other document issued by the Internal Revenue Service with respect to such application.</p> <p>An organization that submitted its Form 1023 or 1024 on or before July 15, 1987 must make this form available for public inspection only if they had a copy of the Application on July 15, 1987.</p>
Requests made in person	If the request is made in person, the organization must respond by the end of the business day.
Requests made in writing	If the request is made in writing, response is generally required within 30 days.
Fees charged for copies	The organization can make a reasonable charge for copying and postage. The regulations limit the copying charge to that charged by the IRS for providing copies, currently \$1.00 for the first page and \$0.15 for each additional page.
What if we post the Form 990 on our website?	<p>The requirement to provide copies can be eliminated if the organization posts the relevant documents on its website. The public must be able to download the documents and print them in the exact form they were filed with the IRS (except for disclosing contributors). The download must be free and use software that is available without charge. Even if the documents are posted on the web, the organization must still have a copy available for inspection at its offices.</p>
What if we fail to comply with requests?	Please be aware that significant monetary penalties may be imposed by the IRS on an organization for failure to follow the above provisions.

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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.

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC		D Employer identification number 75-6005352
	Doing business as		E Telephone number 214-978-0000
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	1800 N. LAMAR STREET		G Gross receipts \$ 68,918,748.
	City or town, state or province, country, and ZIP or foreign postal code DALLAS, TX 75202		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. See instructions
F Name and address of principal officer: JENNIFER SAMPSON SAME AS C ABOVE		H(c) Group exemption number	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: WWW.UNITEDWAYDALLAS.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			L Year of formation: 1961
M State of legal domicile: TX			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: UNITED WAY OF METROPOLITAN DALLAS IS A SOCIAL CHANGE ORGANIZATION (CONTINUED IN SCHEDULE O)		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	26
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	109
	6 Total number of volunteers (estimate if necessary)	6	6142
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	62,583,431.	67,399,440.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	-6,890.	154,881.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	494,118.	1,364,427.
		63,070,659.	68,918,748.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	45,892,818.	35,946,562.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,123,598.	11,342,639.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	5,261,446.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	8,996,172.	6,864,949.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	64,012,588.	54,154,150.	
19 Revenue less expenses. Subtract line 18 from line 12	-941,929.	14,764,598.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	43,656,559.	58,652,292.
	22 Net assets or fund balances. Subtract line 21 from line 20	13,081,730.	12,686,865.
		30,574,829.	45,965,427.

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	REBECCA BILLINGS, CFO Type or print name and title				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	MARY TORRETTA				P00847851
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	GRANT THORNTON LLP	36-6055558		(703) 847-7500	
	Firm's address				
	1000 WILSON BOULEVARD, SUITE 1500				
	ARLINGTON, VA 22209				

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Part 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: UWMD IS A COMMUNITY-BASED SOCIAL CHANGE ORGANIZATION THAT BELIEVES IN THE POWER OF UNITY TO CREATE LASTING CHANGE. FOR OVER 90 YEARS, WE'VE LED THE CHARGE TO STRENGTHEN EDUCATION, INCOME AND HEALTH-THE BUILDING BLOCKS OF OPPORTUNITY. (CONTINUED IN SCHEDULE O)

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 [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 23,048,427. including grants of \$ 18,040,741.) (Revenue \$) UWMD BUILDS, LEADS AND SUPPORTS COLLABORATIVE PROGRAMS AND INITIATIVES THAT ENSURE MORE STUDENTS GRADUATE READY TO SUCCEED, ENABLE MORE FAMILIES TO BECOME FINANCIALLY STABLE, AND GIVE PEOPLE THE TOOLS TO LEAD HEALTHY, PRODUCTIVE LIVES. EXAMPLES INCLUDE:

1. THE SOUTHERN DALLAS THRIVES INITIATIVE CREATED IN PARTNERSHIP WITH PEPSICO FOUNDATION AND FRITO-LAY NORTH AMERICA IS A SET OF PROGRAMS THAT INVESTS IN THE COMMUNITIES OF SOUTHERN DALLAS AND EXPANDS ACCESS TO EARLY EDUCATION, NUTRITION, COLLEGE AND CAREER READINESS, AND WORKFORCE DEVELOPMENT

(CONTINUED IN SCHEDULE O)

4b (Code:) (Expenses \$ 19,968,614. including grants of \$ 15,000,000.) (Revenue \$) WE COLLABORATED WITH A BROAD SPECTRUM OF COMMUNITY PARTNERS TO DEVELOP OUR ASPIRE 2030 GOALS: OUR NORTH STAR FOR DRIVING TRANSFORMATIONAL CHANGE AND ADVANCING RACIAL EQUITY IN EDUCATION, INCOME, AND HEALTH ACROSS NORTH TEXAS THROUGH THE YEAR 2030. IN EDUCATION, WE SEEK TO INCREASE BY 50% THE NUMBER OF NORTH TEXAS STUDENTS READING ON GRADE LEVEL BY THIRD GRADE. IN INCOME, WE SEEK TO INCREASE THE NUMBER OF NORTH TEXAS YOUNG ADULTS WHO EARN A LIVING WAGE BY 20%. IN HEALTH, WE SEEK TO INCREASE TO 96% THE NUMBER OF NORTH TEXANS WITH ACCESS TO AFFORDABLE HEALTH CARE INSURANCE.

(CONTINUED IN SCHEDULE O)

4c (Code:) (Expenses \$ 2,905,821. including grants of \$ 2,905,821.) (Revenue \$ 474,340.) DISTRIBUTING DONOR-DESIGNATED CONTRIBUTIONS TO NONPROFIT ORGANIZATIONS: UNITED WAY OF METROPOLITAN DALLAS, INC. ENABLES DONORS TO DESIGNATE THEIR GIFTS TO OTHER UNITED WAYS OR TO SPECIFIC AGENCIES. IN FISCAL YEAR 2022-2023, UNITED WAY OF METROPOLITAN DALLAS, INC. PROCESSED \$2,905,821 IN DESIGNATIONS.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 45,922,862.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules A through H.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and excess benefit transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, unrelated business income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	1a 26		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 26		
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?		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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
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?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
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		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
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?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website 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 financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
REBECCA BILLINGS - 214-978-0000
1800 N LAMAR STREET, DALLAS, TX 75202

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) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) JENNIFER SAMPSON PRESIDENT AND CEO	32.00 8.00			X			628,369.	0.	112,789.	
(2) SUSAN E PEEK CHIEF IMPACT/STRATEGY OFFICER	34.00 6.00			X			440,178.	0.	33,925.	
(3) JANICE W HARISSIS CHIEF FINANCIAL OFFICER	38.00 2.00			X			323,592.	0.	19,149.	
(4) JOHN C MITCHENER CHIEF GROWTH OFFICER (THRU 03/2023)	40.00 0.00				X		279,727.	0.	22,269.	
(5) ASHLEY O BRUNDAGE EXEC. DIRECTOR, HOUSING STABILITY	40.00 0.00				X		187,185.	0.	29,644.	
(6) SUSAN D HUTCHESON VP, LEADERSHIP GIVING	40.00 0.00					X	148,201.	0.	33,658.	
(7) ROBERT SHEARER CHIEF COMM. OFFICER	40.00 0.00				X		151,840.	0.	15,686.	
(8) CANDACE C BARNES SVP, HUMAN RESOURCES	40.00 0.00					X	133,878.	0.	32,852.	
(9) SHANNON NAIL VP, DEV. STRATEGY	40.00 0.00					X	153,699.	0.	11,931.	
(10) ANGELA FLOYD VP, IT & GIFT PROCESSING	40.00 0.00					X	137,974.	0.	24,507.	
(11) ANN C MONTGOMERY VP, INNOVATION & DESIGN	40.00 0.00					X	134,127.	0.	21,909.	
(12) JENNIFER A REEVES CORPORATE SECRETARY	40.00 0.00			X			98,401.	0.	16,905.	
(13) STEVEN WILLIAMS BOARD CHAIR	5.00 0.00	X		X			0.	0.	0.	
(14) CHARLENE LAKE IMMEDIATE PAST CHAIR	5.00 0.00	X		X			0.	0.	0.	
(15) ANTONIO CARRILLO VICE CHAIR	2.00 0.00	X		X			0.	0.	0.	
(16) MICHELLE VOPNI TREASURER	5.00 0.00	X		X			0.	0.	0.	
(17) TERRI WEST UWFMD CHAIR/COMP. CHR	2.00 5.00	X		X			0.	0.	0.	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) DAN BERNER AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(19) KARL BOVEE AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(20) JORGE CORRAL AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(21) RICHARD FEDOCK AUDIT AND ETHICS CHAIR	5.00 0.00	X						0.	0.	0.
(22) REGEN HORCHOW AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(23) SCOTT HUDSON AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(24) CHRISTY ALKIDAS JACOBY AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(25) SANDI KARRMANN AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(26) ANGELA MARTIN AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
1b Subtotal								2,817,171.	0.	375,224.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,817,171.	0.	375,224.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 18

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person	5	X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
DALWORTH RESTORATION 12750 S. PIPELINE RD #2A, EULESS, TX 76040	REMEDIATION SERVICES	1,135,115.
HEARTS & SCIENCE LLC, 200 VARICK STREET, 11TH FLOOR, NEW YORK, NY 10014	ADVERTISING & MEDIA SERVICES	376,770.
COSPERO CONSULTING 6806 CLIFFWOOD DRIVE, DALLAS, TX 75237	CONSULTING SERVICES	293,085.
GOODR FOUNDATION, 691 JOHN WESLEY DOBBS AVE. NE, SUITE A, ATLANTA, GA 30312	POP-UP PROVIDER	234,933.
ESSENTIAL LEADERSHIP, LLC, 3401 LEE PARKWAY, SUITE 204, DALLAS, TX 75219	CONSULTING SERVICES	229,115.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization 16

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DAVID MARTIN AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(28) GAIL MCDONALD AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(29) MARTINA MCISAAC AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(30) SCOTT MOORE AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(31) JOHN OLAJIDE AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(32) SANDRA PHILLIPS ROGERS AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(33) LORI RYERKERK AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(34) JENNIFER SAENZ AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(35) JEAN SAVAGE AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(36) PETER SEFZIK AT-LARGE MEMBER	2.00 0.00	X					0.	0.	0.	
(37) CYNTHIA TROCHU AT-LARGE MEMBER	2.00 8.00	X					0.	0.	0.	
(38) BOB WRIGHT COMMUNITY IMPACT CHAIR	5.00 0.00	X					0.	0.	0.	
(39) KATHY LIMMER CHIEF GROWTH OFFICER (AS OF 06/2023)	40.00 0.00			X			0.	0.	0.	
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	73,984.				
	1 b	Membership dues					
	1 c	Fundraising events					
	1 d	Related organizations	2,868,635.				
	1 e	Government grants (contributions)	12,242,693.				
	1 f	All other contributions, gifts, grants, and similar amounts not included above	52,214,128.				
	1 g	Noncash contributions included in lines 1a-1f	\$ 125,895.				
	1 h	Total. Add lines 1a-1f		67,399,440.			
Program Service Revenue	2 a						
	2 b						
	2 c						
	2 d						
	2 e						
	2 f	All other program service revenue					
	2 g	Total. Add lines 2a-2f					
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		154,881.		154,881.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	(i) Real				
			(ii) Personal				
	6 b	Less: rental expenses					
	6 c	Rental income or (loss)					
	6 d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	(i) Securities				
			(ii) Other				
	7 b	Less: cost or other basis and sales expenses					
	7 c	Gain or (loss)					
7 d	Net gain or (loss)						
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
8 b	Less: direct expenses						
8 c	Net income or (loss) from fundraising events						
9 a	Gross income from gaming activities. See Part IV, line 19						
9 b	Less: direct expenses						
9 c	Net income or (loss) from gaming activities						
10 a	Gross sales of inventory, less returns and allowances						
10 b	Less: cost of goods sold						
10 c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	INSURANCE REIMBURSEMENT	900099	844,350.		844,350.	
	11 b	DESIGNATION PROCESSING FEES	561000	474,340.	474,340.		
	11 c	FLEX CREDITS	900099	17,578.		17,578.	
	11 d	All other revenue	900099	28,159.		28,159.	
	11 e	Total. Add lines 11a-11d		1,364,427.			
12	Total revenue. See instructions		68,918,748.	474,340.	0.	1044968.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	35,246,171.	35,246,171.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	700,391.	700,391.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,397,513.	846,920.	639,538.	911,055.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	6,991,966.	3,823,196.	863,755.	2,305,015.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	372,100.	171,231.	81,863.	119,006.
9 Other employee benefits	938,343.	462,553.	222,329.	253,461.
10 Payroll taxes	642,717.	324,898.	102,565.	215,254.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	289,057.	97,299.	165,999.	25,759.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	1,488,669.	696,639.	568,245.	223,785.
12 Advertising and promotion	1,592,591.	1,208,412.	5,174.	379,005.
13 Office expenses	120,945.	55,221.	28,132.	37,592.
14 Information technology	585,794.	347,765.	108,199.	129,830.
15 Royalties				
16 Occupancy	288,227.	178,149.	26,039.	84,039.
17 Travel	105,215.	80,178.	8,880.	16,157.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,083,618.	627,176.	38,692.	417,750.
20 Interest				
21 Payments to affiliates	418,144.	354,837.	22,831.	40,476.
22 Depreciation, depletion, and amortization	678,339.	575,639.	37,037.	65,663.
23 Insurance	89,623.	67,681.	7,241.	14,701.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIP DUES	44,955.	19,872.	22,559.	2,524.
b EXTERNAL GIFTS	28,966.	9,194.	4,229.	15,543.
c SUBSCRIPTION & REFERENC	26,151.	3,215.	20,404.	2,532.
d EMPLOYEE RELATIONS	19,954.	8,421.	7,946.	3,587.
e All other expenses	4,701.	17,804.	-11,815.	-1,288.
25 Total functional expenses. Add lines 1 through 24e	54,154,150.	45,922,862.	2,969,842.	5,261,446.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	4,935,569.	1	3,768,687.
	2 Savings and temporary cash investments	4,427,382.	2	4,582,252.
	3 Pledges and grants receivable, net	14,601,108.	3	29,019,311.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	1,451,998.	9	274,374.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 14,515,837.		
	b Less: accumulated depreciation	10b 10,019,360.	10c	4,496,477.
	11 Investments - publicly traded securities		11	
	12 Investments - other securities. See Part IV, line 11		12	
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	14,071,235.	15	16,511,191.
16 Total assets. Add lines 1 through 15 (must equal line 33)	43,656,559.	16	58,652,292.	
Liabilities	17 Accounts payable and accrued expenses	3,942,811.	17	3,061,249.
	18 Grants payable	5,000,000.	18	7,500,000.
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		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	4,138,919.	25	2,125,616.
	26 Total liabilities. Add lines 17 through 25	13,081,730.	26	12,686,865.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	13,087,930.	27	10,566,660.
	28 Net assets with donor restrictions	17,486,899.	28	35,398,767.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	30,574,829.	32	45,965,427.
	33 Total liabilities and net assets/fund balances	43,656,559.	33	58,652,292.

