

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
2019
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 07-01-2019, and ending 06-30-2020

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

C Name of organization
UNITED WAY OF TARRANT COUNTY

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1500 NORTH MAIN STREET NO 200

City or town, state or province, country, and ZIP or foreign postal code
FORT WORTH, TX 76164

D Employer identification number
75-0858360

E Telephone number
(817) 258-8000

F Name and address of principal officer:
JEFFREY ALLISON
1500 NORTH MAIN STREET NO 200
FORT WORTH, TX 76164

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 ▶

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

J Website: ▶ WWW.UNITEDWAYTARRANT.ORG

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1922 **M** State of legal domicile: TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
PROVIDE LEADERSHIP AND HARNESS RESOURCES TO SOLVE TARRANT COUNTY'S TOUGHEST SOCIAL CHALLENGES.

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)	39
4 Number of independent voting members of the governing body (Part VI, line 1b)	39
5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	87
6 Total number of volunteers (estimate if necessary)	2,439
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 39	0

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	22,128,074	22,463,438
9 Program service revenue (Part VIII, line 2g)	502,987	493,971
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,570,484	367,592
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	96,806	61,095
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	24,298,351	23,386,096
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	17,587,489	17,706,729
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)	5,224,320	6,049,429
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 2,329,682		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,361,286	3,338,213
18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	27,173,095	27,094,371
19 Revenue less expenses. Subtract line 18 from line 12	-2,874,744	-3,708,275
	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	21,924,009	22,618,572
21 Total liabilities (Part X, line 26)	6,216,172	10,793,866
22 Net assets or fund balances. Subtract line 21 from line 20	15,707,837	11,824,706

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: 2021-02-09
JEFFREY ALLISON EVP AND CFO
Type or print name and title

Paid Preparer Use Only
Print/Type preparer's name Preparer's signature Date
Firm's name ▶ WHITLEY PENN LLP Firm's EIN ▶ 75-2393478
Firm's address ▶ 640 TAYLOR STREET SUITE 2200 Phone no. (817) 259-9100
FT WORTH, TX 76102

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:

AS A NONPROFIT LEADER, WE BRING TOGETHER INDIVIDUALS, GROUPS, DONORS AND SERVICE PROVIDERS TO HELP SOLVE SOME OF THE TOUGHEST SOCIAL ISSUES AFFECTING TARRANT COUNTY. EACH YEAR, UNITED WAY OF TARRANT COUNTY HELPS MORE THAN 300,000 PEOPLE THROUGH ITS RESOURCES. UNITED WAY OF TARRANT COUNTY HAS NO FEES ON DONOR DESIGNATIONS, WITH 100 PERCENT OF THE DONATION GOING TO THE SELECTED AGENCY OR CAUSE.

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 \$ 6,722,461 including grants of \$ 5,059,800) (Revenue \$ 494,005)

See Additional Data

4b (Code:) (Expenses \$ 8,941,470 including grants of \$ 6,119,906) (Revenue \$)

See Additional Data

4c (Code:) (Expenses \$ 5,487,648 including grants of \$ 5,060,413) (Revenue \$)

See Additional Data

(Code:) (Expenses \$ 1,466,610 including grants of \$ 1,466,610) (Revenue \$)

EMERGENCY RELIEF FUNDS:THE HEALTH AND WELL-BEING OF OUR COMMUNITY IS A TOP PRIORITY AT UNITED WAY OF TARRANT COUNTY. THE UNPRECEDENTED ACTIONS TO STOP THE SPREAD OF COVID-19 HAVE LEFT LARGE POPULATIONS IN NEED OF SOCIAL SERVICES AND FINANCIAL ASSISTANCE. FUNDS WERE RAISED AND RAPIDLY DISTRIBUTED THROUGH THE EMERGENCY RELIEF FUND TO PROVIDE BASIC NEEDS, FOOD, FINANCIAL ASSISTANCE, VETERANS ASSISTANCE, AND PERSONAL PROTECTIVE EQUIPMENT.TOTAL NUMBER OF GRANTEES: 109

4d Other program services (Describe in Schedule O.)
(Expenses \$ 1,466,610 including grants of \$ 1,466,610) (Revenue \$)

4e Total program service expenses 22,618,189

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? If "Yes," complete Schedule D, Part V	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
11a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	Yes	
11b	Did the organization report an amount for investments—other securities—in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		No
11c	Did the organization report an amount for investments—program related—in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		No
11d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	Yes	
11e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	Yes	
11f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	Yes	
12b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
14b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		No
20b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	Yes	

Part IV Checklist of Required Schedules (continued)

Table with 3 main columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and reporting obligations.

