

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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.

OMB No. 1545-0047
2020
Open to Public Inspection

A For the 2020 calendar year, or tax year beginning 07-01-2020, and ending 06-30-2021

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1110 AMERICAN PARKWAY NE NO F-120

City or town, state or province, country, and ZIP or foreign postal code
ALLENTOWN, PA 18109

D Employer identification number
23-2657933

E Telephone number
(610) 807-5755

G Gross receipts \$ 20,846,633

F Name and address of principal officer:
DEBRA KLOCEK
1110 AMERICAN PARKWAY NE NO F-120
ALLENTOWN, PA 18109

H(a) Is this a group return for subordinates? Yes No

H(b) Are all subordinates included? Yes No
If "No," attach a list. (see instructions)

H(c) Group exemption number ▶ 3751

I Tax-exempt status: 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.UNITEDWAYGLV.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1992

M State of legal domicile: PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
TO FIGHT FOR HEALTH, SAFETY AND EDUCATION OF EVERY PERSON IN THE GREATER LEHIGH VALLEY

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	27
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	25
5 Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	49
6 Total number of volunteers (estimate if necessary)	6	1,093
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	21,173,942	20,671,992
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	250,010	174,641
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	0	0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,423,952	20,846,633

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	15,586,784	14,437,205
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)	3,648,172	3,822,473
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,759,440		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	1,875,614	1,673,922
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	21,110,570	19,933,600
19 Revenue less expenses. Subtract line 18 from line 12	313,382	913,033

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	14,138,990	16,496,210
21 Total liabilities (Part X, line 26)	2,867,298	3,079,118
22 Net assets or fund balances. Subtract line 21 from line 20	11,271,692	13,417,092

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: 2022-02-11
DEBRA KLOCEK VICE PRESIDENT, FINANCE & ADMIN
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name: Preparer's signature: Date: 2022-02-11
Check if self-employed PTIN: P00042618
Firm's name: ▶ HERBEIN COMPANY INC Firm's EIN: ▶ 23-2415973
Firm's address: ▶ 2763 CENTURY BOULEVARD READING, PA 19610 Phone no. (610) 378-1175

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

WE FIGHT FOR THE HEALTH, SAFETY AND EDUCATION OF EVERY PERSON IN THE GREATER LEHIGH VALLEY. WE ENVISION A COMMUNITY WHERE EVERY PERSON BELONGS AND EVERY PERSON THRIVES.

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 No

If "Yes," describe these new services on Schedule O.

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 16,952,764 including grants of \$ 14,437,205) (Revenue \$)
See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

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

4e Total program service expenses ▶ 16,952,764

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, covering various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question/Description, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and related parties.

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 main columns: Question/Description, 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)

Main form area containing questions 2a through 16, including sub-questions like 2b, 3a, 4a, 5a, 6a, 7a-c, 7e-f, 7g-h, 8, 9a-b, 10a-b, 11a-b, 12a-b, 13a-c, 14a-b, 15, and 16. Each question is followed by a grid for 'Yes/No' or numerical answers.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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

Table with 3 columns: Question, Yes, No. Rows include: 1a (27), 1b (25), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include: 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed PA
18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
19 Describe in 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: THE ORGANIZATION 1110 AMERICAN PARKWAY NE NO F-120 ALLENTOWN, PA 18109 (610) 807-5755

Part VIII Statement of Revenue

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

Table with columns (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512 - 514. Rows include Contributions, Gifts, Grants and Other Similar Amounts (1a-1g), Program Service Revenue (2a-2f), Other Revenue (3-11d), and Total Revenue (12).

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	14,377,705	14,377,705		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	30,750	30,750		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.	28,750	28,750		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	404,168	159,331	73,775	171,062
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	2,623,570	1,199,164	600,213	824,193
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	155,837	64,464	43,937	47,436
9 Other employee benefits	421,521	172,549	115,270	133,702
10 Payroll taxes	217,377	89,255	58,755	69,367
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	33,300		33,300	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	16,393	16,393		
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	339,021	191,179	50,085	97,757
12 Advertising and promotion				
13 Office expenses	41,530	17,692	9,353	14,485
14 Information technology				
15 Royalties				
16 Occupancy	291,709	128,585	68,231	94,893
17 Travel	3,748	1,566	780	1,402
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	22,300	9,318	4,643	8,339
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	84,381	37,195	19,737	27,449
23 Insurance	17,362	3,823	10,975	2,564
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DUES AND FAIR SHARE SUP	331,792	194,632	19,611	117,549
b EQUIPMENT COSTS	228,712	100,816	53,496	74,400
c DIRECT PROGRAM COSTS	226,189	121,343	35,541	69,305
d BANK CHARGES	31,886	7,021	20,155	4,710
e All other expenses	5,599	1,233	3,539	827
25 Total functional expenses. Add lines 1 through 24e	19,933,600	16,952,764	1,221,396	1,759,440
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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	3,161,323	2	3,581,341
	3 Pledges and grants receivable, net	3,840,143	3	3,835,951
	4 Accounts receivable, net	48,642	4	52,007
	5 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		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	281,981	9	141,627
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	705,796		
	b Less: accumulated depreciation	419,784		
		357,627	10c	286,012
	11 Investments—publicly traded securities	4,022,521	11	5,663,422
	12 Investments—other securities. See Part IV, line 11	2,341,017	12	2,846,770
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11	85,736	15	89,080	
16 Total assets. Add lines 1 through 15 (must equal line 33)	14,138,990	16	16,496,210	
Liabilities	17 Accounts payable and accrued expenses	321,534	17	622,715
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	13	21	13
	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	594,392	24	0
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	1,951,359	25	2,456,390
	26 Total liabilities. Add lines 17 through 25	2,867,298	26	3,079,118
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	-1,969,584	27	-1,482,885
	28 Net assets with donor restrictions	13,241,276	28	14,899,977
	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	11,271,692	32	13,417,092	
33 Total liabilities and net assets/fund balances	14,138,990	33	16,496,210	

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	20,846,633
2	Total expenses (must equal Part IX, column (A), line 25)	2	19,933,600
3	Revenue less expenses. Subtract line 2 from line 1	3	913,033
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	11,271,692
5	Net unrealized gains (losses) on investments	5	760,662
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 in Schedule O)	9	471,705
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	13,417,092

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133?
- 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 in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a	Yes	
3b	Yes	

Software ID:**Software Version:****EIN:** 23-2657933**Name:** UNITED WAY OF THE GREATER LEHIGH VALLEY

Form 990 (2020)

Form 990, Part III, Line 4a:

COMMUNITY IMPACT INVESTMENTS: IN SUPPORT OF OUR 2022 COMMUNITY GOAL OF INCREASING BY 50% THE NUMBER OF THIRD GRADERS IN THE GREATER LEHIGH VALLEY READING ON GRADE LEVEL, OUR EDUCATION INVESTMENTS TOTALED \$4,604,604; PROVIDING 18,959 CHILDREN AND FAMILIES WITH EARLY LITERACY SKILLS SUPPORT, HIGH-QUALITY EARLY LEARNING, PARENT AND CHILD DEVELOPMENT EDUCATION, SUMMER KINDERGARTEN READINESS, AND SKILL-BUILDING COURSES FOR EARLY CHILDHOOD TEACHERS AS WELL AS PROVIDING ELEMENTARY AND MIDDLE SCHOOL STUDENTS WITH TARGETED ACADEMIC INTERVENTIONS, SUMMER LEARNING, MENTORING, POSITIVE YOUTH DEVELOPMENT, BEHAVIORAL HEALTH SERVICES, AND FAMILY CASE MANAGEMENT. SEE ADDITIONAL INFO ON SCHEDULE O. IN SUPPORT OF OUR 2022 COMMUNITY GOAL OF INCREASING BY 50% THE NUMBER OF DEPENDENT SENIORS IN THE GREATER LEHIGH VALLEY WHO ARE SUPPORTED, OUR HEALTHY AGING INVESTMENTS TOTALED \$520,722; PROVIDING 2,792 OLDER ADULTS WITH GROCERY-SHOPPING SERVICES, FALL-PREVENTION PROGRAMS, TRANSPORTATION SERVICES, CHRONIC DISEASE PROGRAMS, AND IN-HOME SUPPORT SERVICES. IN SUPPORT OF OUR 2022 COMMUNITY GOAL OF DECREASING BY 50% FOOD INSECURITY IN THE GREATER LEHIGH VALLEY, OUR FOOD ACCESS INVESTMENTS TOTALED \$362,500, PROVIDING 30,496 PEOPLE WITH FOOD FROM PANTRIES, HOME-DELIVERED MEALS, AND NUTRITION EDUCATION COURSES. FOR CONTINUED SUPPORT, OUR EMERGENCY SERVICES INVESTMENTS TOTALED \$816,264, PROVIDING 13,147 LEHIGH VALLEY RESIDENTS WITH EMERGENCY SHELTER, VIOLENCE AND CRISIS SHELTER, COVID-19 DISASTER RELIEF, EMERGENCY FOOD, VIOLENCE AND CRISIS SUPPORTS, HOUSING-BASED LEGAL SERVICES, RESOURCE AND ASSISTANCE INFORMATION REFERRALS, AND DAY OF CARING VOLUNTEER SERVICES. SERVING CARBON COUNTY, UNITED WAY OF THE GREATER LEHIGH VALLEY INVESTED \$117,079 INTO 16 PROGRAMS IN THE REGION, SERVING 3,675 PEOPLE IN THE REGION. THESE PROGRAMS RANGED IN SERVICES FROM INTERVENING IN HOUSING/UTILITY CRISES TO AVOID EVICTION, HOUSING FOR THE HOMELESS, AFTER-SCHOOL PROGRAMS, FOOD PANTRIES, AND COVID-19 DISASTER RELIEF. AGENCY DESIGNATIONS ACHIEVEMENTS: UNITED WAY OF THE GREATER LEHIGH VALLEY HONORS DONOR REQUESTS TO DESIGNATE THEIR CONTRIBUTIONS TO ANY 501(C)(3) AGENCY WITH HEALTH AND HUMAN SERVICE PROGRAMS. UNITED WAYS AROUND THE COUNTRY PERFORM THIS SERVICE FOR AGENCIES AS A COURTESY TO DONORS. LEHIGH VALLEY COMMUNITY SCHOOLS: UNITED WAY OF GREATER LEHIGH VALLEY INVESTS IN COMMUNITY SCHOOLS THAT TRANSFORM HIGH-POVERTY PUBLIC SCHOOLS INTO RESOURCE HUBS THAT OFFER A RANGE OF SUPPORTS TO CHILDREN AND FAMILIES. THIS APPROACH ENSURES ACCESS TO SAFE AND STABLE LEARNING ENVIRONMENTS WHERE EVERY CHILD CAN BELONG AND EVERY CHILD CAN THRIVE. THERE ARE CURRENTLY 31 LEHIGH VALLEY COMMUNITY SCHOOLS SERVING 18,888 KIDS IN FOUR LEHIGH VALLEY SCHOOL DISTRICTS: ALLENTOWN SCHOOL DISTRICT, BANGOR AREA SCHOOL DISTRICT, BETHLEHEM AREA SCHOOL DISTRICT AND EASTON AREA SCHOOL DISTRICT. UNITED WAY SERVES AS THE CONVENER AND THOUGHT LEADER IN MOBILIZING SCHOOL DISTRICT LEADERSHIP, PRINCIPALS AND STAFF WHO LEAD THE VISION AT EACH SITE, AND TEAM OF PARENTS, EDUCATORS, COMMUNITY AND BUSINESS PARTNERS. THEY INVEST IN STAFFING AND SUPPORTS THAT IMPROVE ACADEMIC PERFORMANCE IN READING AND MATH, INCREASE STUDENT ATTENDANCE AND ENGAGE MORE FAMILIES IN THEIR CHILDREN'S LEARNING. LEHIGH VALLEY READS: LEHIGH VALLEY READS IS A REGIONAL LITERACY CAMPAIGN COMMITTED TO ENSURING THAT ALL LEHIGH VALLEY STUDENTS READ ON GRADE LEVEL BY THE END OF THIRD GRADE BY 2025. THIS COLLECTIVE IMPACT INITIATIVE IS POWERED BY UNITED WAY OF THE GREATER LEHIGH VALLEY AND LEHIGH VALLEY PUBLIC MEDIA, HOME OF PBS39. WITH OVER 100 COMMUNITY PARTNERS WORKING TOGETHER WITH 17 LEHIGH VALLEY SCHOOL DISTRICTS TO MAXIMIZE RESOURCES, LEHIGH VALLEY READS IS A COLLECTIVE IMPACT INITIATIVE WITH KEY FOCUS AREAS: EARLY CHILDHOOD EDUCATION, SUMMER LEARNING, SCHOOL ATTENDANCE, TRAUMA-INFORMED CLASSROOMS, COMMUNITY SCHOOLS AND INSTRUCTION BASED ON THE SCIENCE OF READING. RESILIENT LEHIGH VALLEY: RESILIENT LV IS DEDICATED TO BUILDING SAFE, STABLE AND NURTURING COMMUNITIES THROUGH TRAUMA-INFORMED SYSTEMS. THIS CROSS-SECTOR COALITION RAISES COMMUNITY AWARENESS ABOUT THE IMPACTS OF TRAUMA, PROVIDES TRAINING IN TRAUMA-INFORMED PRACTICES AND RESILIENCE-BUILDING STRATEGIES AND ADVOCATES FOR TRAUMA-INFORMED LEGISLATION. COALITION EFFORTS AIM TO HELP MAKE THE LEHIGH VALLEY A PLACE WHERE EDUCATORS, LAW ENFORCEMENT, AND HEALTH PROVIDERS ARE TRAUMA-INFORMED, SO THAT OUR RESIDENTS CAN BE MORE SUCCESSFUL, SAFER AND HEALTHIER. UNITED WAY OF THE GREATER LEHIGH VALLEY PROVIDES BACKBONE LEADERSHIP FOR THIS COLLECTIVE IMPACT INITIATIVE, WHICH HAS TRAINED MORE THAN 10,000 INDIVIDUALS IN TRAUMA-INFORMED PRACTICES. OTHER PROGRAM SERVICES: UNITED WAY OF THE GREATER LEHIGH VALLEY (UWGLV), IN PARTNERSHIP WITH LOCAL LEADERS, CREATED THE FUND FOR RACIAL JUSTICE AND EQUITY. INVESTORS CAN GIVE DIRECTLY TO THE FUND TO NURTURE AND ADVANCE EXECUTIVE BIPOC (BLACK, INDIGENOUS AND PEOPLE OF COLOR) LEADERSHIP AND BUILD THE CAPACITY OF BIPOC-LED NONPROFIT ORGANIZATIONS IN THE LEHIGH VALLEY. LEHIGH VALLEY FOOD POLICY COUNCIL SHAPES THE LANDSCAPE FOR REGIONAL FOOD ACCESS, POLICY, AND COLLABORATION BY INCREASING FOOD SECURITY AND SUPPORTING A THRIVING LOCAL FOOD ECONOMY. RECOGNIZED BY THE WORLD HEALTH ORGANIZATION AND AARP NETWORK OF AGE-FRIENDLY COMMUNITIES, AGE-FRIENDLY LEHIGH VALLEY IS A COLLECTIVE IMPACT COALITION DEDICATED TO BUILDING A COMMUNITY WHERE EVERYONE WILL HAVE THE OPPORTUNITY TO AGE SUCCESSFULLY. LED BY UNITED WAY OF THE GREATER LEHIGH VALLEY AGE-FRIENDLY LV FOCUSES ON KEY AREAS INCLUDING HEALTH SERVICES, SOCIAL PARTICIPATION AND SOCIAL INCLUSION. TEENWORKS IS A UNIQUE COLLABORATION OF LOCAL TEENS, LABOR UNIONS AND MEMBERS AND UNITED WAY OF THE GREATER LEHIGH VALLEY. GUIDED BY A VOLUNTEER BOARD OF TEENS AND LABOR LEADERS, TEENWORKS HAS PROVIDED MORE THAN \$500,000 IN GRANTS TO SUPPORT 500+ COMMUNITY SERVICE PROJECTS LED BY TEENS.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
JOANNE RAPHAEL BOARD CHAIR	0.50	X		X				0	0	0
DR JOSEPH ROY PREVIOUS BOARD CHAIR	0.50	X		X				0	0	0
DOROTA GASIENICA-KOZAK BOARD VICE CHAIR	0.50	X		X				0	0	0
MIKE BUTZ BOARD MEMBER	0.50	X						0	0	0
THOMAS DAUB BOARD MEMBER	0.50	X						0	0	0
RAFAEL DE LA HOZ BOARD MEMBER	0.50	X						0	0	0
MARILEE FALCO BOARD MEMBER	0.50	X						0	0	0
VERONICA GONZALEZ BOARD MEMBER	0.50	X						0	0	0
WILLIAM KENT BOARD MEMBER	0.50	X						0	0	0
DR MARC GRANSON BOARD MEMBER	0.50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
MATT GREEN BOARD MEMBER	0.50	X						0	0	0
LAURIE HACKETT BOARD MEMBER	0.50	X						0	0	0
TRISHA R HIGGINS CPA BOARD MEMBER	0.50	X						0	0	0
DR CARLOS HODGES BOARD MEMBER	0.50	X						0	0	0
JAMES IRWIN BOARD MEMBER	0.50	X						0	0	0
DIANA LAQUINTA BOARD MEMBER	0.50	X						0	0	0
DR DONALD OUTING BOARD MEMBER	0.50	X						0	0	0
THOMAS PARKER BOARD MEMBER	0.50	X						0	0	0
MATTHEW PYE BOARD MEMBER	0.50	X						0	0	0
DR TINA Q RICHARDSON BOARD MEMBER	0.50	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
PETER RUGGIERO BOARD MEMBER	0.50	X						0	0	0
ASHLEY RUSSO BOARD MEMBER	0.50	X						0	0	0
SALEEM SAAB BOARD MEMBER	0.50	X						0	0	0
DR BILL SCHANINGER BOARD MEMBER	0.50	X						0	0	0
JOSEPH TOPPER BOARD MEMBER	0.50	X						0	0	0
DAVID LEWIS PRESIDENT	40.00	X		X				208,119	0	15,893
MARCI LESKO EXECUTIVE VICE PRESIDENT/SECRETARY	40.00	X		X				153,910	0	26,246
DEBRA KLOCEK VP, FINANCE & ADMINISTRATION	40.00					X		126,582	0	22,521
PAUL HURD VP, RESOURCE DEVELOPMENT	40.00					X		149,614	0	25,962
JILL PEREIRA VP, EDUCATION & IMPACT	40.00					X		114,546	0	25,983

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
LAUREN SHANAHAN AVP, STRATEGIC INITIATIVES	40.00					X		100,944	0	9,134
HENRY TANGREDI AVP, STRATEGIC TECHNOLOGY	40.00					X		100,783	0	17,086

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number
23-2657933

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 or 990-EZ).)
- 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 **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 in 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 failed to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	12,325,592	18,452,736	17,674,052	21,173,942	20,671,992	90,298,314
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	12,325,592	18,452,736	17,674,052	21,173,942	20,671,992	90,298,314
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) . . .						15,106,658
6 Public support. Subtract line 5 from line 4.						75,191,656

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4. . .	12,325,592	18,452,736	17,674,052	21,173,942	20,671,992	90,298,314
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources . . .	226,483	341,348	200,483	250,010	174,641	1,192,965
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.) . . .	209,618					209,618
11 Total support. Add lines 7 through 10						91,700,897
12 Gross receipts from related activities, etc. (see instructions)						12
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ▶ <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f) divided by line 11, column (f))	14	82.000 %
15 Public support percentage for 2019 Schedule A, Part II, line 14	15	83.900 %
16a 33 1/3% support test—2020. 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—2019. 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—2020. 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—2019. 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"/>		

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf. . .						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(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 in 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 2020 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2019 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2020 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2019 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2020. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2019. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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, of Part I, complete Sections A and B. If you checked box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of 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 (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 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</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 in 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 in 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 in lines 11b and 11c below, the governing body of a supported organization?		
b	A family member of a person described in 11a above?		
c	A 35% controlled entity of a person described in line 11a or 11b above? <i>If "Yes" to 11a, 11b, or 11c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the officers, directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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 in line 2 above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <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 government 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 in line 2a 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):	1	
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 (<i>explain in detail in Part VI</i>):		
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 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 (<i>prior IRS approval required - 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 2020 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-2020	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required-- <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2020:			
a From 2015.			
b From 2016.			
c From 2017.			
d From 2018.			
e From 2019.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2020 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2020 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2021. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2016.			
b Excess from 2017.			
c Excess from 2018.			
d Excess from 2019.			
e Excess from 2020.			

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).

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME:	OTHER INCOME - 2016 AMOUNT: \$ 209,618.

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities
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.

OMB No. 1545-0047

2020
Open to Public Inspection

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

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

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

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

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

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

Name of the organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
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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 (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) ▶ \$ _____ **0**

3 Volunteer hours for political campaign activities (see instructions) **0**

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 ▶ \$ _____ **0**

2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____ **0**

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-.
1				
2				
3				
4				
5				
6				

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 (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

	9,145
	9,145
	1,829

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)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -0-

	457
	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? Yes 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) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	7,276	6,270	1,765	1,829	17,140
b Lobbying ceiling amount (150% of line 2a, column(e))					25,710
c Total lobbying expenditures					
d Grassroots nontaxable amount	2,272	1,568	441	457	4,738
e Grassroots ceiling amount (150% of line 2d, column (e))					7,107
f Grassroots lobbying expenditures					

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 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 expenditure 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.

Return Reference	Explanation
PART I-A, LINE 1:	THE ORGANIZATION HAS NOT SUPPORTED ANY POLITICAL CANDIDATE.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2020
Open to Public Inspection

▶ **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.**

Name of the organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number
23-2657933

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.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	1	
2 Aggregate value of contributions to (during year)	0	
3 Aggregate value of grants from (during year)	0	
4 Aggregate value at end of year	13	

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? **Yes** **No**
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? **Yes** **No**

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

- 1** Purpose(s) of conservation easements held by the organization (check all that apply).
- Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
- Protection of natural habitat Preservation of a certified historic structure
- Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? **Yes** **No**
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? **Yes** **No**
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

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.