Part 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	68,918,748.
2	Total expenses (must equal Part IX, column (A), line 25)	2	54,154,150.
3	Revenue less expenses. Subtract line 2 from line 1	3	14,764,598.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	30,574,829.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	626,000.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	45,965,427.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
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?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2022)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization <p style="text-align:center;">UNITED WAY OF METROPOLITAN DALLAS, INC</p>	Employer identification number <p style="text-align:center;">75-6005352</p>
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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 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 **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 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 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 college 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 gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 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 purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** 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 supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - 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).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
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.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	63322626.	53655309.	57871691.	62583431.	67399440.	304832497
2 Tax revenues levied for the organization'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	63322626.	53655309.	57871691.	62583431.	67399440.	304832497
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						61330573.
6 Public support. Subtract line 5 from line 4.						243501924

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	63322626.	53655309.	57871691.	62583431.	67399440.	304832497
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	262,509.	162,532.	105,229.	21,718.	154,881.	706,869.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	16,641.	89,810.	116,588.	32,774.	890,087.	1145900.
11 Total support. Add lines 7 through 10						306685266
12 Gross receipts from related activities, etc. (see instructions)					12	4,933,795.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	79.40	%
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	81.04	%
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input checked="" type="checkbox"/>
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization			<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions			<input type="checkbox"/>

Schedule A (Form 990) 2022

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

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

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a 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?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>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.</i>		

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)? <i>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).</i>		

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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
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? <i>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.</i>		
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? <i>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.</i>		
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? <i>If "Yes" or "No" provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions.
 All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
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	
e	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	

Section 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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
(See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

OTHER INCOME

2018 AMOUNT: \$ 914.

2019 AMOUNT: \$ 3,386.

2020 AMOUNT: \$ 18,933.

2021 AMOUNT: \$ 13,524.

2022 AMOUNT: \$ 16,995.

FLEX CREDIT

2018 AMOUNT: \$ 9,295.

2019 AMOUNT: \$ 52,919.

2020 AMOUNT: \$ 46,656.

2021 AMOUNT: \$ 14,500.

2022 AMOUNT: \$ 17,578.

INSURANCE COMPANY DIVIDEND

2018 AMOUNT: \$ 6,432.

2019 AMOUNT: \$ 13,523.

2020 AMOUNT: \$ 43,559.

2021 AMOUNT: \$ 4,750.

2022 AMOUNT: \$ 844,350.

DEFERRED COMPENSATION

2019 AMOUNT: \$ 19,982.

2020 AMOUNT: \$ 7,440.

2022 AMOUNT: \$ 11,164.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	 <hr/> <hr/> <hr/>	\$ <u>15,350,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>9,349,854.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>7,242,891.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>2,788,885.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>2,878,635.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>2,051,321.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>1,995,092.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>1,383,534.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____
	<div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div> <div style="border-bottom: 1px solid black; margin-bottom: 2px;"> </div>	\$ _____	_____

Name of organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ _____
- 3 Volunteer hours for political campaign activities _____

Part I-B Complete if the organization is exempt under section 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	231,208.	0.												
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	10,169.	0.												
c	Total lobbying expenditures (add lines 1a and 1b)	241,377.	0.												
d	Other exempt purpose expenditures	53,912,773.	0.												
e	Total exempt purpose expenditures (add lines 1c and 1d)	54,154,150.	0.												
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	0.												
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	0.												
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	246,022.	216,716.	185,649.	241,377.	889,764.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	241,022.	211,716.	180,649.	231,208.	864,595.

Schedule C (Form 990) 2022

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC Employer identification number 75-6005352

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two Yes/No questions regarding donor property and grant fund usage.

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, total number and acreage, number of easements on historic structures, and monitoring expenses. Includes a sub-table for 'Held at the End of the Tax Year' with rows 2a, 2b, 2c, and 2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for amounts related to these items (Revenue and Assets).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2022

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	47,540,036.	54,572,331.	43,865,673.	47,147,486.	45,173,952.
b Contributions	3,752,191.	2,806,865.	1,376,636.	2,242,870.	1,799,685.
c Net investment earnings, gains, and losses	6,656,349.	-7,728,000.	12,536,616.	1,682,382.	2,761,370.
d Grants or scholarships					
e Other expenditures for facilities and programs	2,530,547.	2,111,160.	3,206,594.	3,182,266.	2,587,521.
f Administrative expenses				4,024,799.	
g End of year balance	55,418,029.	47,540,036.	54,572,331.	43,865,673.	47,147,486.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 52.2300 %
 - b Permanent endowment 46.1200 %
 - c Term endowment 1.6500 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|-----------------------------|-----|----|
| (i) Unrelated organizations | | X |
| (ii) Related organizations | X | |
- b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		211,259.		211,259.
b Buildings		8,759,373.	6,114,262.	2,645,111.
c Leasehold improvements		2,316,743.	781,793.	1,534,950.
d Equipment		2,497,314.	2,416,853.	80,461.
e Other		731,148.	706,452.	24,696.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				4,496,477.

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-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" 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-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN TRUSTS	12,449,016.
(2) DUE FROM UNITED WAY FOUNDATION	3,798,090.
(3) DEFERRED COMPENSATION	264,085.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	16,511,191.

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) DONOR DESIGNATIONS	1,095,228.
(3) DUE TO UNITED WAY FOUNDATION	1,030,388.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	2,125,616.

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

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	67,366,672.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a		
	b Donated services and use of facilities	2b	727,745.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	-2,279,821.	
	e Add lines 2a through 2d	2e		-1,552,076.
3	Subtract line 2e from line 1		3	68,918,748.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	68,918,748.

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

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

1	Total expenses and losses per audited financial statements		1	51,976,074.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	727,745.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d	-2,905,821.	
	e Add lines 2a through 2d	2e		-2,178,076.
3	Subtract line 2e from line 1		3	54,154,150.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a		
	b Other (Describe in Part XIII.)	4b		
	c Add lines 4a and 4b	4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	54,154,150.

Part XIII Supplemental Information.

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

PART V, LINE 4:

INTENDED USE OF ENDOWMENT FUNDS

UWMD IS A BENEFICIARY OF THE UNITED WAY FOUNDATION OF METROPOLITAN DALLAS'S ENDOWMENT AS A SUPPORTED ORGANIZATION. THE ENDOWMENT FUNDS ARE ESTABLISHED TO SUPPORT THE PROGRAM INITIATIVES OF UWMD.

PART X, LINE 2:

LIABILITY FOR UNCERTAIN TAX POSITIONS (ASC 740)

BOTH UNITED WAY AND THE FOUNDATION FOLLOW GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS

Part XIII Supplemental Information (continued)

FROM AN UNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE FINANCIAL STATEMENTS IF THE POSITION IS "MORE-LIKELY-THAN-NOT" TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENGED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED.

UNITED WAY AND THE FOUNDATION HAVE DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DESIGNATIONS TO AGENCIES	-3,938,230.
CHANGE OF INTEREST HELD IN TRUSTS	1,658,409.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-2,279,821.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DESIGNATIONS TO AGENCIES	-2,905,821.
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RECONCILIATION OF ASSETS AND LIABILITIES TO FINANCIALS:

UWMD IS A BENEFICIARY OF THE UNITED WAY FOUNDATION OF METROPOLITAN DALLAS (FOUNDATION) AS A SUPPORTED ORGANIZATION. THE FOUNDATION FUNDS ARE ESTABLISHED FOR THE EXCLUSIVE PURPOSE OF THE DONORS AND TO SUPPORT THE PROGRAM INITIATIVES OF UWMD.

	UWMD	UWFMD	ELIMINATIONS	CONSOLIDATED
TOTAL ASSETS	58,652,292	63,915,076	(4,828,478)	117,738,890
TOTAL LIABILITIES	12,686,865	4,263,590	(4,828,478)	12,121,977

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **UNITED WAY OF METROPOLITAN DALLAS, INC** Employer identification number **75-6005352**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

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 noncash assistance	(h) Purpose of grant or assistance
2 INSPIRE PEACE INC. 2603 MARTIN LUTHER KING JR BLVD DALLAS, TX 75208	84-3727348	501(C)(3)	55,750.	0.			PROGRAM OPS COST
43200-AMERICAN RED CROSS - DALLAS FT. WORTH - 4800 HARRY HINES BOULEVARD - DALLAS, TX 75235	53-0196605	501(C)(3)	12,915.	0.			DONOR DESIGNATIONS
ABIDE WOMEN'S HEALTH SERVICES 2612 MARTIN LUTHER KING JR. DALLAS, TX 75215	82-3303040	501(C)(3)	131,476.	0.			PROGRAM OPS COST
ADVOCATE FOUNDATION DBA DALLAS FREE PRESS - 6301 GASTON AVE., SUITE 820 - DALLAS, TX 75214	20-5245262	501(C)(3)	6,000.	0.			PROGRAM OPS COST
AES LITERACY INSTITUTE 8204 ELMBROOK DR, STE 213 DALLAS, TX 75247	83-3899952	501(C)(3)	45,000.	0.			PROGRAM OPS COST
AFTER-SCHOOL ALL-STARS NORTH TEXAS 2902 SWISS AVE DALLAS, TX 75204	95-4441208	501(C)(3)	122,000.	0.			PROGRAM OPS COST

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 213.

3 Enter total number of other organizations listed in the line 1 table 12.

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

Schedule I (Form 990) 2022

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

(a) Name and address of organization or government	(b) 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
AGAPE RESOURCE & ASSISTANCE CENTER, INC. - 1315 19TH ST., SUITE 3A - PLANO, TX 75074	75-2942035	501(C)(3)	60,000.	0.			PROGRAM OPS COST
AIDS ARMS, INC. 3900 JUNIUS ST. #300 DALLAS, TX 75246	75-2306145	501(C)(3)	6,581.	0.			DONOR DESIGNATIONS
ALLEN COMMUNITY OUTREACH 801 E. MAIN STREET ALLEN, TX 75002	75-1986190	501(C)(3)	5,897.	0.			DONOR DESIGNATIONS
ALLEN INDEPENDENT SCHOOL DISTRICT 612 E. BETHANY DRIVE ALLEN, TX 75002	75-6000023	GOV	5,500.	0.			PROGRAM OPS COST
ALZHEIMER'S ASSOCIATION-DALLAS AND NORTHEAST CHAPTER - 2630 WEST FREEWAY 100 - FORT WORTH, TX 76102	13-3039601	501(C)(3)	13,065.	0.			DONOR DESIGNATIONS
AMAZING GRACE FOOD PANTRY 1711 PARKER RD WYLIE, TX 75098	81-4228493	501(C)(3)	5,266.	0.			DONOR DESIGNATIONS
AMERICAN CANCER SOCIETY-DALLAS 405 WILLIAMS COURT, SUITE 120 BALTIMORE, MD 21220	13-1788491	501(C)(3)	14,049.	0.			DONOR DESIGNATIONS
AMERICAN CANCER SOCIETY-SOUTHFIELD 405 WILLIAMS COURT, SUITE 120 BALTIMORE, MD 21220	13-1788491	501(C)(3)	5,407.	0.			DONOR DESIGNATIONS
AUSTIN STREET CENTER P.O. BOX 151085 DALLAS, TX 75315	75-1881365	501(C)(3)	28,092.	0.			DONOR DESIGNATIONS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
AUSTIN STREET CENTER P.O. BOX 151085 DALLAS, TX 75315	75-1881365	501(C)(3)	173,342.	0.			PROGRAM OPS COST
AVANCE DALLAS 2060 SINGLETON BLVD, STE. 103 DALLAS, TX 75212	75-2699260	501(C)(3)	487,392.	0.			PROGRAM OPS COST
AVANCE, INC. (DALLAS) 2060 SINGLETON BLVD, STE. 103 DALLAS, TX 75212	75-2699260	501(C)(3)	42,081.	0.			PROGRAM OPS COST
BACHMAN LAKE TOGETHER 9507 OVERLAKE DR DALLAS, TX 75220	81-4526609	501(C)(3)	72,500.	0.			PROGRAM OPS COST
BACK ON MY FEET (DFW) 2425 NORTH CENTRAL EXPRESSWAY STE. 480, STE. 2136 - RICHARDSON, TX 75080	26-2109809	501(C)(3)	8,199.	0.			DONOR DESIGNATIONS
BAYLOR HEALTH CARE SYSTEM DALLAS FOUNDATION - 301 N. WASHINGTON AVE. - DALLAS, TX 75246	75-1606705	501(C)(3)	155,250.	0.			PROGRAM OPS COST
BAYLOR UNIVERSITY 1111 W. MOCKINGBIRD LANE, SUITE 135 DALLAS, TX 75247	74-1159753	501(C)(3)	5,173.	0.			DONOR DESIGNATIONS
BAYLOR UNIVERSITY - COMMUNITY GRANT - 1111 W. MOCKINGBIRD LANE, SUITE 1350 - DALLAS, TX 75247	74-1159753	501(C)(3)	97,750.	0.			PROGRAM OPS COST
BEACON HILL PREPARATORY INSTITUTE 1402 CORINTH STREET, SUITE 257 DALLAS, TX 75215	42-1624235	501(C)(3)	252,000.	0.			PROGRAM OPS COST