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, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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 (39), 1b (39), 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
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:

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a 129,152			
	b Membership dues	1b			
	c Fundraising events	1c 231,958			
	d Related organizations	1d			
	e Government grants (contributions)	1e 8,091,668			
	f All other contributions, gifts, grants, and similar amounts not included above	1f 14,010,660			
	g Noncash contributions included in lines 1a - 1f:\$	1g 97,619			
	h Total. Add lines 1a-1f		22,463,438		

Program Service Revenue			(A)	(B)	(C)	(D)
		Business Code				
2a SERVICE CENTER RENTAL		531120	492,105	492,105		
b PROGRAM AND WORKSHOP FEES		900099	1,866	1,866		
c						
d						
e						
f All other program service revenue.						
g Total. Add lines 2a-2f.			493,971			

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		482,493			482,493		
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties		107,568			107,568		
	6a Gross rents	6a	(i) Real					
			(ii) Personal					
			b Less: rental expenses	6b				
			c Rental income or (loss)	6c				
	d Net rental income or (loss)							
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities	1,246,203				
			(ii) Other					
			b Less: cost or other basis and sales expenses	7b	1,358,236	2,868		
			c Gain or (loss)	7c	-112,033	-2,868		
	d Net gain or (loss)			-114,901		-114,901		
	8a Gross income from fundraising events (not including \$ 231,958 of contributions reported on line 1c). See Part IV, line 18	8a		0				
			b Less: direct expenses	8b	68,022			
	c Net income or (loss) from fundraising events			-68,022		-68,022		
	9a Gross income from gaming activities. See Part IV, line 19	9a						
			b Less: direct expenses	9b				
	c Net income or (loss) from gaming activities							
	10a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold			10b					
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	Business Code							
11a MISCELLANEOUS INCOME	900099		21,515		21,515			
b SALE OF T-SHIRTS	900099		34	34				
c								
d All other revenue								
e Total. Add lines 11a-11d			21,549					
12 Total revenue. See instructions			23,386,096	494,005	0	428,653		

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	16,524,982	16,524,982		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	1,181,747	1,181,747		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,483,853	558,266	702,243	223,344
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	3,321,599	2,090,544	366,453	864,602
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	554,422	361,896	76,728	115,798
9 Other employee benefits	302,142	157,910	84,804	59,428
10 Payroll taxes	387,413	217,022	81,603	88,788
11 Fees for services (non-employees):				
a Management	1,106,519	485,430	273,747	347,342
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12 Advertising and promotion	67,152	12,653		54,499
13 Office expenses	42,200	16,571	22,989	2,640
14 Information technology				
15 Royalties				
16 Occupancy	683,312	449,468	20,659	213,185
17 Travel	57,418	39,725	3,359	14,334
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	210,598	75,542	35,433	99,623
20 Interest				
21 Payments to affiliates	314,182	101,535	98,729	113,918
22 Depreciation, depletion, and amortization	72,367	3,853	65,929	2,585
23 Insurance	168,960	43,589	54,765	70,606
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 BUILDING MAINTENANCE	425,342	233,134	180,801	11,407
b TELEPHONE	91,036	33,739	48,045	9,252
c SUBSCRIPTIONS	39,724	4,587	7,401	27,736
d MEMBERSHIP DUES	27,460	8,029	16,061	3,370
e All other expenses	31,943	17,967	6,751	7,225
25 Total functional expenses. Add lines 1 through 24e	27,094,371	22,618,189	2,146,500	2,329,682
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	3,582,786	2	8,647,760
	3 Pledges and grants receivable, net	4,517,144	3	2,885,785
	4 Accounts receivable, net	1,978,398	4	1,207,046
	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	10,000	7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	79,673	9	110,375
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	693,694		
	b Less: accumulated depreciation	448,786		
	11 Investments—publicly traded securities	1,944,760	11	2,136,106
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	9,551,340	15	7,386,592
16 Total assets. Add lines 1 through 15 (must equal line 34)	21,924,009	16	22,618,572	
Liabilities	17 Accounts payable and accrued expenses	1,929,415	17	2,128,429
	18 Grants payable		18	
	19 Deferred revenue	356,379	19	37,368
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D	3,930,378	25	8,628,069
	26 Total liabilities. Add lines 17 through 25	6,216,172	26	10,793,866
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	8,205,900	27	3,950,379
	28 Net assets with donor restrictions	7,501,937	28	7,874,327
	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	15,707,837	32	11,824,706	
33 Total liabilities and net assets/fund balances	21,924,009	33	22,618,572	