- 1a** If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b** If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ _____
- 2** If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
- a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b** Assets included in Form 990, Part X ▶ \$ _____

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 are a 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 programs
 - 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:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
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 in 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	1,639,733	1,868,100	1,516,364	1,712,262	1,383,711
b Contributions	731,165	165,269	243,590	127,018	258,000
c Net investment earnings, gains, and losses	519,068	9,452	108,146	89,868	135,551
d Grants or scholarships					
e Other expenditures for facilities and programs	25,946	403,088		412,784	65,000
f Administrative expenses					
g End of year balance	2,864,020	1,639,733	1,868,100	1,516,364	1,712,262

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment ▶ 34.660 %
- b** Permanent endowment ▶ 65.340 %
- c** Term endowment ▶

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:

- (i)** Unrelated organizations
- (ii)** Related organizations

	Yes	No
3a(i)		No
3a(ii)		No
3b		

b If "Yes" on 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				
b Buildings				
c Leasehold improvements		60,884	6,088	54,796
d Equipment		644,912	413,696	231,216
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				286,012

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) SPLIT INTEREST AGREEMENTS	173,947	C
(B) PERPETUAL TRUSTS	2,646,913	C
(C) INVESTMENT IN INSURANCE TRUST	25,910	C
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	2,846,770	

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)		
(10)		
Total. (Column (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)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	

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) DESIGNATIONS PAYABLE	2,356,895
(3) LIABILITY TO DONORS UNDER SPLIT-INTEREST TRUSTS	99,495
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	2,456,390

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 FIN 48 (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	14,904,382
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	760,662
b	Donated services and use of facilities	2b	624,891
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	471,705
e	Add lines 2a through 2d	2e	1,857,258
3	Subtract line 2e from line 1	3	13,047,124
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	16,393
b	Other (Describe in Part XIII.)	4b	7,783,116
c	Add lines 4a and 4b	4c	7,799,509
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	20,846,633

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	12,758,982
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	624,891
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	624,891
3	Subtract line 2e from line 1	3	12,134,091
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	16,393
b	Other (Describe in Part XIII.)	4b	7,783,116
c	Add lines 4a and 4b	4c	7,799,509
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	19,933,600

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 23-2657933

Name: UNITED WAY OF THE GREATER LEHIGH VALLEY

Supplemental Information

Return Reference	Explanation
PART IV, LINE 2B:	DISBURSEMENT OF FUNDS ARE AUTHORIZED BY THE CO-CHAIRS OF THE PROFESSIONAL STAFF COMMITTEE. UNITED WAY OF THE GREATER LEHIGH VALLEY IS A LIMITED FISCAL SPONSOR AND HAS NO LEGAL CONTROL OF FUNDS, HAS NO VARIANCE POWER OVER FUNDS AND PROVIDES NO ADMINISTRATIVE SUPPORT. UNITED WAY OF THE GREATER LEHIGH VALLEY PROVIDES A MONTHLY REPORT OF RECEIPTS AND DISBURSEMENTS.

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	<p>THE ORGANIZATION'S ENDOWMENT CONSISTS OF FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS. AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS. THE BOARD OF DIRECTORS OF THE ORGANIZATION HAS INTERPRETED THE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA AS REQUIRING THE PRESERVATION OF THE FAIR VALUE OF THE ORIGINAL GIFT AS OF THE GIFT DATE OF THE DONOR-RESTRICTED ENDOWMENT FUNDS ABSENT EXPLICIT DONOR STIPULATIONS TO THE CONTRARY. AS A RESULT OF THIS INTERPRETATION, THE ORGANIZATION CLASSIFIES AS NET ASSETS WITH DONOR RESTRICTIONS IN PERPETUITY (A) THE ORIGINAL VALUE OF GIFT DONATED TO THE PERMANENT ENDOWMENT, (B) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND. THE REMAINING PORTION OF THE DONOR-RESTRICTED ENDOWMENT FUND THAT IS NOT CLASSIFIED IN NET ASSETS WITH DONOR RESTRICTIONS IN PERPETUITY IS CLASSIFIED AS NET ASSETS WITH DONOR RESTRICTIONS FOR TIME OR PURPOSE UNTIL THOSE AMOUNTS ARE APPROPRIATED FOR EXPENDITURES BY THE ORGANIZATION IN A MANNER CONSISTENT WITH THE STANDARD OF PRUDENCE PRESCRIBED BY THE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA. IN ACCORDANCE WITH THE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA, THE ORGANIZATION CONSIDERS THE FOLLOWING FACTORS IN MAKING A DETERMINATION TO APPROPRIATE OR ACCUMULATE DONOR-RESTRICTED ENDOWMENT FUNDS: (1) THE DURATION AND PRESERVATION OF THE VARIOUS FUNDS, (2) THE PURPOSE OF THE DONOR-RESTRICTED ENDOWMENT FUND, (3) GENERAL ECONOMIC CONDITIONS, (4) THE POSSIBLE EFFECT OF INFLATION AND DEFLECTION, (5) THE EXPECTED TOTAL RETURN FROM INCOME AND THE APPRECIATION OF INVESTMENTS, (6) OTHER RESOURCES OF THE ORGANIZATION, AND (7) THE ORGANIZATION'S INVESTMENT POLICIES. INVESTMENT RETURN OBJECTIVES, RISK PARAMETERS, AND STRATEGIES: THE ORGANIZATION HAS ADOPTED INVESTMENT POLICIES, APPROVED BY THE BOARD OF DIRECTORS, FOR DONOR-RESTRICTED ENDOWMENT FUNDS AND BOARD-DESIGNATED ENDOWMENTS. THE PRIMARY PURPOSE OF THE DONOR-RESTRICTED ENDOWMENT FUND IS TO ALLOW FOR THE PRESERVATION OF PRINCIPAL FOR GIFTS GIVEN IN PERPETUITY; WHOSE EARNINGS WILL BE UTILIZED AS DEFINED BY THE DONOR UPON CREATION OF THE GIFT. THE TARGET BALANCE OF THE FUND IS \$10M SHORT-TERM AND \$100M LONG-TERM. THE FUND EXCLUDES THE PERPETUAL TRUSTS. THE FINANCE COMMITTEE WILL OVERSEE THE MANAGEMENT OF THE FUND. INVESTMENT RETURN OBJECTIVES: THE PURPOSE OF ESTABLISHING AN INVESTMENT POLICY ASSET MIX IS TO CONSTRUCT A TARGET OR "NORMAL" SET OF INVESTMENTS, WELL DIVERSIFIED AMONG SUITABLE ASSET CLASSES THAT WILL GENERATE, ON AVERAGE, THE LEVEL OF EXPECTED RETURN NECESSARY TO MEET ENDOWMENT OBJECTIVES AT THE LOWEST VOLATILITY CONSISTENT WITH THE ORGANIZATION'S INVESTMENT OBJECTIVES.</p>

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	STENT WITH ACHIEVING THAT RETURN. THE INVESTMENT ASSET ALLOCATIONS MIX, INCLUDING TARGET LEVELS AND RANGES APPROVED BY THE BOARD OF DIRECTORS. THE TARGET LEVELS AT JUNE 30, 2021 WE RE 65% EQUITIES AND 35% BONDS. SPENDING POLICY: THE SPENDING POLICY OF THE DONOR-RESTRICTED ENDOWMENT FUND SHALL BE 4% ANNUALLY AS PART OF THE ANNUAL BUDGET.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, THE ORGANIZATION ACCOUNTS FOR UNCERTAIN TAX POSITIONS RELATIVE TO UNRELATED BUSINESS INCOME, IF ANY, AS REQUIRED.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	UNREALIZED GAIN ON BENEFICIAL INTEREST IN PERPETUAL TRUSTS 456,900. CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 11,510. UNREALIZED GAIN ON INVESTMENT IN INSURANCE TRUST 3,295.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	DONOR DESIGNATED CONTRIBUTIONS 7,783,116.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	DONOR DESIGNATED CONTRIBUTIONS 7,783,116.

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number
23-2657933

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

- 1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
- 3** Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
NORTH AMERICA	0	0	GRANTS TO RECIPIENTS	PROGRAM OPERATING COSTS	28,750
3a Sub-total	0	0			28,750
b Total from continuation sheets to Part I	0	0			0
c Totals (add lines 3a and 3b)	0	0			28,750

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		NORTH AMERICA	PROGRAM OPERATING COSTS	28,750				

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶

3 Enter total number of other organizations or entities ▶

1

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* Yes No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations. (see Instructions for Form 5471)* Yes No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)* Yes No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)* Yes No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990).* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2:	MONITORING POLICIES FOR ALLOCATED FUNDING BEGINS WITH A SCREENING PROCESS CALLED THE QUALIFICATION REVIEW PROCESS. ALL ORGANIZATIONS RECEIVING UNITED WAY FUNDING MUST COMPLETE AND PASS A RIGOROUS QUALIFICATIONS CRITERIA APPLICATION FOR FUNDING CONSIDERATION. QUALIFYING FOR FUNDING, HOWEVER, DOES NOT GUARANTEE FUNDING. SERVICE PROVIDERS MUST MEET ALL 18 QUALIFICATIONS CRITERIA - LEGAL, GOVERNANCE, FINANCE, AND ORGANIZATIONAL QUALITY ASSURANCE - TO BE CONSIDERED FOR UNITED WAY FUNDING. THE PROGRAM OPERATING WITH UNITED WAY SUPPORT ARE MONITORED ANNUALLY ON CUSTOMER COUNT, LOW-INCOME STATUS OF CUSTOMERS, AND RESULTS - BASED ACCOUNTABILITY DATA COLLECTION AND RESULTS REPORTING MEASUREMENTS.

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART III ACCOUNTING METHOD:	

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number 23-2657933

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
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.

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 238
3 Enter total number of other organizations listed in the line 1 table 17

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1) PROGRAM OPERATING COSTS	3	30,750			
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2:	MONITORING POLICIES FOR ALLOCATED FUNDING BEGINS WITH A SCREENING PROCESS CALLED THE QUALIFICATION REVIEW PROCESS. ALL ORGANIZATIONS RECEIVING UNITED WAY FUNDING MUST COMPLETE AND PASS A RIGOROUS QUALIFICATIONS CRITERIA APPLICATION FOR FUNDING CONSIDERATION. QUALIFYING FOR FUNDING, HOWEVER, DOES NOT GUARANTEE FUNDING. SERVICE PROVIDERS MUST MEET ALL 18 QUALIFICATIONS CRITERIA - LEGAL, GOVERNANCE, FINANCE, AND ORGANIZATIONAL QUALITY ASSURANCE - TO BE CONSIDERED FOR UNITED WAY FUNDING. THE PROGRAM OPERATING WITH UNITED WAY SUPPORT ARE MONITORED ANNUALLY ON CUSTOMER COUNT, LOW-INCOME STATUS OF CUSTOMERS, AND RESULTS - BASED ACCOUNTABILITY DATA COLLECTION AND RESULTS REPORTING MEASUREMENTS.