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
BIG BROTHERS BIG SISTERS LONE STAR 450 EAST JOHN CARPENTER FREEWAY IRVING, TX 75062	75-0800632	501(C)(3)	138,000.	0.			PROGRAM OPS COST
BIG BROTHERS BIG SISTERS LONE STAR 450 EAST JOHN CARPENTER FREEWAY IRVING, TX 75062	75-0800632	501(C)(3)	11,507.	0.			DONOR DESIGNATIONS
BIG THOUGHT 1409 SOUTH LAMAR STREET, SUITE 1015 DALLAS, TX 75215	75-2170035	501(C)(3)	7,176.	0.			DONOR DESIGNATIONS
BIG THOUGHT 1409 SOUTH LAMAR STREET, SUITE 1015 DALLAS, TX 75215	75-2170035	501(C)(3)	45,000.	0.			PROGRAM OPS COST
BISHOP ARTS THEATRE CENTER 215 S. TYLER STREET DALLAS, TX 75208	58-2069891	501(C)(3)	18,000.	0.			PROGRAM OPS COST
BLACK HEART ASSOCIATION 1029 KAYLIE ST., GRAND PRAIRIE TX, TX 75052	82-1011939	501(C)(3)	70,000.	0.			PROGRAM OPS COST
BLACK UNITED FUND OF MICHIGAN 7650 2ND AVE DETROIT, MI 48202	38-1964012	501(C)(3)	66,544.	0.			DONOR DESIGNATIONS
BLACKS UNITED IN LEADING TECHNOLOGY INTERNATIONAL - P.O. BOX 831359 - RICHARDSON, TX 75083-1359	85-3164660	501(C)(3)	10,000.	0.			PROGRAM OPS COST
BOLD IDEA, INC. 2904 FLOYD ST., STE A DALLAS, TX 75204	47-3742945	501(C)(3)	6,856.	0.			DONOR DESIGNATIONS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
BOLD IDEA, INC. 2904 FLOYD ST., STE A DALLAS, TX 75204	47-3742945	501(C)(3)	10,000.	0.			PROGRAM OPS COST
BOYS & GIRLS CLUBS OF COLLIN COUNTY - 7790 MAIN STREET - FRISCO, TX 75033	75-1296869	501(C)(3)	80,500.	0.			PROGRAM OPS COST
BOYS & GIRLS CLUBS OF GREATER DALLAS - 4816 WORTH STREET - DALLAS, TX 75246	75-1152657	501(C)(3)	296,000.	0.			PROGRAM OPS COST
BOYS & GIRLS CLUBS OF GREATER DALLAS - 4816 WORTH STREET - DALLAS, TX 75246	75-1152657	501(C)(3)	34,130.	0.			DONOR DESIGNATIONS
BRASWELL CHILD DEVELOPMENT 2203 S 2ND AVENUE DALLAS, TX 75210	75-2538361	501(C)(3)	43,400.	0.			PROGRAM OPS COST
BRIDGE STEPS DBA THE BRIDGE 1818 CORSICANA DALLAS, TX 75201	45-3452817	501(C)(3)	80,342.	0.			PROGRAM OPS COST
BROTHER BILL'S HELPING HAND 3906 N WESTMORELAND DALLAS, TX 75212	75-6027740	501(C)(3)	1,249,656.	0.			PROGRAM OPS COST
BRYAN'S HOUSE (OPEN ARMS) - 52220 3610 PIPESTONE ROAD DALLAS, TX 75212	75-2217559	501(C)(3)	8,046.	0.			DONOR DESIGNATIONS
CAFE MOMENTUM 1510 PACIFIC AVENUE DALLAS, TX 75201	32-0384561	501(C)(3)	40,000.	0.			PROGRAM OPS COST

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
CAFE MOMENTUM 1510 PACIFIC AVENUE DALLAS, TX 75201	32-0384561	501(C)(3)	12,281.	0.			DONOR DESIGNATIONS
CARDBOARD PROJECT 4008 CAVALRY DR PLANO, TX 75023	81-4431217	501(C)(3)	120,000.	0.			PROGRAM OPS COST
CASA OF COLLIN COUNTY 101 E. DAVIS STREET MCKINNEY, TX 75069	75-2391961	501(C)(3)	5,208.	0.			DONOR DESIGNATIONS
CASS COMMUNITY SOCIAL SERVICES, INC - V0000708126 - 11745 ROSA PARKS BLVD - DETROIT, MI 48206	38-3429921	501(C)(3)	5,040.	0.			DONOR DESIGNATIONS
CATHOLIC CHARITIES OF DALLAS INC. 1421 W MOCKINGBIRD LN DALLAS, TX 75247	75-2745221	501(C)(3)	255,683.	0.			PROGRAM OPS COST
CATHOLIC CHARITIES OF DALLAS, INC. 1421 W MOCKINGBIRD LN DALLAS, TX 75247	75-2745221	501(C)(3)	240,726.	0.			PROGRAM OPS COST
CATHOLIC CHARITIES OF DALLAS, INC. 1421 W MOCKINGBIRD LN DALLAS, TX 75247	75-2745221	501(C)(3)	43,287.	0.			DONOR DESIGNATIONS
CATHOLIC CHARITIES, DIOCESE OF FT. WORTH - P.O. BOX 15610 - FORT WORTH, TX 76119	75-0808769	501(C)(3)	5,234.	0.			DONOR DESIGNATIONS
CHALLENGE ISLAND - MID CITIES TEXAS LLC - 2301 POPLAR LN - COLLEYVILLE, TX 76034	86-3495504		12,000.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) 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
CHALLENGES ARE REWARDING LLC 1108 MAVERICK DR. MANSFIELD, TX 76063	87-1200641		23,500.	0.			PROGRAM OPS COST
CHILD AND FAMILY GUIDANCE CENTERS 8915 HARRY HINES BOULEVARD DALLAS, TX 75235	75-0800630	501(C)(3)	140,000.	0.			PROGRAM OPS COST
CHILDCAREGROUP 3000 PEGASUS PARK DRIVE, SUITE 800 DALLAS, TX 75247	75-0800634	501(C)(3)	5,239.	0.			DONOR DESIGNATIONS
CHILDCAREGROUP 3000 PEGASUS PARK DRIVE, SUITE 800 DALLAS, TX 75247	75-0800634	501(C)(3)	973,498.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER FOR NORTH TEXAS - 1854 CAIN DRIVE - LEWISVILLE, TX 75077	75-2559765	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER FOR ROCKWALL COUNTY - 1350 E. WASHINGTON STREET - ROCKWALL, TX 75087	47-4946358	501(C)(3)	55,000.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER OF COLLIN COUNTY - 2205 LOS RIOS BOULEVARD - PLANO, TX 75074	75-2389095	501(C)(3)	120,000.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER OF COLLIN COUNTY - 2205 LOS RIOS BOULEVARD - PLANO, TX 75074	75-2389095	501(C)(3)	30,272.	0.			DONOR DESIGNATIONS
CHILDREN'S MEDICAL CENTER FOUNDATION - 1935 MEDICAL DISTRICT DRIVE - DALLAS, TX 75235	75-2062015	501(C)(3)	40,000.	0.			PROGRAM OPS COST

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CHILDREN'S MEDICAL CENTER FOUNDATION - 1935 MEDICAL DISTRICT DRIVE - DALLAS, TX 75235	75-2062015	501(C)(3)	35,135.	0.			DONOR DESIGNATIONS
CHOCOLATE MINT FOUNDATION 201 EXECUTIVE WAY DESOTO, TX 75115	27-1589053	501(C)(3)	850,441.	0.			PROGRAM OPS COST
CHRISTIAN COMMUNITY ACTION 200 SOUTH MILL STREET LEWISVILLE, TX 75057	23-7319371	501(C)(3)	7,551.	0.			DONOR DESIGNATIONS
CHRISTIAN COMMUNITY ACTION 200 SOUTH MILL STREET LEWISVILLE, TX 75057	23-7319371	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CIRCLE TEN COUNCIL, BOY SCOUTS OF AMERICA - 8605 HARRY HINES BLVD - DALLAS, TX 75235	75-0800615	501(C)(3)	16,312.	0.			DONOR DESIGNATIONS
CIRCLE TEN COUNCIL, BOY SCOUTS OF AMERICA - 8605 HARRY HINES BLVD - DALLAS, TX 75235	75-0800615	501(C)(3)	70,000.	0.			PROGRAM OPS COST
CITY HOUSE, INC. 830 CENTRAL PARKWAY EAST, SUITE 350 PLANO, TX 75074	75-2213291	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CITY YEAR, INC 1201 MAIN STREET, SUITE 1300 DALLAS, TX 75218	22-2882549	501(C)(3)	100,000.	0.			PROGRAM OPS COST
CITY SQUARE 1610 S. MALCOLM X BLVD. DALLAS, TX 75226	75-2332948	501(C)(3)	11,704.	0.			DONOR DESIGNATIONS

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CITY SQUARE 1610 S. MALCOLM X BLVD. DALLAS, TX 75226	75-2332948	501(C)(3)	1,023,628.	0.			PROGRAM OPS COST
COMMIT! 3800 MAPLE AVENUE, SUITE 800 DALLAS, TX 75219	80-0790222	501(C)(3)	77,000.	0.			PROGRAM OPS COST
COMMUNITIES IN SCHOOLS OF NORTH TEXAS, INC. - 217 S. STEMMONS - LEWISVILLE, TX 75067	75-2496426	501(C)(3)	86,250.	0.			PROGRAM OPS COST
COMMUNITIES IN SCHOOLS OF THE DALLAS REGION - 1341 W. MOCKINGBIRD LANE 1000E - DALLAS, TX 75247	75-2044117	501(C)(3)	105,000.	0.			PROGRAM OPS COST
COMMUNITY COUNCIL OF GREATER DALLAS - 1341 W. MOCKINGBIRD LANE STE. 1000W - DALLAS, TX 75247	75-0800631	501(C)(3)	71,103.	0.			PROGRAM OPS COST
CORNERSTONE ASSISTANCE NETWORK OF NORTH CENTRAL TEXAS - PO BOX 53 - PROSPER, TX 75078	27-2535979	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CORNERSTONE CROSSROADS ACADEMY 2815 S. ERVAY STREET DALLAS, TX 75215	11-3761734	501(C)(3)	100,000.	0.			PROGRAM OPS COST
CORPORATION FOR A SKILLED WORKFORCE - 1100 VICTORS WAY, SUITE 10 - ANN ARBOR, MI 48108	38-2991143	501(C)(3)	49,210.	0.			PROGRAM OPS COST
COVENANT PURPOSE AND RESTORATION FAMILY CENTER INC - 2154 W. NW. HWY, SUITE 205 - DALLAS, TX 75220	47-2112781	501(C)(3)	45,000.	0.			PROGRAM OPS COST

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CRISTO REY DALLAS HIGH SCHOOL 1064 N SAINT AUGUSTINE DRIVE DALLAS, TX 75217	46-3737066	501(C)(3)	6,407.	0.			DONOR DESIGNATIONS
CROSSROADS COMMUNITY SERVICES, INC. - 4500 SOUTH COCKRELL HILL ROAD - DALLAS, TX 75236	47-2676714	501(C)(3)	140,000.	0.			PROGRAM OPS COST
DALLAS AFTERSCHOOL 3900 WILLOW ST., STE 110 DALLAS, TX 75226	76-0838983	501(C)(3)	5,386.	0.			DONOR DESIGNATIONS
DALLAS AFTERSCHOOL 3900 WILLOW ST., STE 110 DALLAS, TX 75226	76-0838983	501(C)(3)	140,000.	0.			PROGRAM OPS COST
DALLAS AREA HABITAT FOR HUMANITY 2800 N HAMPTON ROAD DALLAS, TX 75212	75-2097161	501(C)(3)	5,709.	0.			DONOR DESIGNATIONS
DALLAS BLACK DANCE THEATRE, INC. P.O. BOX 131290 DALLAS, TX 75313	75-1756215	501(C)(3)	11,000.	0.			PROGRAM OPS COST
DALLAS CHILDREN'S ADVOCACY CENTER 5351 SAMUELL BOULEVARD DALLAS, TX 75228	75-2303404	501(C)(3)	22,474.	0.			DONOR DESIGNATIONS
DALLAS CHILDREN'S ADVOCACY CENTER 5351 SAMUELL BOULEVARD DALLAS, TX 75228	75-2303404	501(C)(3)	175,400.	0.			PROGRAM OPS COST
DALLAS COLLEGE FOUNDATION, INC. 1601 BOTHAM JEAN BLVD DALLAS, TX 75215	23-7326612	501(C)(3)	175,000.	0.			PROGRAM OPS COST

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DALLAS COUNTY MENTAL HEALTH & MENTAL RETARDATION CENTER DBA METROCARE SERVICES - 1345 RIVER BEND DRIVE SUITE 200, SUITE 200 -	75-1285603	501(C)(3)	536,049.	0.			PROGRAM OPS COST
DALLAS EDUCATION FOUNDATION 9400 NORTH CENTRAL EXPRESSWAY MB 19 DALLAS, TX 75231	20-5533398	501(C)(3)	43,567.	0.			DONOR DESIGNATIONS
DALLAS EVICTION ADVOCACY CENTER 2921 LEESHIRE DRIVE DALLAS, TX 75228	86-1742216	501(C)(3)	90,000.	0.			PROGRAM OPS COST
DALLAS INDEPENDENT SCHOOL DISTRICT 9400 N. CENTRAL EXPWY DALLAS, TX 75231	75-6001278	501(C)(3)	247,441.	0.			PROGRAM OPS COST
DALLAS INNOVATION ALLIANCE 606 TENNA LOMA CT DALLAS, TX 75208	81-5161144	501(C)(3)	60,000.	0.			PROGRAM OPS COST
DALLAS SERVICES 5442 LA SIERRA DRIVE DALLAS, TX 75231	75-0958408	501(C)(3)	60,000.	0.			PROGRAM OPS COST
DEAF ACTION CENTER 3110 CEDAR PLAZA LANE DALLAS, TX 75235	75-1575599	501(C)(3)	64,000.	0.			PROGRAM OPS COST
DENTON COUNTY FRIENDS OF THE FAMILY - 4845 INTERSTATE 35E, SUITE 200 - CORINTH, TX 76210	75-1734175	501(C)(3)	75,000.	0.			PROGRAM OPS COST
DOG RANCH RESCUE, INC. 10030 CR 288 ANNA, TX 75409	47-2027094	501(C)(3)	6,671.	0.			DONOR DESIGNATIONS

