

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning \_\_\_\_\_, 2018, and ending \_\_\_\_\_, 20\_\_

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

A Check box if address changed

B Exempt under section 501(c) (3) 408(e) 220(e) 408A 530(a) 529(a)

Name of organization UNITED WAY OF VANCE COUNTY INC Number, street, and room or suite no PO BOX 1352 City or town, state or province, country, and ZIP or foreign postal code HENDERSON, NC 27536

D Employer identification number 23-7123784

E Unrelated business activity code

C Book value of all assets at end of year 65,390

F Group exemption number G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses. 0 Describe the only (or first) unrelated trade or business here

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-sub subsidiary controlled group? Yes X No

J The books are in care of TERRI HEDRICK Telephone number (252) 492-8392

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows 1a-13.

Part III Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income)

Table with 2 columns: Description, Amount. Rows 14-32. Includes handwritten value 102819 on line 16.

For Paperwork Reduction Act Notice, see instructions. Form 990-T (2018)

SCANNED DEC 12 2019

D 990EZ 102819

P

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Lines 33-38.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Lines 39-44.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Lines 45a-55.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, and Yes/No response. Questions 56-58.

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 taxpayer) is based on all information of which preparer has any knowledge

Sign Here: Signature of officer (Jane Haetncock), Date (10-23-19), Title (PRESIDENT)

Paid Preparer Use Only: Preparer's name (Jessica M Currin), Date (10-22-2019), Firm's name (Vance Financial Services Inc), Firm's address (PO Box 439, Henderson NC 27536), Firm's EIN (P00722177), Phone no (252-438-3115)