Additional Data

Software ID:
Software Version:
EIN: 23-2657933
Name: UNITED WAY OF THE GREATER LEHIGH VALLEY

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ADAMS OUTDOOR ADVERTISING PO BOX 809140 CHICAGO, IL 606809140	41-1540241		15,000				PROGRAM OPERATING COSTS
ALLENTOWN ART MUSEUM 31 N 5TH STREET ALLENTOWN, PA 181011616	23-1548101	501(C)(3)	136,258				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLENTOWN DRIVE BASEBALL 840 HAMILTON ST STE 210 ALLENTOWN, PA 181012456	27-1768416	501(C)(3)	10,112				DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN RESCUE MISSION INC 355 W HAMILTON ST ALLENTOWN, PA 181011819	23-6005983	501(C)(3)	45,217				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLENTOWN SCHOOL DISTRICT FOUNDATION 31 S PENN ST ALLENTOWN, PA 18105	27-0743152	501(C)(3)	28,023				DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN SYMPHONY ASSOCIATION 3 N 6TH ST ALLENTOWN, PA 18101	23-6272140	501(C)(3)	93,748				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLENTOWN YMCA 425 S 15TH ST ALLENTOWN, PA 181024617	23-1365989	501(C)(3)	15,375				DONOR DESIGNATED FOR GENERAL SUPPORT
ALS ASSN GREATER PHILADELPHIA CHAPTER 321 NORRISTOWN RD STE 260 AMBLER, PA 190022755	23-2387205	501(C)(3)	11,073				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALVIN AILEY DANCE FOUNDATION INC 405 W 55TH ST NEW YORK, NY 100194402	13-2584273	501(C)(3)	43,750				DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN CANCER SOCIETY BERKS COUNTY 498 BELLEVUE AVE READING, PA 19605	13-1788491	501(C)(3)	6,504				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY LEHIGH VALLEY UNIT 3893 ADLER PLACE SUITE 170 BETHLEHEM, PA 180179000	13-1788491	501(C)(3)	14,575				DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN DIABETES ASSOCIATION OF NJ 1160 US HIGHWAY 22 STE 103 BRIDGEWATER, NJ 088072931	13-1623888	501(C)(3)	5,292				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN HEART ASSOCIATION (LEHIGH VALLEY) 4250 CRUMS MILL RD STE 100 HARRISBURG, PA 171122889	13-5613797	501(C)(3)	15,141				DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN RED CROSS NATIONAL HEADQUARTERS 431 18TH ST NW WASHINGTON, DC 20006	53-0196605	501(C)(3)	5,647				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN RED CROSS OF THE GREATER LEHIGH VALLEY 3939 BROADWAY ALLENTOWN, PA 18104	23-1381431	501(C)(3)	116,941				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
ARC-LEHIGHNORTHAMPTON COUNTIES 2289 AVENUE A BETHLEHEM, PA 180172107	23-1679102	501(C)(3)	12,599				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTSQUEST 25 W THIRD ST BETHLEHEM, PA 18015	23-2280560	501(C)(3)	186,939				DONOR DESIGNATED FOR GENERAL SUPPORT
ARTSQUEST FOUNDATION 25 W THIRD ST SUITE 300 BETHLEHEM, PA 18015	20-0652958	501(C)(3)	131,250				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASR MEDIA LLC 410 MAIN STREET HELLERTOWN, PA 18055	46-2057209		22,500				PROGRAM OPERATING COSTS
BACH CHOIR OF BETHLEHEM 423 HECKEWELDER PL BETHLEHEM, PA 18018	24-0795385	501(C)(3)	8,631				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHLEHEM BUSINESS FORMS LLC PO BOX 4250 BETHLEHEM, PA 18018	32-0150171		23,320				PROGRAM OPERATING COSTS
BETHLEHEM CHRISTIAN SCHOOL 3100 HECKTOWN RD BETHLEHEM, PA 18020	23-2069125	501(C)(3)	6,721				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERS BIG SISTERS OF THE LEHIGH VALLEY 41 S CARLISLE ST ALLENTOWN, PA 181092558	23-1746895	501(C)(3)	46,154				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BLOOM 3400 BATH PIKE STE 110 BETHLEHEM, PA 18017	20-1221107	501(C)(3)	111,410				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOOMER ESIASON FOUNDATION 200 B ARMSTRONG ROAD GARDEN CITY PARK, NY 11040	11-3142753	501(C)(3)	6,197				DONOR DESIGNATED FOR GENERAL SUPPORT
BOY SCOUTS OF AMERICA - HAWK MOUNTAIN 5027 POTTSVILLE PIKE READING, PA 196059713	23-7196296	501(C)(3)	5,725				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOY SCOUTS OF AMERICA - MINSI TRAILS COUNCIL 991 POSTAL RD ALLENTOWN, PA 18109	23-1708585	501(C)(3)	111,466				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BOYS & GIRLS CLUB OF ALLENTOWN 720 N 6TH ST ALLENTOWN, PA 18102	23-1352042	501(C)(3)	106,904				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF BETHLEHEM 1430 FRITZ DR BETHLEHEM, PA 18017	23-6298476	501(C)(3)	64,178				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BOYS & GIRLS CLUB OF EASTON 210 JONES HOUSTON WAY EASTON, PA 18042	23-1941228	501(C)(3)	95,838				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRADBURY-SULLIVAN LGBT COMMUNITY CENTER 522 WEST MAPLE STREET ALLENTOWN, PA 18101	20-1443960	501(C)(3)	15,323				DONOR DESIGNATED FOR GENERAL SUPPORT
BRECKENRIDGE CREATIVE ARTS PO BOX 4269 BRECKENRIDGE, CO 80424	47-2066832	501(C)(3)	20,451				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRECKENRIDGE HERITAGE ALLIANCE PO BOX 2460 BRECKENRIDGE, CO 80424	20-8196263	501(C)(3)	15,225				DONOR DESIGNATED FOR GENERAL SUPPORT
BRIGHT HOPE PREGNANCY SUPPORT CENTERS 1034 W HAMILTON ST ALLENTOWN, PA 181011036	23-7337229	501(C)(3)	5,068				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BUILDING 21 265 LEHIGH ST ALLENTOWN, PA 18102	47-2514219	501(C)(3)	32,728				DONOR DESIGNATED FOR GENERAL SUPPORT
BURN PREVENTION FOUNDATION 236 N 17TH ST 2ND FL ALLENTOWN, PA 181045605	22-2839595	501(C)(3)	10,817				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAMELOT FOR CHILDREN 2354 W EMMAUS AVE ALLENTOWN, PA 18103	23-2565740	501(C)(3)	12,965				DONOR DESIGNATED FOR GENERAL SUPPORT
CANCER SUPPORT COMMUNITY OF THE GREATER LEHIGH VALLEY 944 MARCON BLVD SUITE 100 ALLENTOWN, PA 18109	73-1657537	501(C)(3)	19,551				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITAL AREA UNITED WAY (LA) 700 LAUREL ST BATONROUGE, LA 708025634	72-0447100	501(C)(3)	17,215				DONOR DESIGNATED FOR GENERAL SUPPORT
CARBON-SCHUYLKILL COMMUNITY HOSPITAL INC 575 S 9TH ST BETHLEHEM, PA 18015	23-1352213	501(C)(3)	5,000				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CASA GUADALUPE CENTER 218 N 2ND ST ALLENTOWN, PA 181023508	23-1988203	501(C)(3)	36,101				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
CATHEDRAL CHURCH OF THE NATIVITY 321 WYANDOTTE STREET BETHLEHEM, PA 18015	23-3007278	501(C)(3)	26,250				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHEDRAL OF ST CATHARINE OF SIENA 1825 WEST TURNER ST ALLENTOWN, PA 18104	23-1598116	501(C)(3)	8,750				DONOR DESIGNATED FOR GENERAL SUPPORT
CATHOLIC CHARITIES DIOCESE OF ALLENTOWN 900 S WOODWARD ST ALLENTOWN, PA 181034179	23-1598117	501(C)(3)	170,372				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC FOUNDATION OF EASTERN PENNSYLVANIA PO BOX 1430 ALLENTOWN, PA 18105	46-4060385	501(C)(3)	87,500				DONOR DESIGNATED FOR GENERAL SUPPORT
CAY GALGON LIFE HOUSE 714 W BROAD ST BETHLEHEM, PA 18018	83-3008929	501(C)(3)	22,254				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CEDAR CREST BIBLE FELLOWSHIP 1151 S CEDAR CREST BLVD ALLENTOWN, PA 18103	23-2123359	501(C)(3)	8,750				DONOR DESIGNATED FOR GENERAL SUPPORT
CEDAR CREST COLLEGE 100 COLLEGE DR ALLENTOWN, PA 18104	23-1365953	501(C)(3)	5,313				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR HUMANISTIC CHANGE 555 UNION BLVD SUITE 7 ALLENTOWN, PA 18109	23-2107264	501(C)(3)	97,980				PROGRAM OPERATING COSTS
CHILDREN INTERNATIONAL 2000 EAST RED BRIDGE ROAD KANSAS CITY, MO 64131	44-6005794	501(C)(3)	6,055				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S HOME OF EASTON 2000 S 25TH ST EASTON, PA 18042	24-0806100	501(C)(3)	40,146				DONOR DESIGNATED FOR GENERAL SUPPORT
CHRIST EVANGELICAL LUTHERAN CHURCH 1245 HAMILTON ST ALLENTOWN, PA 18102	23-1401550	501(C)(3)	10,000				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHURCH OF OUR SAVIOUR 59 PARK AVENUE NEW YORK, NY 10016	81-3193830	501(C)(3)	9,313				DONOR DESIGNATED FOR GENERAL SUPPORT
CITRO DIGITAL 330 S WARMINSTER RD SUITE 341 HATBORO, PA 19040	82-3835410		5,000				PROGRAM OPERATING COSTS

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

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CIVIC THEATRE OF ALLENTOWN PA 527 N 19TH ST ALLENTOWN, PA 18104	23-2152581	501(C)(3)	113,373				DONOR DESIGNATED FOR GENERAL SUPPORT
COLLEGE OF THE HOLY CROSS 1 COLLEGE ST WORCESTER, MA 01610	04-2103558	501(C)(3)	8,750				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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COMMUNITIES IN SCHOOLS OF EASTERN PENNSYLVANIA INC 739 N 12TH ST ALLENTOWN, PA 18102	23-2222874	501(C)(3)	1,003,908				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
COMMUNITY ACTION COMMITTEE OF THE LEHIGH VALLEY 1337 E 5TH ST BETHLEHEM, PA 180152103	23-1669589	501(C)(3)	266,534				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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COMMUNITY BIKE WORKS 235 N MADISON ST ALLENTOWN, PA 18102	23-2867945	501(C)(3)	145,496				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
COMMUNITY SERVICES FOR CHILDREN INC 1520 HANOVER AVE ALLENTOWN, PA 181092360	23-2204725	501(C)(3)	84,296				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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CONGREGATION KENESETH ISRAEL 2227 W CHEW ST ALLENTOWN, PA 18104	23-1489807	501(C)(3)	8,568				DONOR DESIGNATED FOR GENERAL SUPPORT
CRIME VICTIMS COUNCIL OF THE LEHIGH VALLEY 2132 S 12TH ST SUITE 101 ALLENTOWN, PA 18103	23-1997899	501(C)(3)	56,672				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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DA VINCI SCIENCE CENTER 3145 HAMILTON BLVD BYPASS ALLENTOWN, PA 18103	23-2824084	501(C)(3)	400,759				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
DAV CHARITABLE SERVICE TRUST 3725 ALEXANDRIA PIKE COLD SPRING, KY 410761712	52-1521276	501(C)(3)	6,719				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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DELAWARE MUSEUM OF NATURAL HISTORY 4840 KENNETT PIKE WILMINGTON, DE 19807	51-0083535	501(C)(3)	50,000				DONOR DESIGNATED FOR GENERAL SUPPORT
DESALES UNIVERSITY 2755 STATION AVE CENTER VALLEY, PA 18034	23-1653718	501(C)(3)	173,361				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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DIAKON LUTHERAN SOCIAL MINISTRIES 798 HAUSMAN RD STE 300 ALLENTOWN, PA 18104	23-3014613	501(C)(3)	20,000				PROGRAM OPERATING COSTS
DIOCESE OF ALLENTOWN 1515 MARTIN LUTHER KING JR DRIVE ALLENTOWN, PA 18102	23-1598117	501(C)(3)	479,061				DONOR DESIGNATED FOR GENERAL SUPPORT