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EDUCATION IS FREEDOM 1111 W. MOCKINGBIRD LANE 1300B DALLAS, TX 75247	04-3643313	501(C)(3)	42,162.	0.			DONOR DESIGNATIONS
EDUCATION OPENS DOORS, INC. 2804 SWISS AVENUE DALLAS, TX 75204	46-0781846	501(C)(3)	50,000.	0.			PROGRAM OPS COST
EMPOWERING THE MASSES 2922 MARTIN LUTHER KING JR. BLVD. DALLAS, TX 75215	82-4300966	501(C)(3)	275,000.	0.			PROGRAM OPS COST
EQUAL HEART 4848 LEMMON AVE #513 DALLAS, TX 75219	46-2846816	501(C)(3)	40,000.	0.			PROGRAM OPS COST
ESSENCE DANCE ACADEMY LLC PO BOX 693 CEDAR HILL, TX 75106	81-5241741		20,000.	0.			PROGRAM OPS COST
FAMILIES IN CRISIS INCORPORATED P.O. BOX 25 KILLEEN, TX 76540	74-2172517	501(C)(3)	7,263.	0.			DONOR DESIGNATIONS
FAMILIES TO FREEDOM 1720 REGAL ROW, SUITE 135 DALLAS, TX 75235	47-3184478	501(C)(3)	40,000.	0.			PROGRAM OPS COST
FAMILY CARE CONNECTION PO BOX 763383 DALLAS, TX 75376-3383	20-1211618	501(C)(3)	236,783.	0.			PROGRAM OPS COST
FAMILY COMPASS 4210 JUNIUS STREET, SECOND FLOOR DALLAS, TX 75246	75-2400158	501(C)(3)	121,428.	0.			PROGRAM OPS COST

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FAMILY GATEWAY, INC 711 S. ST. PAUL STREET DALLAS, TX 75201	75-2105579	501(C)(3)	398,811.	0.			PROGRAM OPS COST
FAMILY GATEWAY, INC. 711 S. ST. PAUL STREET DALLAS, TX 75201	75-2105579	501(C)(3)	7,431.	0.			DONOR DESIGNATIONS
FAMILY PLACE P.O. BOX 7999 DALLAS, TX 75209	75-1590896	501(C)(3)	13,469.	0.			DONOR DESIGNATIONS
FAMILY PLACE P.O. BOX 7999 DALLAS, TX 75209	75-1590896	501(C)(3)	350,000.	0.			PROGRAM OPS COST
FERST FOUNDATION FOR CHILDHOOD LITERACY - 237 N SECOND STREET - MADISON, GA 30650	58-2489181	501(C)(3)	523,420.	0.			PROGRAM OPS COST
FII - NATIONAL (UPTOGETHER) 663 13TH ST., SUITE 200 OAKLAND, CA 94612	02-0784790	501(C)(3)	365,800.	0.			PROGRAM OPS COST
FIRST3YEARS 15851 DALLAS PARKWAY, #106 ADDISON, TX 75001	75-2067421	501(C)(3)	40,000.	0.			PROGRAM OPS COST
FOR OAK CLIFF 4478 SOUTH MARSALIS AVE DALLAS, TX 75216	81-3768369	501(C)(3)	52,500.	0.			PROGRAM OPS COST
FORNEY AREA UNITED WAY P.O. BOX 821 FORNEY, TX 75126	75-1742830	501(C)(3)	7,246.	0.			DONOR DESIGNATIONS

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FOUNDATION COMMUNITIES 3000 S IH 35, SUITE 300 AUSTIN, TX 78704	74-2563260	501(C)(3)	256,200.	0.			PROGRAM OPS COST
GENESIS WOMEN'S SHELTER AND SUPPORT - 4411 LEMMON AVENUE, SUITE 201 - DALLAS, TX 75219	87-1061849	501(C)(3)	164,500.	0.			PROGRAM OPS COST
GIRL SCOUTS OF NORTHEAST TEXAS 6001 SUMMERSIDE DRIVE DALLAS, TX 75252	75-1101571	501(C)(3)	26,399.	0.			DONOR DESIGNATIONS
GIRL SCOUTS OF NORTHEAST TEXAS 6001 SUMMERSIDE DRIVE DALLAS, TX 75252	75-1101571	501(C)(3)	164,500.	0.			PROGRAM OPS COST
GIRLS INCORPORATED OF METROPOLITAN DALLAS - 2040 EMPIRE CENTRAL DRIVE - DALLAS, TX 75235	75-1305705	501(C)(3)	15,459.	0.			DONOR DESIGNATIONS
GIRLS INCORPORATED OF METROPOLITAN DALLAS - 2040 EMPIRE CENTRAL DRIVE - DALLAS, TX 75235	75-1305705	501(C)(3)	108,500.	0.			PROGRAM OPS COST
GLEANERS COMMUNITY FOOD BANK OF SOUTHEASTERN MICHIGAN - 2131 BEAUFAIT - DETROIT, MI 48207	38-2156255	501(C)(3)	14,057.	0.			DONOR DESIGNATIONS
GOODWILL INDUSTRIES OF DALLAS, INC. - 3020 N. WESTMORELAND ROAD - DALLAS, TX 75212	75-0800649	501(C)(3)	455,514.	0.			PROGRAM OPS COST
GREATER LONGVIEW UNITED WAY, INC. 310 SOUTH FREDONIA LONGVIEW, TX 75601	75-0998908	501(C)(3)	5,224.	0.			DONOR DESIGNATIONS

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GREATER TERRELL UNITED WAY INC 102 E. MOORE AVE., SUITE 220 TERRELL, TX 75160	75-2420233	501(C)(3)	6,660.	0.			DONOR DESIGNATIONS
HAKING INNOVATION 5706 E. MOCKINGBIRD LN., #115-25 DALLAS, TX 75206	84-1805078	501(C)(3)	12,750.	0.			PROGRAM OPS COST
HARMONY COMMUNITY DEVELOPMENT CORPORATION - 6969 PASTOR BAILEY DR., STE. 110 - DALLAS, TX 75237	26-1245799	501(C)(3)	683,432.	0.			PROGRAM OPS COST
HAVEN INC. 801 VANGUARD DR PONTIAC, MI 48341	38-2426175	501(C)(3)	5,092.	0.			DONOR DESIGNATIONS
HEALTH SERVICES OF NORTH TEXAS, INC. - 4401 NORTH I-35E, SUITE 312 - DENTON, TX 76207	75-2252866	501(C)(3)	126,000.	0.			PROGRAM OPS COST
HEALTHY FUTURES OF TEXAS 2300 W. COMMERCE ST., SUITE 212 SAN ANTONIO, TX 78207	20-5793076	501(C)(3)	40,000.	0.			PROGRAM OPS COST
HEART HOUSE P.O. BOX 823162 DALLAS, TX 75382	75-2898097	501(C)(3)	46,000.	0.			PROGRAM OPS COST
HEART OF COURAGE (DBA CUP OF COURAGE) - 7441 MARVIN D LOVE FWY, SUITE 130 - DALLAS, TX 75237	81-3117972	501(C)(3)	52,500.	0.			PROGRAM OPS COST
HEART OF WEST MICHIGAN UNITED WAY 118 COMMERCE AVENUE SW STE. 100 GRAND RAPIDS, MI 49503	38-1360923	501(C)(3)	15,698.	0.			DONOR DESIGNATIONS

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HELEN'S PROJECT 3939 S. POLK ST., STE 212 DALLAS, TX 75224	47-4685063	501(C)(3)	7,500.	0.			PROGRAM OPS COST
HENRYETTA LIVE FOUNDATION 702 E. MAIN ST. HENRYETTA, OK 74437	87-3065106	501(C)(3)	8,114.	0.			DONOR DESIGNATIONS
HOMEWARD BOUND, INC PO BOX 222194 DALLAS, TX 75222-2194	74-2127841	501(C)(3)	76,472.	0.			PROGRAM OPS COST
HOPE COTTAGE, INC. 609 TEXAS ST. DALLAS, TX 75204	75-0800652	501(C)(3)	6,611.	0.			DONOR DESIGNATIONS
HOPE RESTORED MISSIONS, LLC 1947 K AVENUE, SUITE B-100 PLANO, TX 75074	84-2252859	501(C)(3)	50,000.	0.			PROGRAM OPS COST
HOPE'S DOOR /COLLIN CO. WOMEN'S SHELTER - 860 AVENUE F STE. 100 - PLANO, TX 75074	75-2038796	501(C)(3)	7,322.	0.			DONOR DESIGNATIONS
HOUSING CRISIS CENTER 4210 JUNIUS STREET DALLAS, TX 75246	75-1633304	501(C)(3)	34,576.	0.			PROGRAM OPS COST
HOUSING FORWARD 3000 PEGASUS PARK DR. STE. 1020 DALLAS, TX 75247	75-2461679	501(C)(3)	5,380.	0.			DONOR DESIGNATIONS
HOUSING FORWARD 3000 PEGASUS PARK DR. STE. 1020 DALLAS, TX 75247	75-2461679	501(C)(3)	58,313.	0.			PROGRAM OPS COST

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I LOOK LIKE LOVE INC. 2711 S. ERVAY #102 DALLAS, TX 75215	81-0807264	501(C)(3)	25,000.	0.			PROGRAM OPS COST
ILLUMINATE STEM P.O BOX 130981 DALLAS, TX 75313	46-0850680	501(C)(3)	33,000.	0.			PROGRAM OPS COST
INCARNATION PLACE INC PO BOX 25323 DALLAS, TX 75225	82-0626524	501(C)(3)	63,000.	0.			PROGRAM OPS COST
INCENTIVE SERVICES INC. 7667 CAHILL RD. EDINA, MN 55439	41-1754227		21,399.	0.			PROGRAM OPS COST
INSPIRING TOMORROW'S LEADERS 8828 NORTH STEMMONS FREEWAY, SUITE DALLAS, TX 75247	90-0672495	501(C)(3)	50,000.	0.			PROGRAM OPS COST
INTERFAITH FAMILY SERVICES 1651 MATILDA STREET DALLAS, TX 75206	75-2028254	501(C)(3)	5,236.	0.			DONOR DESIGNATIONS
INTERFAITH FAMILY SERVICES 1651 MATILDA STREET DALLAS, TX 75206	75-2028254	501(C)(3)	302,917.	0.			PROGRAM OPS COST
INTERNATIONAL RESCUE COMMITTEE 6500 GREENVILLE AVE, SUITE 500 DALLAS, TX 75206	13-5660870	501(C)(3)	20,000.	0.			PROGRAM OPS COST
IRVING CARES 440 SOUTH NURSERY RD., #101 IRVING, TX 75060	75-1436937	501(C)(3)	40,000.	0.			PROGRAM OPS COST

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JEWISH FAMILY SERVICE OF GREATER DALLAS - 5402 ARAPAHO ROAD, SUITE 102 - DALLAS, TX 75248	75-1992728	501(C)(3)	6,069.	0.			DONOR DESIGNATIONS
JEWISH FAMILY SERVICE OF GREATER DALLAS - 5402 ARAPAHO ROAD, SUITE 102 - DALLAS, TX 75248	75-1992728	501(C)(3)	338,100.	0.			PROGRAM OPS COST
JUBILEE PARK & COMMUNITY CENTER 917 BANK ST DALLAS, TX 75223	75-2726296	501(C)(3)	9,696.	0.			DONOR DESIGNATIONS
JUBILEE PARK & COMMUNITY CENTER 917 BANK ST DALLAS, TX 75223	75-2726296	501(C)(3)	94,500.	0.			PROGRAM OPS COST
JUNIOR ACHIEVEMENT OF DALLAS, INC. 3000 PEGASUS DR. #720 DALLAS, TX 75247	75-0881589	501(C)(3)	9,646.	0.			DONOR DESIGNATIONS
JUNIOR PLAYERS 4054 MCKINNEY AVE., SUITE 104 DALLAS, TX 75204	75-6061082	501(C)(3)	15,750.	0.			PROGRAM OPS COST
KIDDOFIT LLC 4613 JASMINE TRAIL MIDLOTHIAN, TX 76065	83-4678156		54,925.	0.			PROGRAM OPS COST
KIPP TEXAS, INC. 3200 SOUTH LANCASTER ROAD STE 230-A DALLAS, TX 75216	01-0639602	501(C)(3)	100,000.	0.			PROGRAM OPS COST
LANCASTER INDEPENDENT SCHOOL DISTRICT - 422 S. CENTRE AVE - LANCASTER, TX 75146	75-6001936	GOV	35,000.	0.			PROGRAM OPS COST

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

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LEADERSHIP FORWARD MENTORING PROGRAM - 616 N. MADISON AVE. - DALLAS, TX 75208	82-0977074	501(C)(3)	40,000.	0.			PROGRAM OPS COST
LETS GET SET INC 300 BERRY ST., UNIT 1504 SAN FRANCISCO, CA 94158	85-3710594		20,000.	0.			PROGRAM OPS COST
LIFEPATH SYSTEMS FOUNDATION 1515 HERITAGE DRIVE, SUITE 105 MCKINNEY, TX 75069	61-1644629	501(C)(3)	33,000.	0.			PROGRAM OPS COST
LITEHOUSE WELLNESS 5931 GREENVILLE AVENUE #763 DALLAS, TX 75206	84-3884158	501(C)(3)	45,800.	0.			PROGRAM OPS COST
LITERACY ACHIEVES 4210 JUNIUS ST 5TH FLOOR DALLAS, TX 75246	75-2708992	501(C)(3)	105,000.	0.			PROGRAM OPS COST
LITERACY INSTRUCTION FOR TEXAS (LIFT) - 1610 S. MALCOLM X BLVD. 320 - DALLAS, TX 75226	75-1095223	501(C)(3)	243,600.	0.			PROGRAM OPS COST
LIVINGSTON COUNTY UNITED WAY 2980 DORR ROAD BRIGHTON, MI 48116	38-2174453	501(C)(3)	5,924.	0.			DONOR DESIGNATIONS
LONE STAR JUSTICE ALLIANCE 3809 S. 1ST STREET AUSTIN, TX 78704	82-2345921	501(C)(3)	140,000.	0.			PROGRAM OPS COST
LOS BARRIOS UNIDOS COMMUNITY CLINIC - 809 SINGLETON BLVD. - DALLAS, TX 75212	75-1378664	501(C)(3)	696,200.	0.			PROGRAM OPS COST

