ug Carrier 1		MENDED DE	mrrbri (IDOM)	T () NT	E10/3\/	7 \ DI	19	DO,	7	
Form 990-T	1 6	amended Re Exempt Orga	TURN - SECT						OMB No 1545-0	0687
Form 330-1	*		and proxy tax und				ax netum	' ├─		<u> </u>
4	For ca	lendar year 2018 or other tax ye	•		•		30, 201	ا و	201	ጸ
Department of the Treasury			v.irs.gov/Form990T for in			_		_ L		
Internal Revenue Service		Do not enter SSN number	ers on this form as it may	be mad	de public if your	organizat	ion is a 501(c)(3).	50	pen to Public Insp 01(c)(3) Organization	ons Only
A Check box if address changed		Name of organization (Check box if name of	hanged	and see instruct	ions.)		(Employ	er identification nu yees' trust, see	ımber
	↓	IDITORD MAY	OF GENERAL	C A D C	Y TNIN (1	TNO		instruct	•	40
B Exempt under section X 501(C)(3)	Print		OF CENTRAL			INC.		56-0529948 F Unrelated business activity code		
408(e) 220(e)	Туре	Number, street, and roor 601 E. FIFT		x, 566 III	structions.			(See ins	structions)	
408A 530(a)			ovince, country, and ZIP o	r foreiar	n postal code	· · · · · · · · · · · · · · · · · · ·				
529(a)	<u> </u>	CHARLOTTE,			·			8129	30	
C Book value of all assets at end of year		F Group exemption num								
		G Check organization typ		4		c) trust	401(a)		Other	r trust
H Enter the number of the	-	tion's unrelated trades or	businesses.	1			ne only (or first) un	,	h	
trade or business here		ce at the end of the previo	us cantonea complete Pa	rte Land			omplete Parts I-V.		-	
business, then complete	_	•	us semence, complete ra	i is i and	i ii, compiete a c	Schedule IV	A TOT GACTI AUUTUONA	i liaue u	ı	
		oration a subsidiary in an	affiliated group or a parer	nt-subsid	diary controlled	group?	▶ [Yes	X No	
		ifying number of the parei								
J The books are in care of		B					ne number 🕨			
<u> </u>		le or Business Inc	ome		(A) Incom	ie	(B) Expenses		(C) Net	 -
1a Gross receipts or sale b Less returns and allow			c Balance	,						
2 Cost of goods sold (S		A line 7)	C Dalance	1c 2		- 		\rightarrow		 -i
3 Gross profit. Subtract		•	\bigcap	3			·			
4a Capital gain net incon			(01)	4a						
b Net gain (loss) (Form	4797, P	art II, line 17) (attach Forn	n 4797)	4b						
c Capital loss deduction				4c		<u> </u>		\rightarrow		
, ,		hip or an S corporation (a	ttach statement)	5		 -		-		
6 Rent income (Schedu7 Unrelated debt-financ	•	ne (Schedule F)		7				+		
		nd rents from a controlled	organization (Schedule F)	8						
		n 501(c)(7), (9), or (17) o	-	9						
10 Exploited exempt acti	vity inco	me (Schedule I)		10						
11 Advertising income (S		,		11		1.60				
12 Other income (See in:		0, 2112011 001100010)	PATEMENT 2	12		L60.				<u>160.</u>
13 Total. Combine lines Part II Deductio	ns No	t Taken Elsewher	e (See instructions fo	13 I	tions on deduc	tions)				L60.
		itions, deductions must					icome)			
14 Compensation of off	icers, dii	ectors, and trustees (Sche	edule K)					14		
15 Salaries and wages			DEOF					15		
16 Repairs and mainten	ance		RECEI	/EL)			16		
17 Bad debts	ما المانية		ις.		781			17		
18 Interest (attach sche19 Taxes and licenses	oule) (Se	e instructions)	MAR 02	2021	RS-O		ł	18		
	ons (See	instructions for limitation	rules		<u> 기</u> 꺒[20		0.
21 Depreciation (attach			OGDEN	. U1	[2	1				
22 Less depreciation cla	amed on	Schedule A and elsewher						22b		
23 Depletion							ĺ	23		
24 Contributions to defe		npensation plans						24		
25 Employee benefit pro	-	hadula I\					}	25	 _	
26 Excess exempt exper27 Excess readership co	•	•					}	26		
28 Other deductions (at		•			SEE	STATE	MENT 3	28	4.9	75.
29 Total deductions. A		•					-	29		75.
		come before net operating	loss deduction. Subtract	line 29	from line 13			30		315.
		oss arīsing in tax years beģ		y 1, 201	8 (see instruction	ins)		31		
		come. Subtract line 31 fro						32		115.
823701 01-09-19 LHA Fo	r Paperv	vork Reduction Act Notice	, see instructions.						Form 990-T	(2018)