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DOLLARDAYS INTERNATIONAL INC PO BOX 790379 ST LOUIS, MO 631790379	38-3786430		17,581				PROGRAM OPERATING COSTS
DOWN FOR DANCE 6 BARLOVENTO CT NEWPORT BEACH, CA 92663	82-2389441	501(C)(3)	5,000				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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DREAM COME TRUE PO BOX 21167 LEHIGH VALLEY, PA 180021167	22-2550269	501(C)(3)	10,921				DONOR DESIGNATED FOR GENERAL SUPPORT
DREXEL UNIVERSITY 3141 CHESTNUT ST PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	5,992				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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DUQUESNE UNIVERSITY OF THE HOLY SPIRIT 600 FORBES AVE ADMIN BLDG - 5TH FLOOR PITTSBURGH, PA 15282	25-1035663	501(C)(3)	7,875				DONOR DESIGNATED FOR GENERAL SUPPORT
EAST STROUDSBURG UNIVERSITY FOUNDATION 200 PROSPECT STREET EAST STROUDSBURG, PA 18301	22-2826714	501(C)(3)	21,163				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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EASTER SEALS SOCIETY OF EASTERN PENNSYLVANIA 1501 LEHIGH STREET SUITE 201 ALLENTOWN, PA 18103	23-2823542	501(C)(3)	35,049				DONOR DESIGNATED FOR GENERAL SUPPORT
EASTON AREA COMMUNITY CENTER 901 WASHINGTON ST EASTON, PA 180424389	23-2147613	501(C)(3)	6,939				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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EASTON AREA NEIGHBORHOOD CENTER INC 902 PHILADELPHIA ROAD EASTON, PA 180426599	23-2039194	501(C)(3)	10,000				PROGRAM OPERATING COSTS
ENGINEERS WITHOUT BORDERS USA INC 1031 33RD ST STE 210 DENVER, CO 802052767	84-1589324	501(C)(3)	8,400				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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EQUI-LIBRIUM INC 524 FEHR RD NAZARETH, PA 180649153	23-3088228	501(C)(3)	17,521				DONOR DESIGNATED FOR GENERAL SUPPORT
FACES INTERNATIONAL LLC 1000 POSTAL RD ALLENTOWN, PA 18109	27-4170024		22,500				PROGRAM OPERATING COSTS

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

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FAMILY CONNECTION OF EASTON INC 723 COAL STREET EASTON, PA 18042	20-4934762	501(C)(3)	140,689				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
FAMILY PROMISE OF CARBON COUNTY 167 S 3RD ST LEHIGHTON, PA 18235	27-0763520	501(C)(3)	10,000				PROGRAM OPERATING COSTS

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

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FAMILY PROMISE OF LEHIGH VALLEY 1346 W HAMILTON ST ALLENTOWN, PA 18102	47-4401737	501(C)(3)	5,232				DONOR DESIGNATED FOR GENERAL SUPPORT
FIRST LIGHT INC 2230 4TH AVE N BIRMINGHAM, AL 35203	63-1197189	501(C)(3)	5,250				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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FIRST PRESBYTERIAN CHURCH OF ALLENTOWN 3231 W TILGHMAN ST ALLENTOWN, PA 181043412	23-1352423	501(C)(3)	16,575				DONOR DESIGNATED FOR GENERAL SUPPORT
FRANKLIN COVEY CLIENT SALES INC PO BOX 25127 SALT LAKE CITY, UT 841250127	87-0561601		225,791				PROGRAM OPERATING COSTS

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FUND TO BENEFIT CHILDREN & YOUTH 903 E ELM ST ALLENTOWN, PA 181092629	23-2643243	501(C)(3)	35,543				DONOR DESIGNATED FOR GENERAL SUPPORT
GIRL SCOUTS OF EASTERN PENNSYLVANIA 330 MANOR ROAD MIQUON, PA 194441741	23-1599656	501(C)(3)	74,197				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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GOOD SHEPHERD 850 S 5TH ST ALLENTOWN, PA 181033308	23-2216041	501(C)(3)	126,397				DONOR DESIGNATED FOR GENERAL SUPPORT
GREATER BERKS FOOD BANK 117 MORGAN DR READING, PA 19608	22-2456238	501(C)(3)	6,228				DONOR DESIGNATED FOR GENERAL SUPPORT

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GREATER COMMUNITY DEVELOPMENT CORPORATION 403 PASTOR FRED DAVIS ST EASTON, PA 180426451	83-1407226	501(C)(3)	31,667				PROGRAM OPERATING COSTS
GREATER SUSQUEHANNA VALLEY UNITED WAY 228 ARCH ST SUNBURY, PA 17801	23-1697631	501(C)(3)	15,229				DONOR DESIGNATED FOR GENERAL SUPPORT

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GREATER VALLEY YMCA 1524 W LINDEN ST STE 209 ALLENTOWN, PA 18102	24-0798706	501(C)(3)	98,378				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
GREENE FAMILY INVESTMENTS 209 EAST HOWE ST ALLENTOWN, PA 18109	84-2040918		10,125				PROGRAM OPERATING COSTS

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HABITAT FOR HUMANITY OF THE LEHIGH VALLEY 245 N GRAHAM ST ALLENTOWN, PA 181092191	23-2544326	501(C)(3)	43,463				DONOR DESIGNATED FOR GENERAL SUPPORT
HAWK MOUNTAIN SANCTUARY ASSOCIATION 1700 HAWK MOUNTAIN ROAD KEMPTON, PA 19529	23-1392700	501(C)(3)	6,697				DONOR DESIGNATED FOR GENERAL SUPPORT

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HILLSIDE SCHOOL 2697 BROOKSIDE RD MACUNGIE, PA 180629045	23-2263178	501(C)(3)	19,267				DONOR DESIGNATED FOR GENERAL SUPPORT
HISPANIC CENTER LEHIGH VALLEY 520 E 4TH ST BETHLEHEM, PA 18015	23-1882308	501(C)(3)	71,304				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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HISTORIC BETHLEHEM PARTNERSHIP INC 74 W BROAD ST STE 310 BETHLEHEM, PA 18018	23-2741808	501(C)(3)	64,912				DONOR DESIGNATED FOR GENERAL SUPPORT
HOLY FAMILY SCHOOL - NAZARETH 17 N CONVENT AVE NAZARETH, PA 180641234	24-0818343	501(C)(3)	6,596				DONOR DESIGNATED FOR GENERAL SUPPORT

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HOPE COMMUNITY CHURCH 7974 CLAUSVILLE ROAD FOGELSVILLE, PA 18051	80-0797738	501(C)(3)	29,151				DONOR DESIGNATED FOR GENERAL SUPPORT
HUMANE SOCIETY OF HARRISBURG AREA INC 7790 GRAYSON RD HARRISBURG, PA 171115415	23-1365361	501(C)(3)	8,452				DONOR DESIGNATED FOR GENERAL SUPPORT

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INDEPENDENT PRESBYTERIAN CHURCH FOUNDATION 3100 HIGHLAND AVENUE S BIRMINGHAM, AL 35205	23-7396600	501(C)(3)	12,250				DONOR DESIGNATED FOR GENERAL SUPPORT
INTERNATIONAL RESCUE COMMITTEE INC 122 E 42ND ST 12TH FLR NEW YORK, NY 10168	13-5660870	501(C)(3)	7,855				DONOR DESIGNATED FOR GENERAL SUPPORT

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JEWISH COMMUNITY CENTER OF ALLENTOWN 702 N 22ND ST ALLENTOWN, PA 18104	23-0734200	501(C)(3)	7,021				DONOR DESIGNATED FOR GENERAL SUPPORT
JEWISH FAMILY SERVICE OF THE LEHIGH VALLEY 2004 W ALLEN ST ALLENTOWN, PA 181045053	23-2301360	501(C)(3)	27,073				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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JEWISH FEDERATION OF THE LEHIGH VALLEY 702 N 22ND STREET ALLENTOWN, PA 18104	23-6396949	501(C)(3)	19,769				DONOR DESIGNATED FOR GENERAL SUPPORT
KELLYN FOUNDATION PO BOX 369 336 BUSHKILL ST TATAMY, PA 18085	26-2623498	501(C)(3)	60,000				PROGRAM OPERATING COSTS

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KIDSPEACE 4085 INDEPENDENCE DRIVE SCHNECKSVILLE, PA 18078	23-1353394	501(C)(3)	15,808				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
KOLBE ACADEMY INC 395 BRIDLE PATH ROAD BETHLEHEM, PA 18017	83-1367068	501(C)(3)	126,405				DONOR DESIGNATED FOR GENERAL SUPPORT

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KRYSTA HANKEE MEMORIAL FUND PO BOX 1 GERMANSVILLE, PA 18053	26-1168076	501(C)(3)	8,000				PROGRAM OPERATING COSTS
KUTZTOWN HOBOS 325 TREXLER AVE KUTZTOWN, PA 195309242	20-5876028	501(C)(3)	6,000				DONOR DESIGNATED FOR GENERAL SUPPORT

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KUTZTOWN UNIVERSITY FOUNDATION PO BOX 151 KUTZTOWN, PA 19530	23-2256893	501(C)(3)	100,395				DONOR DESIGNATED FOR GENERAL SUPPORT
LAFAYETTE COLLEGE 730 HIGH ST EASTON, PA 180427623	24-0795686	501(C)(3)	18,548				DONOR DESIGNATED FOR GENERAL SUPPORT

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LAKESIDE 1350 WELSH ROAD SUITE 400 NORTH WALES, PA 19454			8,293				PROGRAM OPERATING COSTS
LEHIGH CARBON COMMUNITY COLLEGE FOUNDATION 4525 EDUCATION PARK DR SCHNECKSVILLE, PA 180782502	23-7454575	501(C)(3)	15,000				PROGRAM OPERATING COSTS

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LEHIGH CONFERENCE OF CHURCHES 457 W ALLEN ST ALLENTOWN, PA 18102	23-1484205	501(C)(3)	27,458				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
LEHIGH UNIVERSITY 29 TREMBLY DR BETHLEHEM, PA 18015	24-0795445	501(C)(3)	341,812				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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LEHIGH VALLEY ACTIVE LIFE 1633 W ELM ST ALLENTOWN, PA 18102	23-1627030	501(C)(3)	20,000				PROGRAM OPERATING COSTS
LEHIGH VALLEY CHILDREN'S CENTERS INC 1501 LEHIGH ST STE 208 ALLENTOWN, PA 181033880	23-1908158	501(C)(3)	183,668				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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LEHIGH VALLEY COMMUNITY FOUNDATION 840 HAMILTON ST STE 310 ALLENTOWN, PA 181012456	23-1686634	501(C)(3)	36,687				DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY HEALTH NETWORK 2100 MACK BLVD ALLENTOWN, PA 18103	22-2458317	501(C)(3)	196,675				DONOR DESIGNATED FOR GENERAL SUPPORT

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LEHIGH VALLEY PBSWLVT 839 SESAME ST BETHLEHEM, PA 18015	23-1642883	501(C)(3)	15,229				DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY ZOO 5150 GAME PRESERVE RD SCHNECKSVILLE, PA 180783305	05-0606070	501(C)(3)	9,704				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LEUKEMIA LYMPHOMA SOCIETY EASTERN PA CHAPTER 100 N 20TH ST STE 405 PHILADELPHIA, PA 19103	23-1636818	501(C)(3)	7,769				DONOR DESIGNATED FOR GENERAL SUPPORT
LIFEPATH FOUNDATION 3500 HIGH POINT BLVD BETHLEHEM, PA 18017	23-7402943	501(C)(3)	8,500				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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LIGHT ON THE HORIZON 2604 APPEL ST ALLENTOWN, PA 18103	85-3539972	501(C)(3)	9,000				PROGRAM OPERATING COSTS
LYCAN MEDIA 101 HIGHLANDS BOULEVARD EASTON, PA 18042	82-2925998		12,265				PROGRAM OPERATING COSTS

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

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LYCOMING COUNTY UNITED WAY 33 WEST THIRD ST SUITE 201 WILLIAMSPORT, PA 177016542	24-0828149	501(C)(3)	23,244				DONOR DESIGNATED FOR GENERAL SUPPORT
MARIA VERAS FAMILY DAYCARE INC 27 N 12TH ST ALLENTOWN, PA 181011029	83-3208835		52,595				PROGRAM OPERATING COSTS