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LUMIN EDUCATION 924 WAYNE STREET DALLAS, TX 75223	75-1612054	501(C)(3)	564,367.	0.			PROGRAM OPS COST
MARCH TO THE POLLS 5607 E. MOCKINGBIRD LN, #115-267 DALLAS, TX 75206	86-3898144	501(C)(3)	70,000.	0.			PROGRAM OPS COST
MEADOWS MENTAL HEALTH POLICY INSTITUTE FOR TEXAS - 2800 SWISS AVE - DALLAS, TX 75204	46-3992618	501(C)(3)	90,000.	0.			PROGRAM OPS COST
MEALS ON WHEELS COLLIN COUNTY 600 N TENNESSEE ST MCKINNEY, TX 75069	75-1544507	501(C)(3)	9,515.	0.			DONOR DESIGNATIONS
METHODIST HEALTH SYSTEM FOUNDATION 1411 NORTH BECKLEY AVENUE DALLAS, TX 75203	75-1548343	501(C)(3)	49,500.	0.			PROGRAM OPS COST
METHODIST HEALTH SYSTEM FOUNDATION 1411 NORTH BECKLEY AVENUE DALLAS, TX 75203	75-1548343	501(C)(3)	8,936.	0.			DONOR DESIGNATIONS
METROCREST SERVICES 13801 HUTTON DRIVE STE. 150 FARMERS BRANCH, TX 75234	75-1548334	501(C)(3)	162,884.	0.			PROGRAM OPS COST
MI ESCUELITA PRESCHOOL, INC. 4231 MAPLE AVENUE DALLAS, TX 75219	75-1728505	501(C)(3)	210,000.	0.			PROGRAM OPS COST
MI ESCUELITA PRESCHOOL, INC. 4231 MAPLE AVENUE DALLAS, TX 75219	75-1728505	501(C)(3)	30,141.	0.			DONOR DESIGNATIONS

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MILES OF FREEDOM 2922 MARTIN LUTHER KING JR. BLVD, BUILDING A, SUITE 118B - DALLAS, TX 75215	45-4959062	501(C)(3)	91,000.	0.			PROGRAM OPS COST
MOMENTOUS INSTITUTE 106 EAST 10TH STREET DALLAS, TX 75203	75-1855620	501(C)(3)	61,804.	0.			PROGRAM OPS COST
MOMENTOUS INSTITUTE 106 EAST 10TH STREET DALLAS, TX 75203	75-1855620	501(C)(3)	11,575.	0.			DONOR DESIGNATIONS
MOSAIC FAMILY SERVICES, INC. 12225 GREENVILLE AVENUE, SUITE 800 DALLAS, TX 75243	75-2484565	501(C)(3)	252,000.	0.			PROGRAM OPS COST
MY HEALTH MY RESOURCES OF TARRANT COUNTY (MHMR) - 3840 HULEN STREET - FORT WORTH, TX 76107	75-1249456	501(C)(3)	7,500.	0.			PROGRAM OPS COST
MY POSSIBILITIES 3601 MAPLESHADE LANE PLANO, TX 75075	26-1509133	501(C)(3)	115,500.	0.			PROGRAM OPS COST
MY529 60 S 400 W. SALT LAKE CITY, UT 84101	87-0680188		100,000.	0.			PROGRAM OPS COST
NAACP LEGAL DEFENSE & EDUCATIONAL FUND, INC - V0000677437 - 40 RECTOR STREET 5TH FLOOR - NEW YORK, NY 10006	13-1655255	501(C)(3)	5,108.	0.			DONOR DESIGNATIONS
NAMI NORTH TEXAS 2812 SWISS AVE DALLAS, TX 75204	75-1875023	501(C)(3)	97,500.	0.			PROGRAM OPS COST

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NEW FRIENDS NEW LIFE P. O. BOX 192378 DALLAS, TX 75219	75-2820473	501(C)(3)	45,000.	0.			PROGRAM OPS COST
NEW FRIENDS NEW LIFE P. O. BOX 192378 DALLAS, TX 75219	75-2820473	501(C)(3)	18,220.	0.			DONOR DESIGNATIONS
NEXUS RECOVERY CENTER INCORPORATED 8733 LA PRADA DRIVE DALLAS, TX 75228	23-7169388	501(C)(3)	8,303.	0.			DONOR DESIGNATIONS
NEXUS RECOVERY CENTER INCORPORATED 8733 LA PRADA DRIVE DALLAS, TX 75228	23-7169388	501(C)(3)	157,500.	0.			PROGRAM OPS COST
NORTH DALLAS SHARED MINISTRIES 2875 MERRELL ROAD DALLAS, TX 75229	75-1908563	501(C)(3)	85,000.	0.			PROGRAM OPS COST
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LANE PLANO, TX 75075	75-1785357	501(C)(3)	10,637.	0.			DONOR DESIGNATIONS
NORTH TEXAS FOOD BANK 3677 MAPLESHADE LANE PLANO, TX 75075	75-1785357	501(C)(3)	50,000.	0.			PROGRAM OPS COST
NPOWER 55 WASHINGTON STREET, SUITE 560 BROOKLYN, NY 11201	13-4145441	501(C)(3)	437,038.	0.			PROGRAM OPS COST
OAK CLIFF EMPOWERED, INC. 400 S. ZANG BLVD., C-59 DALLAS, TX 75208	26-1372146	501(C)(3)	63,000.	0.			PROGRAM OPS COST

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ON-TARGET SUPPLIES & LOGISTICS, LTD. - 1133 S. MADISON AVE. - DALLAS, TX 75208	75-2593466		25,000.	0.			PROGRAM OPS COST
ORANGE COUNTY UNITED WAY (CA) 18012 MITCHELL AVENUE SOUTH IRVINE, CA 92614	33-0047994	501(C)(3)	23,285.	0.			DONOR DESIGNATIONS
ORANGEWOOD CHILDREN'S FOUNDATION 1575 EAST 17TH STREET SANTA ANA, CA 92705	95-3616628	501(C)(3)	8,723.	0.			DONOR DESIGNATIONS
OUR FRIENDS PLACE 6500 GREENVILLE AVENUE, SUITE 620 DALLAS, TX 75238	75-2077719	501(C)(3)	50,000.	0.			PROGRAM OPS COST
PARKLAND FOUNDATION 1341 W MOCKINGBIRD LN, STE 1100E DALLAS, TX 75247	75-2089180	501(C)(3)	54,297.	0.			PROGRAM OPS COST
PARKLAND FOUNDATION FOR PARKLAND HEALTH & HOSPITAL SYSTEM - 1341 W MOCKINGBIRD LN, STE 1100E - DALLAS, TX 75247	75-2089180	501(C)(3)	157,500.	0.			PROGRAM OPS COST
PAWS WITH A CAUSE NATIONAL HEADQUARTERS - 4646 SOUTH DIVISION - WAYLAND, MI 49348	38-2370342	501(C)(3)	12,949.	0.			DONOR DESIGNATIONS
PEDIPLACE 502 S. OLD ORCHARD, SUITE 126 LEWISVILLE, TX 75067	75-2512752	501(C)(3)	175,000.	0.			PROGRAM OPS COST
PER SCHOLAS 211 N ERVAY STREET, SUITE 700 DALLAS, TX 75201	04-3252955	501(C)(3)	332,814.	0.			PROGRAM OPS COST

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PRISM HEALTH NORTH TEXAS 3900 JUNIUS ST. #300 DALLAS, TX 75246	75-2306145	501(C)(3)	1,102,572.	0.			PROGRAM OPS COST
PRISON ENTREPRENEURSHIP PROGRAM 6501 NAVIGATION BLVD., SUITE H7 HOUSTON, TX 77011-1367	20-1384253	501(C)(3)	154,350.	0.			PROGRAM OPS COST
PROJECT TRANSFORMATION 4024 CARUTH BLVD DALLAS, TX 75225	75-2930405	501(C)(3)	40,000.	0.			PROGRAM OPS COST
PUEDE NETWORK 2207 HARLANDALE AVE. DALLAS, TX 75216	47-4703462	501(C)(3)	40,000.	0.			PROGRAM OPS COST
QUICKFIRE SOLUTIONS, INC. PO BOX 2322 GRAPEVINE, TX 76099	20-4465734		40,574.	0.			PROGRAM OPS COST
RAINBOW DAYS, INC. THREE FOREST PLAZA 12221 MERIT DR, DALLAS, TX 75251	75-1844908	501(C)(3)	63,000.	0.			PROGRAM OPS COST
RAPE CRISIS CENTER OF COLLIN COUNTY DBA THE TURNING POINT - 3325 SILVERSTONE - PLANO, TX 75023	75-2065785	501(C)(3)	40,000.	0.			PROGRAM OPS COST
READERS 2 LEADERS 2800 N HAMPTON RD SUITE 120 DALLAS, TX 75212	90-0641325	501(C)(3)	143,500.	0.			PROGRAM OPS COST
READING PARTNERS 2910 SWISS AVENUE DALLAS, TX 75204	77-0568469	501(C)(3)	140,000.	0.			PROGRAM OPS COST

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READING TO NEW HEIGHTS INC 9330 LYNDON B JOHNSON FWY, STE 278 DALLAS, TX 75243	85-0836272	501(C)(3)	27,000.	0.			PROGRAM OPS COST
REFUGEE SERVICES OF TEXAS 9330 LBJ FREEWAY, SUITE 350 DALLAS, TX 75243	75-1618251	501(C)(3)	86,250.	0.			PROGRAM OPS COST
REGIONAL BLACK CONTRACTORS ASSOCIATION (RBCA) COMMUNITY DEVELOPMENT CORPORATION - 2627 MARTIN LUTHER KING JR. BLVD -	83-2391035	501(C)(3)	11,938.	0.			PROGRAM OPS COST
RESOURCE CENTER OF DALLAS, INC. 5750 CEDAR SPRINGS ROAD DALLAS, TX 75235-6802	75-1892059	501(C)(3)	126,000.	0.			PROGRAM OPS COST
RESOURCE CENTER OF DALLAS, INC. 5750 CEDAR SPRINGS ROAD DALLAS, TX 75235-6802	75-1892059	501(C)(3)	8,773.	0.			DONOR DESIGNATIONS
ROCKWALL COUNTY HELPING HANDS 950 WILLIAMS STREET, BLDG B ROCKWALL, TX 75087	75-2402276	501(C)(3)	70,000.	0.			PROGRAM OPS COST
ROCKWALL COUNTY HELPING HANDS 950 WILLIAMS STREET, BLDG B ROCKWALL, TX 75087	75-2402276	501(C)(3)	6,729.	0.			DONOR DESIGNATIONS
ROSA ES ROJO, INC. PO BOX 250435 PLANO, TX 75025	81-3557997	501(C)(3)	65,000.	0.			PROGRAM OPS COST
SAC (RAE PHILLIPS) BOX 225431 DALLAS, TX 75222	75-2799133	501(C)(3)	7,500.	0.			PROGRAM OPS COST

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SEEDS 2 STEM, LLC 3662 W CAMP WISDOM RD. SUITE 2044 DALLAS, TX 75237	85-2932775		38,500.	0.			PROGRAM OPS COST
SENIOR CITIZENS OF GREATER DALLAS, INC. - 3910 HARRY HINES BLVD. - DALLAS, TX 75219	75-1085555	501(C)(3)	140,000.	0.			PROGRAM OPS COST
SERVICES OF HOPE 1137 CONVEYOR SUITE 107 DALLAS, TX 75247	33-1104425	501(C)(3)	63,129.	0.			PROGRAM OPS COST
SHARED HOUSING CENTER, INC. 402 N. GOOD LATIMER EXPRESSWAY DALLAS, TX 75204	75-2137522	501(C)(3)	60,000.	0.			PROGRAM OPS COST
SHARING LIFE COMMUNITY OUTREACH, INC. - 3544 E. EMPORIUM CIRCLE - MESQUITE, TX 75150	75-2831756	501(C)(3)	172,315.	0.			PROGRAM OPS COST
SOCIAL VENTURE PARTNERS DALLAS P.O. BOX 670546 DALLAS, TX 75367	75-2945359	501(C)(3)	115,000.	0.			PROGRAM OPS COST
SOCIETY OF ST. VINCENT DE PAUL OF NORTH TEXAS - 3826 GILBERT AVE. - DALLAS, TX 75219	75-1630370	501(C)(3)	56,250.	0.			PROGRAM OPS COST
SOUTHERN DALLAS LINK 1020 SCOTLAND DR. #3115 DESOTO, TX 75115	82-2392922	501(C)(3)	70,000.	0.			PROGRAM OPS COST
SOUTHERN METHODIST UNIVERSITY 3140 DYER ST., MS# 261 DALLAS, TX 75275-0511	75-0800689	501(C)(3)	50,000.	0.			PROGRAM OPS COST

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SOUTHWESTERN DIABETIC FOUNDATION INC. - PO BOX 918 - GAINESVILLE, TX 76241	75-6002547	501(C)(3)	6,349.	0.			DONOR DESIGNATIONS
SOUTHWESTERN DIABETIC FOUNDATION INC. - PO BOX 918 - GAINESVILLE, TX 76241	75-6002547	501(C)(3)	40,000.	0.			PROGRAM OPS COST
ST JUDE CHILDREN'S RESEARCH HOSPITAL - 5800 CAMPUS CIRCLE DRIVE EAST, SUITE 108-A - IRVING, TX 75063	35-1044585	501(C)(3)	5,331.	0.			DONOR DESIGNATIONS
STONEWATER CHURCH - V0000703946 911 E HWY 377 BOX 4 GRANBURY, TX 76048	20-2015011	501(C)(3)	8,580.	0.			DONOR DESIGNATIONS
STUDIO BELLA FOR KIDS, LLC 1450 OLD GATE LANE DALLAS, TX 75218	82-1653436		79,117.	0.			PROGRAM OPS COST
T.R. HOOVER COMMUNITY DEVELOPMENT CENTER - 5106 BEXAR STREET - DALLAS, TX 75215	75-2700136	501(C)(3)	45,000.	0.			PROGRAM OPS COST
TEXAS HEALTH RESOURCES FOUNDATION 612 E LAMAR BLVD, SUITE 300 ARLINGTON, TX 76011	75-2022128	501(C)(3)	86,250.	0.			PROGRAM OPS COST
TEXAS MUSLIM WOMEN'S FOUNDATION, INC. - PO BOX 863388 - PLANO, TX 75086	20-3060929	501(C)(3)	75,000.	0.			PROGRAM OPS COST
THE CONCILIO 650 FORT WORTH AVENUE, SUITE 250 DALLAS, TX 75208	75-1770140	501(C)(3)	1,404,396.	0.			PROGRAM OPS COST