Form 990-T		6-052	9948	Page 2
Part I	I. Total Unrelated Business Taxable Income			
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)		33	-8 <u>15</u> .
34	Amounts paid for disallowed fringes		34	
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)		35	
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the sum of			
	lines 33 and 34		36	-815 [.]
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)		37	1,000.
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line 36,			
	enter the smaller of zero or line 36		38	-815.
Part I	V Tax Computation			
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0.21)	•	39	0.
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:			
	Tax rate schedule or Schedule D (Form 1041)	•	40	
41	Proxy tax. See instructions	•	41	
42	Alternative minimum tax (trusts only)		42	
43	Tax on Noncompliant Facility Income. See instructions		43	
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies		44	0.
Part V	Tax and Payments			
45a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116) 45a]	
b	Other credits (see instructions) 45b		1 1	
C	General business credit. Attach Form 3800 45c			
d	Credit for prior year minimum tax (attach Form 8801 or 8827)			
е	Total credits. Add lines 45a through 45d		45e	
46	Subtract line 45e from line 44		46	0.
47	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attac	h schedule)	47	
48	Total tax. Add lines 46 and 47 (see instructions)		48	0.
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2		49	0.
50 a	Payments: A 2017 overpayment credited to 2018		<u> </u>	
b	2018 estimated tax payments 50b]	
C	Tax deposited with Form 8868 50c]	
d	Foreign organizations: Tax paid or withheld at source (see instructions) 50d]	
е	Backup withholding (see instructions) 50e			
f	Credit for small employer health insurance premiums (attach Form 8941) 50f			
g	Other credits, adjustments, and payments: Form 2439			
		<u>,871.</u>		
51	Total payments. Add lines 50a through 50g SEE STATEMENT 4		51	<u>6,871.</u>
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached 🕨 📖		52	
	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		53	
	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid		54	6,871.
	Enter the amount of line 54 you want: Credited to 2019 estimated tax		55	6,871.
Part V		ıs)		
	At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority			Yes No
	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file			
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country			<u></u> - - <u>-</u> -
	here			X
	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign	trust?		X
	If "Yes," see instructions for other forms the organization may have to file.			
58	Enter the amount of tax-exempt interest received or accrued during the tax year >\$			1
Sign	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	of my knowled	ige and belief, it	is true,
Here	1/12/2021 ▶ President & CFO	Me	ay the IRS discu	ss this return with
TICIC	Signature of officer Date 1/12/2021 President & CEO Title		e preparer show	[
			structions)?	Yes No
	Print/Type preparer's name Preparer's signature Chec		f PTIN	
Paid		employed	D015	06766
Prepa				06766
Use O		n's EIN ►	4 <u>1</u> -0	746749
	227 WEST TRADE STREET, SUITE 800		04 000	E200
	Firm's address ► CHARLOTTE, NC 28202 Pho	ine no. /	<u>04-998</u>	-3200

Schedule A - Cost of Goods	Sold. Enter	method of inven	tory valuation N/				
Inventory at beginning of year	1	metriod or invers	6 Inventory at end of ye	_	·	6	
2 Purchases	2		7 Cost of goods sold.		line 6		—
3 Cost of labor	3		from line 5. Enter her				
4a Additional section 263A costs			line 2	o dilo ini i	i di ti,	7	
(attach schedule)	4a		8 Do the rules of section	n 2634 /	with respect to		No
b Other costs (attach schedule)	4b		property produced or	•	,	1.00	<u> </u>
5 Total. Add lines 1 through 4b	5	-	the organization?	acquirec	i toi resale) apply to	 -	
Schedule C - Rent Income (Property and		Lease	d With Real Prop	erty)	
(see instructions)	· · · · · · · · · · · · · · · · · · ·	roperty and	r croonar r roporty	_0000	a will real rop		
Description of property							
(1)		<u></u>			·		—
(2)					·		
(3)							
(4)							
	2. Rent receive	ed or accrued					
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	entage of than	` of rent for p	nd personal property (if the percent ersonal property exceeds 50% or if t is based on profit or income)	tage	3(a) Deductions directly columns 2(a) ar	connected with the income in and 2(b) (attach schedule)	
(1)					 		
(2)			 				
(3)				_			_
(4)				_		·	
Total	0.	Total		0.			
(c) Total income. Add totals of columns 2	2(a) and 2(b). En	er	 		(b) Total deductions.		
here and on page 1, Part I, line 6, column				0.	Enter here and on page 1, Part I, line 6, column (B)	>	ο.
Schedule E - Unrelated Deb		Income (see	instructions)		<u> </u>	<u></u>	_
			2. Gross income from		3. Deductions directly con- to debt-finance		_
1. Description of debt-fine	anced property		or allocable to debt- financed property	(a)	Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				+			—
(2)				1			
(3)				1			
(4)				1			
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	of or a debt-finar	adjusted basis llocable to ced property schedule)	6. Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of column 3(a) and 3(b))	
(1)			%				_
(2)			%				_
(3)			%				_
(4)			%		<u>.</u>		
					nter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)	
Totals			•	·	0.).
Total dividends-received deductions inc	cluded in column	8).
						Form 990-T (20	1181