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

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MARTHA LLOYD SCHOOL INC 66 LLOYD LN TROY, PA 169471502	24-0798830	501(C)(3)	8,750				DONOR DESIGNATED FOR GENERAL SUPPORT
MARY'S SHELTER 615 KENHORST BLVD READING, PA 19611	23-2722494	501(C)(3)	9,221				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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MASSACHUSETTS INSTITUTE OF TECHNOLOGY 600 MEMORIAL DR STE 1 W98 CAMBRIDGE, MA 021394822	04-2103594	501(C)(3)	8,005				DONOR DESIGNATED FOR GENERAL SUPPORT
MAYO CLINIC (FLORIDA) 4500 SAN PABLO RD S JACKSONVILLE, FL 322241865	59-0714831	501(C)(3)	8,750				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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MEALS ON WHEELS OF THE GREATER LEHIGH VALLEY 1302 N SHERMAN ST ALLENTOWN, PA 18109	23-1861779	501(C)(3)	218,326				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
MERCY SPECIAL LEARNING CENTER 830 S WOODWARD ST ALLENTOWN, PA 181033440	90-0988217	501(C)(3)	15,197				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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MILE HIGH UNITED WAY 2505 18TH ST DENVER, CO 802113907	84-0404235	501(C)(3)	8,952				DONOR DESIGNATED FOR GENERAL SUPPORT
MILLER-KEYSTONE BLOOD CENTER 1465 VALLEY CENTER PKWY BETHLEHEM, PA 18017	23-1731796	501(C)(3)	9,303				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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MIRACLE LEAGUE OF THE LEHIGH VALLEY 4460 PARK VIEW DR SCHNECKSVILLE, PA 180782579	74-3167008	501(C)(3)	8,720				DONOR DESIGNATED FOR GENERAL SUPPORT
MISSIONARY SISTERS OF THE MOST SACRED HEART OF JESUS 51 SEMINARY AVE READING, PA 19605	23-1352233	501(C)(3)	5,500				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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MORAVIAN ACADEMY 7 E MARKET ST FL 2 BETHLEHEM, PA 180185963	24-0829838	501(C)(3)	25,858				DONOR DESIGNATED FOR GENERAL SUPPORT
MORAVIAN COLLEGE 1200 MAIN ST BETHLEHEM, PA 18018	24-0795460	501(C)(3)	150,421				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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MOSSER VILLAGE FAMILY CENTER 614 S CARLISLE ST ALLENTOWN, PA 181092803	23-3029327	501(C)(3)	5,125				DONOR DESIGNATED FOR GENERAL SUPPORT
MUHLENBERG COLLEGE 2400 CHEW STREET ALLENTOWN, PA 181045564	23-1352664	501(C)(3)	14,661				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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NATIONAL MUSEUM OF INDUSTRIAL HISTORY 754 ROBLE RD STE 70 ALLENTOWN, PA 18109	23-2912750	501(C)(3)	14,056				DONOR DESIGNATED FOR GENERAL SUPPORT
NEW BETHANY MINISTRIES 333 W 4TH ST BETHLEHEM, PA 18015	23-2365694	501(C)(3)	106,088				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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NORTH CAROLINA SYMPHONY SOCIETY INC 3700 GLENWOOD AVE SUITE 130 RALEIGH, NC 27612	56-0556755	501(C)(3)	12,250				DONOR DESIGNATED FOR GENERAL SUPPORT
NORTH PENN LEGAL SERVICES 101 WEST BROAD STREET SUITE 513 HAZLETON, PA 18201	23-1659111	501(C)(3)	30,000				PROGRAM OPERATING COSTS

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

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NORTHAMPTON AREA FOOD BANK 1601 CANAL ST NORTHAMPTON, PA 180671675	23-3007282	501(C)(3)	5,670				DONOR DESIGNATED FOR GENERAL SUPPORT
NORTHAMPTON COMMUNITY COLLEGE 3835 GREEN POND ROAD BETHLEHEM, PA 18020	23-2064496	501(C)(3)	40,000				PROGRAM OPERATING COSTS

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

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NORTHAMPTON COUNTY COMMUNITY COLLEGE FOUNDATION 3835 GREEN POND ROAD BETHLEHEM, PA 180207568	23-2064496	501(C)(3)	205,094				DONOR DESIGNATED FOR GENERAL SUPPORT
NORTHAMPTON COUNTY HISTORICAL & GENEALOGICAL SOCIETY 342 NORTHAMPTON STREET EASTON, PA 180423514	24-6021192	501(C)(3)	5,000				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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NORTHEAST COMMUNITY CENTER PO BOX 1463 BETHLEHEM, PA 180161463	23-2339841	501(C)(3)	22,435				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
NORTHERN VALLEY EMS 2375 LEVANS RD COPLAY, PA 180372202	23-2941451	501(C)(3)	9,477				DONOR DESIGNATED FOR GENERAL SUPPORT

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NORWESCAP 201 N BROAD ST PHILLIPSBURG, NJ 08865	22-1777156	501(C)(3)	5,538				DONOR DESIGNATED FOR GENERAL SUPPORT
NOTRE DAME OF BETHLEHEM CHURCH 1861 CATASAQUA RD BETHLEHEM, PA 18018	23-1440569	501(C)(3)	7,000				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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PALS PROGRAMS 4965 GRUNDY WAY DOYLESTOWN, PA 18902	35-2334489	501(C)(3)	5,000				DONOR DESIGNATED FOR GENERAL SUPPORT
PARENTPOWERED 33 HAYWARD AVE STE 201 SAN MATEO, CA 94401	81-2427411		20,970				PROGRAM OPERATING COSTS

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

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PARKLAND SCHOOL DISTRICT EDUCATION FOUNDATION 1210 SPRINGHOUSE RD ALLENTOWN, PA 181042119	42-2645543	501(C)(3)	12,849				DONOR DESIGNATED FOR GENERAL SUPPORT
PBS 39 839 SESAME STREET BETHLEHEM, PA 18015	23-1642883	501(C)(3)	61,000				PROGRAM OPERATING COSTS

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PEDIATRIC CANCER FOUNDATION 2132 S 12TH ST STE 401 ALLENTOWN, PA 181034810	20-2297295	501(C)(3)	10,426				DONOR DESIGNATED FOR GENERAL SUPPORT
PENNSYLVANIA STATE UNIVERSITY PHILANTHROPIC FUND 408 OLD MAIN UNIVERSITY PARK, PA 16802	27-4628784	501(C)(3)	180,460				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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PINEBROOK FAMILY ANSWERS 402 N FULTON ST ALLENTOWN, PA 18102	23-2112204	501(C)(3)	681,494				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
PLANNED PARENTHOOD KEYSTONE PO BOX 813 TREXLERTOWN, PA 180870813	23-2450112	501(C)(3)	15,237				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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POCONO MOUNTAINS UNITED WAY PO BOX 790 TANNERSVILLE, PA 183720790	24-0797026	501(C)(3)	33,607				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
PROJECT OF EASTON INC 320 FERRY ST EASTON, PA 180424541	23-2112204	501(C)(3)	107,138				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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PROMISE NEIGHBORHOODS OF THE LEHIGH VALLEY 1101 HAMILTON STREET ALLENTOWN, PA 18102	46-4977927	501(C)(3)	140,960				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
PUSH THE ROCK PO BOX 95 EMMAUS, PA 180490095	23-2990640	501(C)(3)	15,379				DONOR DESIGNATED FOR GENERAL SUPPORT

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RED DOOR EARLY LEARNING CENTER INC 4777 SAUCON CREEK RD CENTER VALLEY, PA 18034	81-4799500	501(C)(3)	14,534				DONOR DESIGNATED FOR GENERAL SUPPORT
RESURRECTED COMMUNITY DEVELOPMENT CORP INC 144 N 9TH STREET ALLENTOWN, PA 18102	45-1018523	501(C)(3)	48,100				PROGRAM OPERATING COSTS

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RIPPLE COMMUNITY INC 1335 W LINDEN ST ALLENTOWN, PA 18102	47-4828012	501(C)(3)	11,557				DONOR DESIGNATED FOR GENERAL SUPPORT
SAFE HARBOR EMERGENCY SHELTER 536 BUSHKILL DRIVE EASTON, PA 18042	23-2589941	501(C)(3)	30,318				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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SAFE HARBOR INC PO BOX 174 GREENVILLE, SC 296020174	57-1014137	501(C)(3)	5,000				DONOR DESIGNATED FOR GENERAL SUPPORT
SALVATION ARMY OF BETHLEHEM 521 PEMBROKE RD BETHLEHEM, PA 18017	23-1352533	501(C)(3)	5,534				DONOR DESIGNATED FOR GENERAL SUPPORT

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SALVATION ARMY OF EASTON PO BOX 937 EASTON, PA 180440937	23-1352533	501(C)(3)	11,075				DONOR DESIGNATED FOR GENERAL SUPPORT
SALVATION ARMY OF THE LEHIGH VALLEY 344 NORTH 7TH ST ALLENTOWN, PA 18102	13-5562351	501(C)(3)	110,370				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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SANCTUARY AT HAAFSVILLE PO BOX 921 FOGELSVILLE, PA 180510921	27-2756157	501(C)(3)	5,686				DONOR DESIGNATED FOR GENERAL SUPPORT
SCHREIBER PEDIATRIC REHAB CTR OF LANCASTER 625 COMMUNITY WAY LANCASTER, PA 176032301	23-1365369	501(C)(3)	8,265				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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SCHUYLKILL UNITED WAY 9 N CENTRE ST STE 301 POTTSVILLE, PA 179012925	23-1999071	501(C)(3)	25,854				DONOR DESIGNATED FOR GENERAL SUPPORT
SELF LV 40 S 5TH STREET ALLENTOWN, PA 18101	36-4916578	501(C)(3)	9,000				PROGRAM OPERATING COSTS

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

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SHANTHI PROJECT PO BOX 91423 ALLENTOWN, PA 18109	27-3592356	501(C)(3)	28,439				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
SHARE CARE FAITH IN ACTION 321 WYANDOTTE ST BETHLEHEM, PA 180151527	23-2635994	501(C)(3)	32,091				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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SIGHTS FOR HOPE 845 WYOMING STREET ALLENTOWN, PA 18103	23-1352260	501(C)(3)	39,544				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
SKILLSUSA COUNCIL 555 UNION BLVD ALLENTOWN, PA 18109	23-2695915	501(C)(3)	7,923				DONOR DESIGNATED FOR GENERAL SUPPORT

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SLATER FAMILY NETWORK 187 FIVE POINTS RICHMOND RD BANGOR, PA 18013	16-1672864	501(C)(3)	33,600				PROGRAM OPERATING COSTS
SOCIAL T MARKETING & PR 410 MAIN STREET HELLERTOWN, PA 18055	46-4582506		9,375				PROGRAM OPERATING COSTS

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ST BALDRICKS FOUNDATION 1333 S MAYFLOWER AVE STE 400 MONROVIA, CA 910165268	20-1173824	501(C)(3)	11,283				DONOR DESIGNATED FOR GENERAL SUPPORT
ST JUDE CHILDRENS RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 381052729	62-0646012	501(C)(3)	25,265				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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ST MICHAEL THE ARCHANGEL SCHOOL 4121 OLD BETHLEHEM PK BETHLEHEM, PA 180159097	23-2042774	501(C)(3)	12,244				DONOR DESIGNATED FOR GENERAL SUPPORT
ST THOMAS MORE CHURCH 1040 FLEXER AVE ALLENTOWN, PA 18103	23-2091672	501(C)(3)	34,738				DONOR DESIGNATED FOR GENERAL SUPPORT