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THE DALLAS FOUNDATION 3963 MAPLE AVENUE, SUITE 390 DALLAS, TX 75219	75-2890371	501(C)(3)	50,000.	0.			PROGRAM OPS COST
THE DALLAS FOUNDATION-BONTON FARMS 3963 MAPLE AVENUE, SUITE 390 DALLAS, TX 75219	75-2890371	501(C)(3)	9,551.	0.			DONOR DESIGNATIONS
THE EDUCATOR COLLECTIVE 4346 SOMERVILLE AVE DALLAS, TX 75206	47-1789138	501(C)(3)	60,000.	0.			PROGRAM OPS COST
THE LULLABY HOUSE 7441 MARVIN D. LOVE FRWYA, SUITE 30 DALLAS, TX 75237	47-3576009	501(C)(3)	25,000.	0.			PROGRAM OPS COST
THE SALVATION ARMY-NORTH TEXAS AREA COMMAND - PO BOX 36006 - DALLAS, TX 75235	58-0660607	501(C)(3)	20,011.	0.			DONOR DESIGNATIONS
THE SALVATION ARMY-NORTH TEXAS AREA COMMAND - PO BOX 36006 - DALLAS, TX 75235	58-0660607	501(C)(3)	290,874.	0.			PROGRAM OPS COST
THE SAMARITAN INN 1725 NORTH MCDONALD STREET MCKINNEY, TX 75071	75-1984285	501(C)(3)	60,000.	0.			PROGRAM OPS COST
THE SAMARITAN INN 1725 NORTH MCDONALD STREET MCKINNEY, TX 75071	75-1984285	501(C)(3)	17,146.	0.			DONOR DESIGNATIONS
THE SENIOR SOURCE 3910 HARRY HINES BLVD. DALLAS, TX 75219	75-1085555	501(C)(3)	14,353.	0.			DONOR DESIGNATIONS

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THE STEWPOT OF FIRST PRESBYTERIAN CHURCH - 1835 YOUNG ST - DALLAS, TX 75201	75-0871727	501(C)(3)	86,250.	0.			PROGRAM OPS COST
THE UNITED WAY OF MIDLAND, INC. 1209 WEST WALL STREET MIDLAND, TX 79701	75-0945926	501(C)(3)	9,609.	0.			DONOR DESIGNATIONS
THE VISITING NURSE ASSOCIATION OF TEXAS (VNA) - 1600 VICEROY DRIVE SUITE 400 - DALLAS, TX 75235	75-0800692	501(C)(3)	115,000.	0.			PROGRAM OPS COST
THE WARREN CENTER 320 CUSTER ROAD RICHARDSON, TX 75080	75-1282040	501(C)(3)	101,200.	0.			PROGRAM OPS COST
TIA'S STEAM ENRICHMENT, LLC - DBA CHALLENGE ISLAND - 17630 DAVENPORT # 103 - DALLAS, TX 75252	82-0680309		53,450.	0.			PROGRAM OPS COST
TOGETHER WE THRIVE 5955 ALPHA RD, SUITE #404 DALLAS, TX 75240	83-2951879	501(C)(3)	70,000.	0.			PROGRAM OPS COST
TRUSTED WORLD FOUNDATION 906 W MCDERMOTT DRIVE, SUITE 116-27 ALLEN, TX 75013	45-5264332	501(C)(3)	115,000.	0.			PROGRAM OPS COST
TULSA AREA UNITED WAY 1430 SOUTH BOULDER AVENUE TULSA, OK 74119	73-0580283	501(C)(3)	55,865.	0.			DONOR DESIGNATIONS
U&I 8800 AMBASSADOR ROW DALLAS, TX 75247	75-1008422	501(C)(3)	126,000.	0.			PROGRAM OPS COST

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UNDER 1 ROOF 5787 S. HAMPTON RD, SUITE 390 DALLAS, TX 75232	80-0765001	501(C)(3)	184,108.	0.			PROGRAM OPS COST
UNITED WAY CALIFORNIA CAPITAL REGION - 10389 OLD PLACERVILLE ROAD - SACRAMENTO, CA 95827	94-1225382	501(C)(3)	7,291.	0.			DONOR DESIGNATIONS
UNITED WAY FOR GREATER AUSTIN 2000 E. MARTIN LUTHER KING JR. BLVD AUSTIN, TX 78702	74-1193439	501(C)(3)	35,550.	0.			DONOR DESIGNATIONS
UNITED WAY OF CENTRAL & NORTHEASTERN CONNECTICUT - 30 LAUREL STREET - HARTFORD, CT 06106	06-0646653	501(C)(3)	7,547.	0.			DONOR DESIGNATIONS
UNITED WAY OF CENTRAL CAROLINAS, INC. - PO BOX 890685 - CHARLOTTE, NC 28289-0685	56-0529948	501(C)(3)	10,113.	0.			DONOR DESIGNATIONS
UNITED WAY OF CENTRAL TEXAS, INC. 4 NORTH 3RD STREET TEMPLE, TX 76501	74-2575728	501(C)(3)	87,163.	0.			DONOR DESIGNATIONS
UNITED WAY OF CHRISTIAN COUNTY 108 WEST MARKET TAYLORVILLE, IL 62568	37-0816279	501(C)(3)	5,227.	0.			DONOR DESIGNATIONS
UNITED WAY OF DENTON COUNTY 1314 TEASLEY LANE DENTON, TX 76205	75-1251128	501(C)(3)	10,516.	0.			DONOR DESIGNATIONS
UNITED WAY OF GENESEE COUNTY (MI) 111 E. COURT ST. 3A FLINT, MI 48502	38-1359516	501(C)(3)	5,784.	0.			DONOR DESIGNATIONS

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UNITED WAY OF GRAYSON COUNTY, INC. 713 EAST BROCKETT SHERMAN, TX 75090	23-7087293	501(C)(3)	5,341.	0.			DONOR DESIGNATIONS
UNITED WAY OF GREATER CINCINNATI 2400 READING ROAD CINCINNATI, OH 45202	31-0537502	501(C)(3)	5,331.	0.			DONOR DESIGNATIONS
UNITED WAY OF GREATER HOUSTON 50 WAUGH DRIVE HOUSTON, TX 77007	74-1167964	501(C)(3)	61,918.	0.			DONOR DESIGNATIONS
UNITED WAY OF GREATER LOS ANGELES INC. - 26350 - 1150 SOUTH OLIVE STREET T500 - LOS ANGELES, CA 90015	95-2274801	501(C)(3)	35,396.	0.			DONOR DESIGNATIONS
UNITED WAY OF GREATER ST. LOUIS 910 NORTH 11TH STREET SAINT LOUIS, MO 63101	43-0714167	501(C)(3)	8,174.	0.			DONOR DESIGNATIONS
UNITED WAY OF HOOD COUNTY 1807 E. HIGHWAY 377 GRANBURY, TX 76048	75-2794263	501(C)(3)	16,819.	0.			DONOR DESIGNATIONS
UNITED WAY OF JOHNSON COUNTY (TX) P.O. BOX 31 CLEBURNE, TX 76033	75-1101239	501(C)(3)	6,168.	0.			DONOR DESIGNATIONS
UNITED WAY OF MASSACHUSETTS BAY AND - 51 SLEEPER STREET - BOSTON, MA 02210	04-2382233	501(C)(3)	5,087.	0.			DONOR DESIGNATIONS
UNITED WAY OF ODESSA P.O. BOX 632 ODESSA, TX 79760	75-0838777	501(C)(3)	5,340.	0.			DONOR DESIGNATIONS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
UNITED WAY OF PARKER COUNTY 106 AUSTIN AVENUE SUITE 106 WEATHERFORD, TX 76086	75-2867921	501(C)(3)	10,314.	0.			DONOR DESIGNATIONS
UNITED WAY OF SAN ANTONIO & BEXAR CO. - P. O. BOX 898 - SAN ANTONIO, TX 78293	74-1272381	501(C)(3)	10,575.	0.			DONOR DESIGNATIONS
UNITED WAY OF SAN DIEGO COUNTY 4699 MURPHY CANYON ROAD SAN DIEGO, CA 92123	95-2213995	501(C)(3)	5,266.	0.			DONOR DESIGNATIONS
UNITED WAY OF SMITH COUNTY P.O. BOX 10029 TYLER, TX 75711 TYLER, TX 75711	75-0957331	501(C)(3)	8,970.	0.			DONOR DESIGNATIONS
UNITED WAY OF SOUTH TEXAS 200 SOUTH TENTH STREET 101 MCALLEN, TX 78501	74-2052527	501(C)(3)	8,999.	0.			DONOR DESIGNATIONS
UNITED WAY OF SOUTHEASTERN MICHIGAN - 3011 W. GRAND BOULEVARD SUITE 500 - DETROIT, MI 48226	20-3099071	501(C)(3)	429,345.	0.			DONOR DESIGNATIONS
UNITED WAY OF TARRANT COUNTY (TX) 201 N. RUPERT STREET, SUITE 107 FORT WORTH, TX 76107	75-0858360	501(C)(3)	157,091.	0.			DONOR DESIGNATIONS
UNITED WAY OF THE BAY AREA (CA) 550 KEARNY STREET, STE 510 SAN FRANCISCO, CA 94108	94-1312348	501(C)(3)	47,387.	0.			DONOR DESIGNATIONS
UNITED WAY OF THE BRAZOS VALLEY, INC. - 1716 BRIARCREST DRIVE SUITE 155 - BRYAN, TX 77802	74-2050241	501(C)(3)	22,282.	0.			DONOR DESIGNATIONS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
UNITED WAY OF THE GREATER FORT HOOD AREA - 208 WEST AVENUE A - KILLEEN, TX 76541	74-1750544	501(C)(3)	8,120.	0.			DONOR DESIGNATIONS
UNITED WAY OF WACO-MCLENNAN COUNTY 1516 AUSTIN AVE WACO, TX 76701	74-1189027	501(C)(3)	24,150.	0.			DONOR DESIGNATIONS
UNITED WAY OF WEST ELLIS COUNTY P.O. BOX 1025 MIDLOTHIAN, TX 76065	75-6002917	501(C)(3)	43,369.	0.			DONOR DESIGNATIONS
UNITED WAY OF WILLIAMSON COUNTY (TX) - P.O. BOX 708 - ROUND ROCK, TX 78680	23-7396732	501(C)(3)	20,980.	0.			DONOR DESIGNATIONS
UNIVERSITY OF NORTH TEXAS AT DALLAS - 7300 UNIVERSITY HILLS BLVD - DALLAS, TX 75241	27-1208151	501(C)(3)	140,000.	0.			PROGRAM OPS COST
UNIVERSITY OF OKLAHOMA FOUNDATION 100 TIMBERDELL ROAD NORMAN, TX 73019	73-6091755	501(C)(3)	14,280.	0.			DONOR DESIGNATIONS
UNIVERSITY OF TX AT DALLAS, CALLIER CTR - 1966 INWOOD ROAD - DALLAS, TX 75235	75-6035865	501(C)(3)	40,000.	0.			PROGRAM OPS COST
UPLIFT EDUCATION 3000 PEGASUS PARK DR., SUITE 1100 DALLAS, TX 75207	75-2659683	501(C)(3)	192,500.	0.			PROGRAM OPS COST
URBAN TEACHERS 1800 WASHINGTON BLVD., SUITE 411 BALTIMORE, MD 21230	27-0989006	501(C)(3)	90,000.	0.			PROGRAM OPS COST

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
VALLEY OF THE SUN UNITED WAY 3200 E. CAMELBACK ROAD, SUITE 375 PHOENIX, AZ 85018-2328	86-0104419	501(C)(3)	8,030.	0.			DONOR DESIGNATIONS
VISTRA ENERGY P.O. BOX 650257 DALLAS, TX 75265	36-4833255	501(C)(3)	22,020.	0.			DONOR DESIGNATIONS
VOGEL ALCOVE 1738 GANO STREET DALLAS, TX 75215	75-2133827	501(C)(3)	61,600.	0.			PROGRAM OPS COST
VOLUNTEERS IN PREVENTION P.O. BOX 24468 DETROIT, MI 48224	38-2311813	501(C)(3)	8,844.	0.			DONOR DESIGNATIONS
VOLUNTEERS OF AMERICA - TEXAS 300 E. MIDWAY DRIVE EULESS, TX 76039	75-0827469	501(C)(3)	109,250.	0.			PROGRAM OPS COST
WELLNESS CENTER FOR OLDER ADULTS 401 W. 16TH STREET, SUITE 600 PLANO, TX 75075	75-1839305	501(C)(3)	45,000.	0.			PROGRAM OPS COST
WESLEY-RANKIN COMMUNITY CENTER, INC. - 3100 CROSSMAN AVENUE - DALLAS, TX 75212	75-0808775	501(C)(3)	60,000.	0.			PROGRAM OPS COST
WILKINSON CENTER P.O. BOX 720248 DALLAS, TX 75372	75-2712117	501(C)(3)	112,000.	0.			PROGRAM OPS COST
WOMEN IN NEED OF GENEROUS SUPPORT "WINGS" - 2603 INWOOD ROAD - DALLAS, TX 75235	75-0800699	501(C)(3)	380,000.	0.			PROGRAM OPS COST

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) 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
WOMEN ROCK, INC. 225 E. HOUSTON STREET SHERMAN, TX 75090	27-4402761	501(C)(3)	25,000.	0.			PROGRAM OPS COST
YEAR UP DALLAS/FORT WORTH 701 ELM ST #400 DALLAS, TX 75202	04-3534407	501(C)(3)	56,000.	0.			PROGRAM OPS COST
YMCA OF METROPOLITAN DALLAS 601 NORTH AKARD STREET DALLAS, TX 75201	75-0800696	501(C)(3)	5,989.	0.			DONOR DESIGNATIONS
YMCA OF METROPOLITAN DALLAS 601 NORTH AKARD STREET DALLAS, TX 75201	75-0800696	501(C)(3)	140,000.	0.			PROGRAM OPS COST
YOUNG LEADERS, STRONG CITY 1312 PAINTBRUSH STREET MESQUITE, TX 75149	84-3239436	501(C)(3)	113,200.	0.			PROGRAM OPS COST
YOUNG WOMEN'S PREPARATORY NETWORK 1722 ROUTH STREET, SUITE 720 DALLAS, TX 75201	47-0902114	501(C)(3)	70,000.	0.			PROGRAM OPS COST
YOUTH WITH FACES 6333 E. MOCKINGBIRD, SUITE 147-872 DALLAS, TX 75214	30-0018778	501(C)(3)	62,000.	0.			PROGRAM OPS COST

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
DALLAS RENTAL ASSISTANCE COALITION	123	416,418.	0.		RENT ASSISTANCE
DRIVERS OF POVERTY	202	160,198.	0.		CHILDCARE ASSISTANCE
BASIC NEEDS ASSISTANCE	233	60,075.	0.		BASIC NEEDS ASSISTANCE
ARPA EMPLOYEE RENTENTION	10	45,200.	0.		ARPA EMPLOYEE RENTENTION
SOCIAL INNOVATION MENTORING	9	18,500.	0.		SOCIAL INNOVATION MENTORING

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

PART I, LINE 2:

PROCEDURE FOR MONITORING USE OF GRANT FUNDS INSIDE U.S.