Form 990-T (2018) UNITED WAY OF CENTRAL CAROLINAS, INC. 56-05299
[Partill Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in còlumns 2 through 7 on a line-by-line basis)

	 i		· ·			
1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cots 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)	0.	0.				ll o

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

Form 990-T (2018)

FORM 990-T	OTHER	INCOME	STATEMENT 2
DESCRIPTION			AMOUNT
PARKING INCOME			4,160.
TOTAL TO FORM 990-T,	PAGE 1, LINE 12		4,160.
FORM 990-T	OTHER	DEDUCTIONS	STATEMENT 3
DESCRIPTION			AMOUNT
PARKING EXPENSES			4,975.
TOTAL TO FORM 990-T,	PAGE 1, LINE 28		4,975.
FORM 990-T	OTHER CREDITS	S AND PAYMENTS	STATEMENT 4
DESCRIPTION		- · · · · · · · · · · · · · · · · · · ·	AMOUNT
TAXES PAID WITH ORGIN	NAL RETURN		6,871.
TOTAL INCLUDED ON FOR	RM 990-T. PAGE 2.	PART V. LINE 50G	6,871.

FOOTNOTES

STATEMENT 1

THE 2017 TAX CUTS AND JOBS ACT CREATED IRC SEC. 512(A)(7) WITH AN ENACTMENT DATE OF JANUARY 1, 2018.

IRC SEC. 512(A)(7) DEFINED THE CONCEPT OF "DISALLOWED FRINGE BENEFITS" AND REQUIRED THAT THESE EXPENSES BE INCLUDED IN UNRELATED BUSINESS TAXABLE INCOME. THE TAXPAYER CERTAINTY AND DISASTER RELIEF ACT OF 2019, SIGNED ON DECEMBER 20, 2019, REPEALED IRC SEC. 512(A)(7) RETROACTIVELY BACK TO ITS ORIGINAL ENACTMENT; AS SUCH THIS AMENDMENT IS BEING FILED TO REMOVE THE DISALLOWED FRINGE BENEFITS WHICH ARE NO LONGER INCLUDED IN UNRELATED BUSINESS INCOME AND NO LONGER SUBJECT TO INCOME TAX.

THE FOLLOWING LINES ON FORM 990-T HAVE BEEN CHANGED:

PART II LINE 20 DECREASED FROM \$3,558 TO \$0

PART II LINE 29 DECREASED FROM \$8,533 TO \$4,975

PART II LINES 30 AND 32 INCREASED FROM -\$4,373 TO -\$815

PART III LINE 33 INCREASED FROM -\$4,373 TO -\$815

PART III LINE 34 DECREASED FROM \$37,398 TO \$0

PART III LINE 36 DECREASED FROM \$33,025 TO -\$815

PART III LINE 38 DECREASED FROM \$32,025 TO -\$815

PART IV LINES 39 AND 44 DECREASED FROM \$6,725 TO \$0

PART V LINES 46 AND 48 DECREASED FROM \$6,725 TO \$0

PART V LINES 50G AND 51 INCREASED FROM \$0 TO \$6,871

PART V LINE 52 DECREASED FROM \$146 TO \$0

PART V LINE 53 DECREASED FROM \$6,871 TO \$0

PART V LINES 54 AND 55 INCREASED FROM \$0 TO \$6,871

A REFUND OF \$6,871 IS BEING REQUESTED WITH THIS RETURN.