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ST BENEDICT'S PREPARATORY SCHOOL 520 MARTIN LUTHER KING JR BLVD NEWARK, NJ 07102	22-1861903	501(C)(3)	17,500				DONOR DESIGNATED FOR GENERAL SUPPORT
ST HUBERT CATHOLIC HIGH SCHOOL FOR GIRLS 7320 TORRESDALE AVE PHILADELPHIA, PA 19136	23-1355131	501(C)(3)	19,688				DONOR DESIGNATED FOR GENERAL SUPPORT

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ST LUKE'S HOSPICE (VNA) 240 UNION STATION PLZ 1 BETHLEHEM, PA 180151281	24-0795497	501(C)(3)	95,810				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
ST LUKE'S HOSPITAL 801 OSTRUM ST BETHLEHEM, PA 180151014	23-1352213	501(C)(3)	336,709				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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TCC GROUP INC 333 7TH AVENUE 9TH FLOOR NEW YORK, NY 10001	23-2491136		78,158				PROGRAM OPERATING COSTS
THE BAUM SCHOOL OF ART 510 W LINDEN ST ALLENTOWN, PA 181050653	23-1607174	501(C)(3)	47,436				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CHILDREN'S CENTER VOLUNTEER OF AMERICA 730 W UNION STREET ALLENTOWN, PA 18101	13-1692595	501(C)(3)	116,023				PROGRAM OPERATING COSTS
THE CHILDREN'S HOSPITAL OF PHILADELPHIA(CHOP) 3401 CIVIC CENTER BLVD PHILADELPHIA, PA 191049829	23-1352166	501(C)(3)	7,135				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LITERACY CENTER 1132 HAMILTON ST SUITE 300 ALLENTOWN, PA 18101	22-2458322	501(C)(3)	39,228				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
THE ORTIZ ARK FOUNDATION 523 W TILGHMAN ST ALLENTOWN, PA 18102	84-3640684	501(C)(3)	9,000				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE PENNSYLVANIA SHAKESPEARE FESTIVAL 2755 STATION AVE CENTER VALLEY, PA 180349565	23-2655672	501(C)(3)	13,179				DONOR DESIGNATED FOR GENERAL SUPPORT
THE PENNSYLVANIA STATE UNIVERSITY 2809 SAUCON VALLEY ROAD CENTER VALLEY, PA 180348447	24-6000376	501(C)(3)	47,125				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE RILYC CORPORATION PO BOX 5288 BETHLEHEM, PA 18015	47-5176427	501(C)(3)	9,000				PROGRAM OPERATING COSTS
THE STATE THEATRE CENTER FOR THE ARTS 453 NORTHAMPTON ST EASTON, PA 18042	23-2173216	501(C)(3)	53,171				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THIRD STREET ALLIANCE FOR WOMEN & CHILDREN 41 N 3RD ST EASTON, PA 18042	24-0795639	501(C)(3)	145,906				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
THRIVE DC 1525 NEWTON ST NW WASHINGTON, DC 20010	52-1485474	501(C)(3)	7,731				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRANSVERSE MYELITIS ASSOC 1787 SUTTER PARKWAY POWELL, OH 43065	91-1780467	501(C)(3)	19,472				DONOR DESIGNATED FOR GENERAL SUPPORT
TROUT UNLIMITED 1777 N KENT STREET SUITE 100 ARLINGTON, VA 22209	38-1612715	501(C)(3)	5,688				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3535 MARKET ST STE 750 PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	154,943				DONOR DESIGNATED FOR GENERAL SUPPORT
TURN TO US INC 404 CENTER STREET JIM THORPE, PA 18229	47-3692383	501(C)(3)	5,000				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TURNING POINT OF LEHIGH VALLEY 444 E SUSQUEHANNA ST ALLENTOWN, PA 18103	23-2100651	501(C)(3)	126,851				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
US HUNGER 830 SOUTH RONALD REAGAN BLVD UNIT 142 LONGWOOD, FL 32750	27-3274349	501(C)(3)	10,000				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNIDOS INC 1329 HAMILTON ST FL 1 ALLENTOWN, PA 18102	83-4310898	501(C)(3)	12,000				PROGRAM OPERATING COSTS
UNITED CHURCH OF MARCO ISLAND 320 N BARFIELD DR MARCO ISLAND, FL 34145	34-1927041	501(C)(3)	5,042				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF BERKS COUNTY PO BOX 702 READING, PA 196030702	23-1655375	501(C)(3)	128,938				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF BUCKS COUNTY 413 HOOD BLVD FAIRLESS HILLS, PA 19030	23-1409706	501(C)(3)	26,410				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF CENTRAL ALABAMA INC PO BOX 320189 BIRMINGHAM, AL 352320189	63-0288846	501(C)(3)	7,500				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF COLUMBIA AND MONTOUR COUNTY PO BOX 313 BLOOMSBURG, PA 17815	24-0840626	501(C)(3)	16,973				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GLOUCESTER COUNTY 454 CROWN POINT RD THOROFARE, NJ 080862124	21-6006822	501(C)(3)	11,668				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER ATLANTA 100 EDGEWOOD AVE NE ATLANTA, GA 303033026	58-0566194	501(C)(3)	8,990				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER HAZLETON 134 S WYOMING ST HAZLETON, PA 182017084	24-0796034	501(C)(3)	22,396				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER HOUSTON 50 WAUGH DR HOUSTON, TX 77007	74-1167964	501(C)(3)	26,933				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER PHILA AND SOUTHERN NEW JERSEY 1709 BENJAMIN FRANKLIN PKWY PHILADELPHIA, PA 191031294	23-1556045	501(C)(3)	8,406				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER RICHMOND & PETERSBURG PO BOX 11807 RICHMOND, VA 23230	23-7375346	501(C)(3)	6,716				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER ST LOUIS INC 910 N 11TH ST ST LOUIS, MO 63101	43-0714167	501(C)(3)	22,872				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF KING COUNTY - WA 720 2ND AVE SEATTLE, WA 981041702	91-0565555	501(C)(3)	52,110				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF LACKAWANNA AND WAYNE COUNTIES PO BOX 526 SCRANTON, PA 185010526	24-0824164	501(C)(3)	26,769				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF LANCASTER COUNTY 1910 HARRINGTON DRIVE SUITE A LANCASTER, PA 17601	23-1352093	501(C)(3)	111,361				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF NEW YORK CITY 205 E 42ND ST NEW YORK, NY 10017	13-2617681	501(C)(3)	7,893				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF NORTHERN NEW JERSEY PO BOX 6835 BRIDGEWATER, NJ 088070835	22-1487247	501(C)(3)	6,264				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF SOUTHEAST LOUISIANA - TANGIPAHOA 411 W COLEMAN AVE HAMMOND, LA 70403	72-0471369	501(C)(3)	5,818				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF THE BRADFORD AREA PO BOX 504 BRADFORD, PA 167010504	25-0965269	501(C)(3)	11,205				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF THE CAPE FEAR AREA 5919 OLEANDER DRIVE SUITE 115 WILMINGTON, NC 28403	56-0529949	501(C)(3)	13,233				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF THE CAPITAL REGION - PA 2235 MILLENIUM WAY ENOLA, PA 170251497	23-1352095	501(C)(3)	34,681				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF WYOMING VALLEY 100 N PENNSYLVANIA AVE 2ND FLOOR WILKESBARRE, PA 18701	24-0831490	501(C)(3)	42,763				DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY SUNCOAST - TAMPA 5201 W KENNEDY BLVD STE 600 TAMPA, FL 336091820	59-3725701	501(C)(3)	30,600				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION 580 MASSIE RD CHARLOTTESVILLE, VA 229031738	54-0838566	501(C)(3)	10,500				DONOR DESIGNATED FOR GENERAL SUPPORT
VALLEY OF THE SUN UNITED WAY PO BOX 10748 PHOENIX, AZ 850640748	86-0104419	501(C)(3)	6,440				DONOR DESIGNATED FOR GENERAL SUPPORT

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

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VALLEY YOUTH HOUSE 3400 HIGH POINT BLVD BETHLEHEM, PA 180177815	23-7178820	501(C)(3)	582,576				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
VIA OF THE LEHIGH VALLEY INC 336 W SPRUCE ST BETHLEHEM, PA 180183789	23-1457999	501(C)(3)	28,415				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VIAMEDIA INC 7796 SOLUTION CENTER CHICAGO, IL 606777007	23-3094448		11,000				PROGRAM OPERATING COSTS
VICTORY HOUSE OF LEHIGH VALLEY PO BOX 5458 BETHLEHEM, PA 180155458	23-2370759	501(C)(3)	54,188				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

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VIRGINIA TECH FOUNDATION INC 902 PRICES FORK RD BLACKSBURG, VA 24061	54-0721690	501(C)(3)	78,750				DONOR DESIGNATED FOR GENERAL SUPPORT
VOA CHILDREN'S CENTER 730 W UNION ST ALLENTOWN, PA 181016328	13-1692595	501(C)(3)	5,953				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOLUNTEER CENTER OF THE LEHIGH VALLEY 25 W 3RD ST BETHLEHEM, PA 18015	23-2862188	501(C)(3)	59,830				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
WDIY 301 BROADWAY SUITE 300 BETHLEHEM, PA 18015	23-2354475	501(C)(3)	5,607				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WEST CHESTER UNIVERSITY FOUNDATION 202 CARTER DR WEST CHESTER, PA 193824972	23-3054174	501(C)(3)	5,000				DONOR DESIGNATED FOR GENERAL SUPPORT
WFMZDIGITAL 300 EAST ROCK RD ALLENTOWN, PA 18103	23-1634199		24,500				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILDLANDS CONSERVANCY 3701 ORCHID PLACE EMMAUS, PA 18049	23-7401326	501(C)(3)	241,018				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
WILKES UNIVERSITY 84 WEST SOUTH STREET WILKESBARRE, PA 18766	24-0795506	501(C)(3)	10,000				DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WILLIAM ALLEN CONSTRUCTION COMPANY 840 W HAMILTON ST ALLENTOWN, PA 18105	23-3023319	501(C)(3)	5,125				DONOR DESIGNATED FOR GENERAL SUPPORT
WORLDREADER 2030 1ST AVENUE SUITE 300 SEATTLE, WA 98121	27-2092468		30,000				PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOUNDED WARRIOR PROJECT INC 4899 BELFORT RD STE 300 JACKSONVILLE, FL 322566033	20-2370934	501(C)(3)	6,961				DONOR DESIGNATED FOR GENERAL SUPPORT
YWCA OF BETHLEHEM 3895 ADLER PL BLDG A STE 180 BETHLEHEM, PA 18017	23-6395256	501(C)(3)	61,314				DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD FEDERATION OF AMERICA 123 WILLIAMS ST 10TH FLOOR NEW YORK, NY 10038	13-1644147	501(C)(3)	6,146				DONOR DESIGNATED FOR GENERAL SUPPORT

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

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.

2020

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number
23-2657933

Part I Questions Regarding Compensation

	Yes	No								
<p>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.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax idemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table>	<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 idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees	<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<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 idemnification and gross-up payments	<input type="checkbox"/> Health or social club dues or initiation fees									
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)									
<p>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</p>	1b									
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?</p>	2									
<p>3 Indicate which, if any, of the following the filing 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.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table>	<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract	<input 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				
<input type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract									
<input 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									
<p>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:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p>	4a	No								
	4b	No								
	4c	No								
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III.</p>	5a	Yes								
	5b	No								
<p>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:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III.</p>	6a	Yes								
	6b	No								
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No								
<p>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</p>	8	No								
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9									

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.