AS PART OF THE GRANT AGREEMENT, AN AGENCY AGREES TO OPERATE IN A MANNER

CONSISTENT WITH INFORMATION COMMUNICATED TO UWMD AND TO REGULARLY REPORT ON

THE WORK SUPPORTED BY UWMD FUNDING. FOR GRANTS MADE, THE AGENCY WILL REPORT

INFORMATION BASED ON SIX CATEGORIES (DEMOGRAPHICS, ZIP CODES SERVED,

DOLLARS SPENT, SUCCESS STORIES, COMMON MEASURES, AND ORGANIZATION BUDGET),

UNLESS SPECIAL ARRANGEMENTS HAVE BEEN MADE AND AGREED TO, IN WRITING, BY

BOTH THE AGENCY AND UWMD. EACH REPORT WILL INCLUDE THE COMMON MEASURES,

Part IV Supplemental Information

WITH RESULTS BEING REPORTED IN A MANNER CONSISTENT WITH THE COMMON MEASURES SELECTED BY THE AGENCY IN THEIR APPLICATION. FAILURE TO REPORT IN AN APPROPRIATE MANNER WILL LEAD TO A REVIEW OF GRANT FUNDING. ANY MATERIAL CHANGE IN THE OPERATING OF A PROGRAM THAT IS GRANT FUNDED WILL BE REPORTED TO UWMD IN A TIMELY MANNER, WITH CONTINUED FUNDING SUBJECT TO UWMD REVIEW. AS PART OF THE SCREENING PROCESS, ALL AGENCIES ARE ALSO REQUIRED TO SIGN A USA PATRIOT ACT COMPLIANCE FORM THAT REQUIRES AGENCIES TO CERTIFY THAT UWMD FUNDS AND DONATIONS WILL BE USED IN COMPLIANCE WITH ALL APPLICABLE ANTI TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, AND EXECUTIVE ORDERS. UWMD ALSO VERIFIES CURRENT 501(C)(3) STATUS AND SCREENS THE AGENCY TO ENSURE IT IS NOT LISTED ON TERRORIST WATCH LISTS.

IN ADDITION TO THOSE AGENCIES LISTED, UWMD ALSO HAD DONOR DESIGNATED FUNDS TO AGENCIES IN THE AMOUNT OF \$684,817.

DURING FY2023, UWMD PROVIDED RENTAL, UTILITIES, BASIC NEEDS, AND CHILDCARE ASSISTANCE TO INDIVIDUALS WITH FEDERAL GRANT FUNDS. EACH APPLICANT FOR ASSISTANCE WAS REVIEWED BY UWMD STAFF TO VERIFY THAT THEY MET THE GRANT CRITEREA FOR ELIGIBILITY ASSISTANCE. THE COMMUNITY IMPACT STAFF REVIEWED FOR PROGRAM ELIBILITY AND FINANCE STAFF REVIEWED TO VERIFY THE AMOUNT OF ASSISTANCE WAS CORRECTLY CALCULATED AND ALL EXPENDITURES WERE WITHIN THE GRANT BUDGET.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input checked="" type="checkbox"/> Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a		X
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7	X	
8		X
9		

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JENNIFER SAMPSON PRESIDENT AND CEO	(i)	425,416.	193,349.	9,604.	96,600.	16,189.	741,158.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SUSAN E PEEK CHIEF IMPACT/STRATEGY OFFICER	(i)	318,282.	118,728.	3,168.	21,406.	12,519.	474,103.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JANICE W HARISSIS CHIEF FINANCIAL OFFICER	(i)	272,088.	48,204.	3,300.	17,853.	1,296.	342,741.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) JOHN C MITCHENER CHIEF GROWTH OFFICER (THRU 03/2023)	(i)	218,747.	60,500.	480.	7,043.	15,226.	301,996.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ASHLEY O BRUNDAGE EXEC. DIRECTOR, HOUSING STABILITY	(i)	178,500.	8,505.	180.	13,473.	16,171.	216,829.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) SUSAN D HUTCHESON VP, LEADERSHIP GIVING	(i)	137,448.	10,483.	270.	10,362.	23,296.	181,859.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ROBERT SHEARER CHIEF COMM. OFFICER	(i)	151,840.	0.	0.	0.	15,686.	167,526.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) CANDACE C BARNES SVP, HUMAN RESOURCES	(i)	127,299.	6,165.	414.	9,749.	23,103.	166,730.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) SHANNON NAIL VP, DEV. STRATEGY	(i)	153,699.	0.	0.	673.	11,258.	165,630.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) ANGELA FLOYD VP, IT & GIFT PROCESSING	(i)	131,620.	6,084.	270.	9,653.	14,854.	162,481.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ANN C MONTGOMERY VP, INNOVATION & DESIGN	(i)	130,427.	3,538.	162.	9,342.	12,567.	156,036.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:**HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES:**

UWMD REIMBURSES EMPLOYEES FOR HEALTH CLUB MEMBERSHIPS AT THE END OF EACH

CALENDAR YEAR FOR UP TO \$10 FOR EACH MONTH THEY ARE EMPLOYED WITH UWMD.

UWMD REPORTS THIS AS A NONTAXABLE FRINGE BENEFIT TO ITS EMPLOYEES.

PERSONAL SERVICES:

A \$5,000 ALLOWANCE WAS PROVIDED TO JENNIFER SAMPSON AS A LUMP SUM IN LIEU

OF A REIMBURSEMENT TO COVER THE COST OF OBTAINING A FINANCIAL ADVISOR. A

\$3,500 ALLOWANCE WAS PROVIDED TO JENNIFER SAMPSON AS A LUMP SUM IN LIEU OF

A REIMBURSEMENT TO COVER THE COST OF OBTAINING A HEALTH ASSESSMENT. THESE

WERE ANNUAL PAYMENTS AND INCLUDED IN JENNIFER'S TAXABLE EARNINGS.

PART I, LINE 4B:

PERSONS PARTICIPATING IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

JENNIFER SAMPSON PARTICIPATED IN THE ORGANIZATION'S 457F PLAN. FOR CALENDAR

YEAR 2022, MS. SAMPSON RECEIVED THE FOLLOWING:

EMPLOYER 457F DEFERRAL

\$70,000

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

THIS AMOUNT IS REPORTED ON SCHEDULE J, PART II, COL C.

PART I, LINE 7:

THE EXECUTIVE COMPENSATION COMMITTEE OF THE BOARD OF DIRECTORS HAS DISCRETION OVER THE CEO'S BONUS; THE CEO OF THE ORGANIZATION ALONG WITH CONSULTATION FROM THE HR TEAM HAS DISCRETION OVER THE SENIOR LEADERSHIP TEAM'S BONUSES; AND THE SENIOR LEADERSHIP TEAM ALONG WITH CONSULTATION FROM THE HR TEAM HAS DISCRETION OVER EMPLOYEE BONUSES. THE ORGANIZATION'S BONUS PROGRAM IS BASED ON METRICS SET IN AN ORGANIZATIONAL SCORECARD. THESE METRICS MAY INCLUDE BUT ARE NOT LIMITED TO SPECIFIC PERFORMANCE MEASURES AROUND ENGAGEMENT AND COMMUNITY IMPACT FROM OUR EDUCATION, INCOME, AND HEALTH INITIATIVES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization **UNITED WAY OF METROPOLITAN DALLAS, INC** Employer identification number **75-6005352**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	10	125,895.	FMV
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		X
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2022

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

SCHEDULE M, PART I, COLUMN (B):

METHOD USED

UWMD USES THE NUMBER OF CONTRIBUTIONS AS THE METHOD FOR DETERMINING THE AMOUNT IN COLUMN (B).

**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.

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

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

THAT UNITES THE COMMUNITY TO CREATE OPPORTUNITY AND ACCESS FOR ALL
NORTH TEXANS TO THRIVE, CHALLENGING THE SYSTEMIC BARRIERS ASSOCIATED
WITH RACE, INCOME INEQUALITY, AND EDUCATION SHORTCOMINGS. TOGETHER WITH
OUR COMMITTED CHANGE-SEEKERS, WE ARE MOBILIZING A MOVEMENT FOR LASTING
CHANGE TO ENSURE ALL OUR NEIGHBORS HAVE ACCESS TO EDUCATION, INCOME AND
HEALTH - THE BUILDING BLOCKS OF OPPORTUNITY.

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

UWMD HAS THE ASPIRATION THAT EVERY NORTH TEXAN, REGARDLESS OF RACE OR
ZIP CODE, SHOULD HAVE THE OPPORTUNITY AND ACCESS TO REACH THEIR FULL
POTENTIAL. IN EDUCATION WE SEEK TO GIVE KIDS A STRONG START, PROVIDE
QUALITY OUT-OF-SCHOOL TIME, AND STRONG PATHWAYS THROUGH HIGH SCHOOL TO
COLLEGE AND CAREER. IN INCOME WE INVEST IN PROGRAMS THAT HELP NORTH
TEXANS GET AND KEEP BETTER JOBS, ESTABLISH SAVINGS, AND HOLD ON TO MORE
OF WHAT THEY EARN. IN HEALTH WE CREATE, LEAD, AND INVEST IN PROGRAMS
THAT ENABLE RESIDENTS TO GET AND STAY HEALTHY.

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

RESOURCE ROOMS AT SOUTHERN DALLAS HIGH SCHOOLS PROVIDE A CENTRAL
LOCATION FOR MORE THAN 4,500 STUDENTS, PLUS PARENTS, TEACHERS AND OTHER
COMMUNITY MEMBERS, TO ACCESS TECHNOLOGY, BOOKS, HEALTH RESOURCES AND
MORE.

SOUTHERN DALLAS THRIVES INVESTS IN CHILDCARE CENTERS TO IMPROVE THE
QUALITY OF EARLY EDUCATION AND ENSURE KIDS THRIVE FROM A YOUNG AGE. IN

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

Schedule O (Form 990) 2022

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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FISCAL YEAR 2022-23, 14 CHILDCARE CENTERS PARTICIPATED IN THE PROGRAM AND PROVIDED 86,625 HOURS OF CHILDCARE SERVICE.

IN PARTNERSHIP WITH GOODR, WE DEPLOY CREATIVE SOLUTIONS TO SUPPORT FAMILIES DEALING WITH FOOD INSECURITY. IN FISCAL YEAR 2022-23, 7,356 SOUTHERN SECTOR HOUSEHOLDS RECEIVED FRESH AND HEALTHY FOOD OPTIONS, 200 FAMILIES AND SENIORS PARTICIPATED IN GROCERY DELIVERY AND WE DISPERSED MORE THAN 164,000 POUNDS OF FOOD TO SOUTHERN SECTOR FAMILIES AND COMMUNITY-BASED ORGANIZATIONS.

2. DIGITAL BRIDGES IS A TARGETED INITIATIVE THAT DISTRIBUTES DIGITAL TECHNOLOGY TO STUDENTS AND YOUNG ADULTS ACROSS SOUTHERN DALLAS TO ENABLE THEM TO ACCESS EDUCATION, FURTHER THEIR LEARNING AND STAY CONNECTED IN THE CLASSROOM AND BEYOND. THROUGH OUR PARTNERSHIP WITH COMPUDOPT, THE LAPTOPS COME WITH TWO YEARS OF WARRANTY AND BILINGUAL TECHNICAL ASSISTANCE. THIS PROGRAM SERVED 6,600 INDIVIDUALS IN FISCAL YEAR 2022-23 AND DISTRIBUTED 2,078 FREE LAPTOPS.

3. STRONG START INCLUDES EARLY CHILDHOOD DEVELOPMENT AND PARENT EDUCATION INITIATIVES LIKE HEALTHY OUTCOMES THROUGH PREVENTION & EARLY SUPPORT (HOPES) AND TEXAS HOME VISITING PROGRAM TO PROVIDE FAMILIES WITH HANDS-ON INSTRUCTION, COMMUNITY RESOURCES AND SKILLS THAT EMPOWER PARENTS, ENCOURAGE HEALTHY CHILD DEVELOPMENT AND PREVENT CHILD ABUSE. IN FISCAL YEAR 2022-23, 885 FAMILIES PARTICIPATED IN A HOME VISITING PROGRAM, 1,750 INDIVIDUALS ATTENDED EARLY CHILDHOOD DEVELOPMENT COMMUNITY EVENTS AND 1,211 FAMILIES RECEIVED SUPPLEMENTAL SERVICES.

ONCE UPON A MONTH IS AN EARLY LITERACY PROGRAM THAT DELIVERS FREE

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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AGE-APPROPRIATE CHILDREN S BOOKS AND PARENTAL READING GUIDES TO FAMILIES EVERY MONTH, STIMULATING CURIOSITY, LANGUAGE DEVELOPMENT AND LEARNING SKILLS ALL OF WHICH SET KIDS UP FOR SUCCESS IN KINDERGARTEN. IN FISCAL YEAR 2022-23 WE DISTRIBUTED 129,696 FREE BOOKS TO 11,276 NORTH TEXAS CHILDREN.

4. PATHWAYS TO ECONOMIC MOBILITY HELPS FAMILIES INCREASE SAVINGS, IMPROVE CREDIT SCORES, REDUCE DEBT, AND AVOID PREDATORY LENDING PRODUCTS. IN FISCAL YEAR 2022-2023, OVER 63,000 PEOPLE ACCESSED FINANCIAL CAPABILITY SERVICES THROUGH UNITED WAY, INCLUDING 5,200 SERVED THROUGH FINANCIAL EDUCATION AND 4,100 THAT PARTICIPATED IN ONE-ON-ONE FINANCIAL COACHING. OUR FREE TAX PREPARATION PROGRAM HELPED ALMOST 9,500 PEOPLE OBTAIN \$13.2 MILLION IN REFUNDS.

UNITED WAY INCREASED ACCESS TO CREDIT-BUILDING LOANS AND COLLEGE SAVINGS ACCOUNTS, ADDING 230 CAPITAL GOOD FUND LOANS AND 166 NEW DOLLARS FOR COLLEGE ACCOUNTS. OUR FINANCIAL INCLUSION ROUNDTABLE PROVIDED CAPABILITY BUILDING AND NETWORKING OPPORTUNITIES FOR MORE THAN 40 COMMUNITY ORGANIZATIONS AND FINANCIAL INSTITUTIONS IN THE REGION.