Return Reference	Explanation
PART I, LINE 3	PRESIDENT'S ANNUAL PERFORMANCE EVALUATION - CONDUCTED BY THE BOARD CHAIR, VICE-CHAIR - PERFORMANCE METRICS DEVELOPED WITH PRESIDENT IN JUNE/JULY FOR THE NEXT FISCAL YEAR - PERFORMANCE METRICS DOCUMENTED AND APPROVED BY EXECUTIVE COMMITTEE, COPY TO HR - PERFORMANCE METRICS SHARED WITH FULL BOARD - ANNUAL PERFORMANCE EVALUATION CONDUCTED BY BOARD CHAIR AND VICE-CHAIR AT END OF FISCAL YEAR. - EVALUATION DOCUMENTED AND HIGHLIGHTS SHARED WITH EXECUTIVE COMMITTEE, COPY TO HR - EXECUTIVE COMMITTEE VOTES ON ANNUAL SALARY ADJUSTMENT - HIGHLIGHTS OF EVALUATION SHARED WITH FULL BOARD EXECUTIVE COMPENSATION & BENEFIT PACKAGE AND CONTRACT - BOARD CHAIR, VICE-CHAIR FORM A COMMITTEE TO REVIEW EXECUTIVE COMPENSATION AND BENEFITS. - COMPENSATION COMMITTEE WILL BE STAFFED BY DIRECTOR, HUMAN RESOURCES AND VP FINANCE & ADMINISTRATION. - COMMITTEE WILL REVIEW CURRENT COMPENSATION & BENEFITS PACKAGE AND COMPARE WITH LIKE-SIZED UW'S AND/OR AREA NON-PROFITS. - AN EMPLOYMENT CONTRACT WILL BE DRAFTED WITH INPUT AND REVIEW OF COUNSEL. - EMPLOYMENT CONTRACT IS PRESENTED TO THE EXECUTIVE COMMITTEE FOR APPROVAL. EXECUTIVE COMMITTEE VOTES TO RECOMMEND CONTRACT FOR APPROVAL BY BOARD. - BOARD REVIEWS AND VOTES TO APPROVE CONTRACT, INCLUDING AUTHORIZING UP TO A 10% VARIANCE IN TOTAL CONTRACT VALUE FOR NEGOTIATION WITH EMPLOYEE. - BOARD CHAIR AND/OR VICE-CHAIR PRESENT CONTRACT TO PRESIDENT. PRESIDENT SHALL PRESENT CONTRACT FOR ALL OTHER EMPLOYEES. - EMPLOYEE MUST SEEK OUTSIDE LEGAL COUNSEL FOR REVIEW OF CONTRACT. - IF CONTRACT REVISIONS ARE NEEDED THEY ARE REVIEWED AND APPROVED BY UWGLV COUNSEL. - CONTRACT IS SIGNED BY EMPLOYEE, BOARD CHAIR, VICE-CHAIR AND VP FINANCE & ADMINISTRATION - COPY OF FULLY EXECUTED CONTRACT TO HR. DETAILS OF CONTRACT ARE CONFIDENTIAL AND WILL NOT BE SHARED OUTSIDE OF THE BOARD OF DIRECTORS. -ALL EMPLOYMENT CONTRACTS SHALL FOLLOW THIS PROCESS WITH INPUT FROM THE PRESIDENT FOR ANY OF HIS/HER DIRECT REPORTS.
PART I, LINE 5	ALL EMPLOYEES PARTICIPATE IN A VARIABLE PAY INCENTIVE PROGRAM WHICH ONE OF THE PROGRAM REQUIREMENTS IS TOTAL CAMPAIGN REVENUE RAISED.
PART I, LINE 6	ALL EMPLOYEES PARTICIPATE IN A VARIABLE PAY INCENTIVE PROGRAM WHICH ONE OF THE PROGRAM REQUIREMENTS IS TOTAL CAMPAIGN REVENUE RAISED.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

2020

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 the latest information.**

Name of the organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number
23-2657933

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	37	1,287,703	FMV AT DATE OF GIFT
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 IV, 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 three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II.			
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
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.			

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.

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2020

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

▶ Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

Department of the Treasury

Name of the organization

UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number

23-2657933

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IV, LINE 28A	<p>THE FOLLOWING BOARD MEMBERS HAVE RELATIONSHIPS WITH ORGANIZATIONS THAT CONDUCT BUSINESS WITH UWGLV, HOWEVER ARE UNDER THE REPORTING THRESHOLD FOR SCHEDULE L. THE RELATIONSHIPS ARE BEING NOTED AS SUPPLEMENTARY INFORMATION. THE BOARD MEMBERS ABSTAIN FROM VOTING ON BUSINESS TRANSACTIONS OR GRANTS AWARDS WHEN THEY HAVE A CONFLICT OF INTEREST. - BOARD MEMBER ASHLEY RUSSO IS OWNER OF ASR MEDIA WITH WHOM THE ORGANIZATION CONDUCTS BUSINESS WITH; - BOARD MEMBER DOROTA GASINICA-KOZAK IS A PARTNER AT KING, SPRY, HERMAN, FREUND & FAUL LLC WITH WHOM THE ORGANIZATION CONDUCTS BUSINESS WITH; - BOARD MEMBER TRISHA HIGGINS IS VP AND CFO OF THE LEHIGH VALLEY COMMUNITY FOUNDATION WITH WHOM THE ORGANIZATION PARTNERS WITH ON COMMUNITY INITIATIVES - BOARD MEMBER DR. DONALD OUTING IS VP FOR EQUITY AND COMMUNITY AT LEHIGH UNIVERSITY WITH WHOM THE ORGANIZATION FUNDS PROGRAMS SERVING STUDENTS IN THE BETHLEHEM AREA SCHOOL DISTRICT - BOARD MEMBER THOMAS PARKER IS SUPERINTENDENT OF ALLENTOWN SCHOOL DISTRICT WITH WHOM THE ORGANIZATION FUNDS PROGRAMS SERVING THE STUDENTS IN THIS DISTRICT - BOARD MEMBER DIANA LAQUINTA IS VP NETWORK OPERATIONS AT ST. LUKE'S UNIVERSITY HEALTH NETWORK WITH WHOM THE ORGANIZATION FUNDS PROGRAMS SERVING STUDENTS IN THE BETHLEHEM AREA SCHOOL DISTRICT - BOARD MEMBER JOSEPH ROY IS SUPERINTENDENT OF BETHLEHEM AREA SCHOOL DISTRICT WITH WHOM THE ORGANIZATION FUNDS PROGRAMS SERVING THE STUDENTS IN THIS DISTRICT</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	THE BYLAWS WERE UPDATED IN DECEMBER 2020.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS AND FEEDBACK SOLICITED PRIOR TO SUBMITTING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ALL VOLUNTEERS AND EMPLOYEES ARE ASKED TO SIGN A CONFLICT OF INTEREST DISCLOSURE FORM. QUESTIONS ABOUT POTENTIAL CONFLICTS OF INTEREST ARE DIRECTED TO THE CHIEF VOLUNTEER OFFICER OR DESIGNEE BY VOLUNTEERS AND TO THE PRESIDENT BY STAFF. THE CHIEF VOLUNTEER OFFICER IS RESPONSIBLE FOR MONITORING POLICY COMPLIANCE AMONG VOLUNTEERS AND FOR TAKING CORRECTIVE ACTION CONCERNING VIOLATION. THE PRESIDENT IS RESPONSIBLE IN A SIMILAR MANNER FOR STAFF.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	EXECUTIVE COMPENSATION & BENEFIT PACKAGE AND CONTRACT -BOARD CHAIR, VICE-CHAIR FORM A COMMITTEE TO REVIEW EXECUTIVE COMPENSATION AND BENEFITS. -COMPENSATION COMMITTEE WILL BE STAFFED BY DIRECTOR, HUMAN RESOURCES AND VP FINANCE & ADMINISTRATION. -COMMITTEE WILL REVIEW CURRENT COMPENSATION & BENEFITS PACKAGE AND COMPARE WITH LIKE-SIZED UW'S AND/OR AREA NON-PROFITS. -AN EMPLOYMENT CONTRACT WILL BE DRAFTED WITH INPUT AND REVIEW OF COUNSEL. -EMPLOYMENT CONTRACT IS PRESENTED TO THE EXECUTIVE COMMITTEE FOR APPROVAL. EXECUTIVE COMMITTEE VOTES TO RECOMMEND CONTRACT FOR APPROVAL BY BOARD. -BOARD REVIEWS AND VOTES TO APPROVE CONTRACT, INCLUDING AUTHORIZING UP TO A 10% VARIANCE IN TOTAL CONTRACT VALUE FOR NEGOTIATION WITH EMPLOYEE. -BOARD CHAIR AND/OR VICE-CHAIR PRESENT CONTRACT TO PRESIDENT. PRESIDENT SHALL PRESENT CONTRACT FOR ALL OTHER EMPLOYEES. -EMPLOYEE ADVISED TO SEEK OUTSIDE LEGAL COUNSEL FOR REVIEW OF CONTRACT. -IF CONTRACT REVISIONS ARE NEEDED THEY ARE REVIEWED AND APPROVED BY UWGLV COUNSEL. -CONTRACT IS SIGNED BY EMPLOYEE, BOARD CHAIR, VICE-CHAIR AND VP FINANCE & ADMINISTRATION -COPY OF FULLY EXECUTED CONTRACT TO HR. DETAILS OF CONTRACT ARE CONFIDENTIAL AND WILL NOT BE SHARED OUTSIDE OF THE BOARD OF DIRECTORS. -ALL EMPLOYMENT CONTRACTS SHALL FOLLOW THIS PROCESS WITH INPUT FROM THE PRESIDENT FOR ANY OF HIS/HER DIRECT REPORTS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC THROUGH THE ORGANIZATION'S WEB SITE, GUIDESTAR, CHARITY NAVIGATOR AND UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE AND UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	UNREALIZED GAINS ON BENEFICIAL INTEREST IN PERPETUAL TRUSTS 456,900. CHANGE IN VALUE OF SP LIT INTEREST AGREEMENTS 11,510. UNREALIZED GAINS ON INVESTMENT IN INSURANCE TRUST 3,295.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2020

Open to Public Inspection

▶ **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.**

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number
23-2657933

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
(1) UNITED WAY SERVICES INC 1110 AMERICAN PARKWAY NE ALLENTOWN, PA 18109 23-3025771	SECURING RESOURCES TO DEVELOP HUMAN SERVICES INITIATIVES IN LEHIGH VALLEY	PA	501(C)(3)	170(B)(1)(A)	N/A		No

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.

	Yes	No
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?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a	No
b Gift, grant, or capital contribution to related organization(s)	1b	No
c Gift, grant, or capital contribution from related organization(s)	1c	No
d Loans or loan guarantees to or for related organization(s)	1d	No
e Loans or loan guarantees by related organization(s)	1e	No
f Dividends from related organization(s)	1f	No
g Sale of assets to related organization(s)	1g	No
h Purchase of assets from related organization(s)	1h	No
i Exchange of assets with related organization(s)	1i	No
j Lease of facilities, equipment, or other assets to related organization(s)	1j	No
k Lease of facilities, equipment, or other assets from related organization(s)	1k	No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m	No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes
o Sharing of paid employees with related organization(s)	1o	Yes
p Reimbursement paid to related organization(s) for expenses	1p	No
q Reimbursement paid by related organization(s) for expenses	1q	No
r Other transfer of cash or property to related organization(s)	1r	No
s Other transfer of cash or property from related organization(s)	1s	No

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 SERVICES INC	N	0	
(2) UNITED WAY SERVICES INC	O	0	

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. (see instructions).

Return Reference	Explanation