5. PATHWAYS TO WORK IS A WORKFORCE DEVELOPMENT PROGRAM, FACILITATED IN PARTNERSHIP WITH 36 COMMUNITY ORGANIZATIONS, THAT GIVES HARDWORKING NORTH TEXANS THE TRAINING NECESSARY TO SECURE JOBS IN IT, HEALTHCARE AND MORE. IN FISCAL YEAR 2022-23, THE PROGRAM SERVED 20,208 INDIVIDUALS, RESULTING IN 1,870 CERTIFICATES OR DEGREES EARNED BY PARTICIPANTS AND 2,904 JOB PLACEMENTS SECURED FOR GRADUATES.

6. THROUGH OUR HOUSING STABILITY INITIATIVES, WE CREATE PROGRAMS AND

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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FORM STRATEGIC PARTNERSHIPS TO PREVENT HOMELESSNESS IN NORTH TEXAS. IN FISCAL YEAR 2022-23, WE ADVOCATED FOR AFFORDABLE HOUSING AND CONTINUED OUR LEADERSHIP OF THE DALLAS RENTAL ASSISTANCE COLLABORATIVE (DRAC), FUNDED WITH THE TREASURY DEPARTMENT'S EMERGENCY RENTAL ASSISTANCE PROGRAM (ERAP), WHICH PROVIDES RENTAL AND UTILITY ASSISTANCE TO KEEP FAMILIES IN THEIR HOMES DURING CHALLENGING ECONOMIC TIMES. WE PROVIDED \$3.8 MILLION IN RENT AND UTILITIES ASSISTANCE TO FAMILIES AND 594 HOUSEHOLDS RECEIVED SUPPORT THROUGH DRAC.

7. HEALTHCARE NAVIGATORS IS A COLLABORATIVE PROGRAM THAT PROVIDES A NETWORK OF CERTIFIED HEALTHCARE NAVIGATORS FOR THE NORTH TEXAS COMMUNITY, DELIVERING SUPPORT FOR INDIVIDUALS AND FAMILIES LOOKING TO SIGN UP FOR HEALTH INSURANCE THROUGH THE MARKETPLACE, MEDICAID OR CHIP. NAVIGATORS WORK DIRECTLY WITH CLIENTS TO HELP THEM COMPARE HEALTH PLANS, UNDERSTAND BENEFITS AND APPLY FOR SUBSIDIES TO LOWER THEIR MONTHLY PREMIUMS. IN FISCAL YEAR 2022-23, HEALTHCARE NAVIGATORS FIELDDED 52,133 CLIENT INQUIRIES, 6,703 INDIVIDUALS RECEIVED ASSISTANCE AS THEY SIGNED UP FOR CHIP/MEDICAID AND 1,250 NORTH TEXANS RECEIVED SUPPORT TO ENROLL IN A QUALIFIED HEALTH PLAN.

8. NORTH TEXAS SUMMER & SUPPER COUNCIL IS A PARTNERSHIP WITH NORTH TEXAS HUNGER INITIATIVE WHICH WORKS TO IMPROVE AND AMPLIFY SUMMER MEALS PROGRAMMING TO PROVIDE REGULAR, NUTRITIOUS MEALS TO CHILDREN WHO QUALIFY FOR FEDERALLY FUNDED NUTRITION PROGRAMS. IN SUMMER 2022, 143,000 CHILDREN RECEIVED REGULAR, NUTRITIOUS MEALS AND 55.6+ MILLION MEALS WERE SERVED IN DALLAS AND COLLIN COUNTIES.

9. THE UNITED WAY SOCIAL INNOVATION LAB IS A CONTINUUM OF CAPACITY

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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BUILDING PROGRAMS FOR SOCIAL ENTREPRENEURS IN EDUCATION, INCOME AND HEALTH. THE LAB CURRENTLY INCLUDES THE INCUBATOR (EARLY-STAGE), ACCELERATOR (MID-STAGE) AND ALUMNI PROGRAMS (SERVING GRADUATES OF THE INCUBATOR AND ACCELERATOR).

THE SOCIAL INNOVATION INCUBATOR IS AN ORGANIZATIONAL AND LEADERSHIP DEVELOPMENT PROGRAM DESIGNED FOR EARLY-STAGE ENTREPRENEURS WHO HAVE EXPERIENCED SYSTEMIC RACIAL AND GENDER INEQUITIES. THROUGH OUR 14-WEEK PROGRAM, WE BUILD UP INNOVATIVE STARTUPS BY PROVIDING MENTORSHIP AND GUIDANCE THAT EMPOWERS THEM TO CREATE A VALIDATED BUSINESS PLAN AND BEGIN BUILDING THEIR VENTURES. IN FISCAL YEAR 2022-23, 19 WOMEN ENTREPRENEURS COMPLETED THE PROGRAM, AND WE PROVIDED 600 HOURS OF MENTORING AND COACHING TO PARTICIPANTS.

THE ACCELERATOR IS A RIGOROUS, NINE-MONTH-LONG PROGRAM DESIGNED TO TEST THE ASSUMPTIONS OF OUR FELLOWS, SHAPE THEIR GOALS AND EMPOWER THEM TO COMPLETE KEY MILESTONES. THE PROGRAM PROVIDES SOCIAL ENTREPRENEURS WITH CRITICAL RESOURCES INCLUDING FUNDING, PROFESSIONAL MENTORSHIP AND POWERFUL COMMUNITY CONNECTIONS TO SCALE THEIR VENTURES AND GROW THEIR IMPACT. THE PROGRAM CULMINATES AT THE PITCH, WHERE FINALISTS COMPETE LIVE ON STAGE FOR ADDITIONAL SEED FUNDING. IN FISCAL YEAR 2022-23, PROGRAM ALUMNI (60+ ORGANIZATIONS) SERVED 128,787 CLIENTS. 10 FELLOWS PARTICIPATED IN THE PROGRAM AND RECEIVED 1,500 HOURS OF MENTORING AND COACHING AND \$525,000 IN SEED FUNDING.

THE ALUMNI PROGRAM PROVIDES PROFESSIONAL DEVELOPMENT, NETWORKING AND CROSS-COLLABORATION OPPORTUNITIES TO INCUBATOR AND ACCELERATOR ALUMNI SO THEY CAN CONTINUE TO BUILD CAPACITY, SCALE THEIR ORGANIZATIONS AND

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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EXPAND THEIR IMPACT IN EDUCATION, INCOME AND HEALTH.

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

IN FISCAL YEAR 2022-23, UWMD CREATED POSITIVE IMPACT FOR MORE THAN 1.6 MILLION NORTH TEXANS AND INVESTED IN 144 EXCEPTIONAL EDUCATION, INCOME, AND HEALTH ORGANIZATIONS THROUGH OUR COMMUNITY IMPACT GRANTS.

EDUCATION

655,000 STUDENTS LAID THE GROUNDWORK FOR CONTINUED EDUCATIONAL SUCCESS.

INCOME

420,000 NORTH TEXANS RECEIVED ASSISTANCE TO GET AND KEEP BETTER JOBS AND BUILD SAVINGS FOR THE FUTURE.

HEALTH

498,000 NEIGHBORS GAINED ACCESS TO THE HEALTH AND WELLNESS RESOURCES THEY NEED TO LIVE LONGER, HEALTHIER LIVES.

FORM 990, PART VI, SECTION A, LINE 1A:

EXECUTIVE COMMITTEE

THE EXECUTIVE COMMITTEE IS CHAIRED BY THE BOARD CHAIR AND COMPRISED OF THE BOARD OFFICERS AND THE PRESIDENT AND CEO. THE BOARD CHAIR MAY ELECT TO INCLUDE ADDITIONAL MEMBERS. THE EXECUTIVE COMMITTEE MEETS REGULARLY WITH THE PRESIDENT AND CEO AND MONITORS AND OVERSEES GOVERNANCE AND ORGANIZATIONAL ISSUES ON BEHALF OF THE BOARD.

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

FORM 990 REVIEW PROCESS

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

AN INDEPENDENT CPA FIRM SPECIALIZING IN TAX PREPARATION SERVICES PREPARED THE FORM 990 USING INFORMATION FROM AUDITED FINANCIAL STATEMENTS AND INFORMATION PROVIDED BY UWMD STAFF. UWMD STAFF REVIEWED THE COMPLETED FORM 990. THE RETURN IS DELIVERED TO MEMBERS OF THE AUDIT AND ETHICS COMMITTEE AND BOARD FOR REVIEW AND COMMENTS. A FINAL COPY OF THE FORM 990 IS PROVIDED TO THE ENTIRE BOARD PRIOR TO FILING WITH THE IRS.

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

CONFLICT OF INTEREST POLICY MONITORING AND ENFORCEMENT

THE CODE OF BUSINESS CONDUCT, ETHICS AND CONFLICT OF INTEREST IS DISTRIBUTED TO DIRECTORS, OFFICERS, STANDING COMMITTEE MEMBERS, AND EMPLOYEES ON AN ANNUAL BASIS. DIRECTORS, OFFICERS, STANDING COMMITTEE MEMBERS, AND EMPLOYEES ARE REQUIRED TO SIGN AN AFFIRMATIVE ACTION STATEMENT OF COMPLIANCE AND TO DISCLOSE TO UWMD ANY FINANCIAL OR OTHER RELATIONSHIPS THAT COULD POTENTIALLY GIVE RISE TO A CONFLICT OF INTEREST ALONG WITH THE REASONS, IF ANY, THEY BELIEVE SUCH RELATIONSHIPS WOULD NOT VIOLATE THE CONFLICT OF INTEREST DEFINITIONS PER THE IRS INSTRUCTIONS TO THE FORM 990. BOARD MEMBERS ARE REQUIRED TO RECUSE THEMSELVES FROM DISCUSSIONS AND DECISIONS IMPACTING POTENTIAL CONFLICTS OF INTEREST. COMPLETED CODE OF BUSINESS CONDUCT, ETHICS AND CONFLICT OF INTEREST FORMS ARE REVIEWED BY THE LEADERSHIP TEAM TO DETERMINE IF FURTHER ACTIONS ARE REQUIRED.

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

PROCESS FOR DETERMINING COMPENSATION

THE COMPENSATION COMMITTEE IS THE EXECUTIVE COMMITTEE OF THE BOARD. THE COMMITTEE HAS THE RESPONSIBILITY OF DETERMINING AND RECOMMENDING TO THE BOARD FOR APPROVAL THE SENIOR LEADERSHIP TEAM COMPENSATION AND BENEFITS. UWMD'S VICE PRESIDENT OF HUMAN RESOURCES PROVIDES FACTUAL, SUPPORTIVE, AND

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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COMPARATIVE INFORMATION, AS REQUESTED. THE COMMITTEE REVIEWS AND APPROVES UWMD'S GOALS AND OBJECTIVES RELEVANT TO CEO COMPENSATION AND EVALUATES THE PERFORMANCE OF THE CEO ANNUALLY AGAINST THOSE GOALS AND OBJECTIVES. THE COMMITTEE RECOMMENDS TO THE BOARD, FOR APPROVAL, THE CEO'S COMPENSATION PACKAGE BASED ON THIS EVALUATION. THE DELIBERATIONS AND DECISIONS OF THE COMMITTEE ARE DOCUMENTED IN CONTEMPORANEOUS SUBSTANTIATION. THE COMMITTEE WILL REVIEW ANNUALLY ALL INCENTIVE COMPENSATION PLANS AND/OR SPECIAL COMPENSATION ARRANGEMENTS FOR MEMBERS OF UWMD'S LEADERSHIP TEAM AND OTHER STAFF MEMBERS AS APPROPRIATE, INCLUDING BONUS AND INCENTIVE AWARDS, SEVERANCE PACKAGES, EMPLOYMENT AGREEMENTS, AND/OR OTHER SPECIAL SUPPLEMENTAL BENEFITS.

FORM 990, PART VI, SECTION C, LINE 18 & 19:

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

UWMD'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC UPON REQUEST. REQUESTS MAY BE SENT TO UWMD ACCOUNTING AND FINANCE, 1800 N. LAMAR STREET, DALLAS, TX 75202. REQUESTS CAN ALSO BE MADE BY CALLING THE ACCOUNTING AND FINANCE DEPARTMENT AT (214) 978-0000. AUDITED FINANCIAL STATEMENTS AND FILED 990 FORMS ARE AVAILABLE BY ACCESSING UWMD'S WEBSITE AT WWW.UNITEDWAYDALLAS.ORG. AFTER REACHING THE WEBSITE, GO TO "ABOUT US" ON THE MAIN PAGE AND THEN "FINANCIALS" TO OBTAIN THE NECESSARY INFORMATION.

FORM 990, PARTS VIII & IX

DONOR DESIGNATED FUNDS

THE AMOUNTS REPORTED IN THESE SECTIONS INCLUDE \$3,938,230 OF DONOR DESIGNATED REVENUE AND \$2,905,821 OF DONOR DESIGNATED GRANTS.

Name of the organization UNITED WAY OF METROPOLITAN DALLAS, INC	Employer identification number 75-6005352
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FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

NET OF DESIGNATIONS TO AGENCIES	-1,032,409.
CHANGE OF INTEREST HELD IN TRUSTS	1,658,409.
TOTAL TO FORM 990, PART XI, LINE 9	626,000.

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Name of the organization **UNITED WAY OF METROPOLITAN DALLAS, INC** Employer identification number **75-6005352**

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
UNITED WAY FDN OF METROPOLITAN DALLAS - 75-2834344, 1800 N LAMAR STREET, DALLAS, TX 75202	ENDOWMENT	TEXAS	501(C)(3)	LINE 12A, I	UWMD	<input checked="" type="checkbox"/>	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)	X	
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	C	2,868,635.	FMV
(2) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	O	718,742.	FMV
(3) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	L	100,347.	FMV
(4) UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	N	22,634.	FMV
(5)			
(6)			

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

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

Table with 11 main columns: (a) Name, address, and EIN of entity; (b) Primary activity; (c) Legal domicile; (d) Predominant income; (e) Are all partners sec. 501(c)(3) orgs.?; (f) Share of total income; (g) Share of end-of-year assets; (h) Disproportionate allocations?; (i) Code V-UBI amount; (j) General or managing partner?; (k) Percentage ownership.

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. UNITED WAY OF METROPOLITAN DALLAS, INC	Taxpayer identification number (TIN) 75-6005352
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1800 N. LAMAR STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. DALLAS, TX 75202	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 | 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

REBECCA BILLINGS

- The books are in the care of ▶ **1800 N LAMAR STREET - DALLAS, TX 75202**

Telephone No. ▶ **214-978-0000** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15, 2024**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **JUL 1, 2022**, and ending **JUN 30, 2023**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.