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	23,386,096
2	Total expenses (must equal Part IX, column (A), line 25)	2	27,094,371
3	Revenue less expenses. Subtract line 2 from line 1	3	-3,708,275
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15,707,837
5	Net unrealized gains (losses) on investments	5	-149,214
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	-25,642
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,824,706

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	

Additional Data

Software ID:

Software Version:

EIN: 75-0858360

Name: UNITED WAY OF TARRANT COUNTY

Form 990 (2019)

Form 990, Part III, Line 4a:

SCALABLE COMMUNITY CHANGE & SYSTEM CHANGE INITIATIVES:UNITED WAY OF TARRANT COUNTY CREATES AND FINANCIALLY SUPPORTS A SMALL NUMBER OF COMPREHENSIVE INITIATIVES THAT ADDRESS TOP COMMUNITY PROBLEMS IDENTIFIED IN THE 2019 UWTC COMMUNITY ASSESSMENT. THESE INITIATIVES ARE DESIGNED TO ADDRESS ROOT CAUSES OF SIGNIFICANT SOCIAL ISSUES AND TO AFFECT COMMUNITY CHANGE. SCALABLE COMMUNITY CHANGE INVOLVES PROGRAMMATIC WORK THAT IS TESTED, EVIDENCE-BASED AND REPLICABLE, THAT IS DESIGNED TO AFFECT COMMUNITIES THROUGH SPECIFIC OUTCOME MEASURES, NOT JUST OUTPUTS. SYSTEMS CHANGE INVOLVES APPROACHES THAT TARGET THE ROOT CAUSES, OR DETERMINANTS, OF SOCIAL PROBLEMS AND PROVIDES EFFECTIVE ACTIVITIES AND FUNDING TO SOLVE THE PROBLEM. IN FY 2020, UWTC FUNDED 12 SCALABLE COMMUNITY CHANGE AND 4 SYSTEM CHANGE INITIATIVES.

Form 990, Part III, Line 4b:

AREA AGENCY ON AGING:UNITED WAY OF TARRANT COUNTY'S AREA AGENCY ON AGING (AAA) IS ONE OF 28 AAAS IN TEXAS SUPPORTED BY STATE AND FEDERAL FUNDS FOR OLDER ADULT SERVICES. THESE FUNDS ARE AUTHORIZED BY THE OLDER AMERICANS ACT AND THE STATE OF TEXAS LEGISLATURE. LOCAL VOLUNTEERS IN TARRANT COUNTY PLAN FOR SERVICE NEEDED AND DISTRIBUTE FUNDS FOR PROGRAMS. UNITED WAY OF TARRANT COUNTY'S AAA PROGRAMS HELP TO PROMOTE EMPOWERMENT, INDEPENDENCE AND DIGNITY FOR OLDER ADULTS AND THEIR CAREGIVERS AND HAS PROVEN TO HELP OLDER ADULTS REMAIN IN THEIR HOMES FOR AS LONG AS POSSIBLE. ADDITIONAL FUNDING IS PROVIDED BY THE US ADMINISTRATION FOR COMMUNITY LIVING, US HEALTH RESOURCES AND SERVICES ADMINISTRATION AND TEXAS HEALTH RESOURCES.

Form 990, Part III, Line 4c:

AGENCY ALLOCATIONS: UNITED WAY OF TARRANT COUNTY FINANCIALLY SUPPORTS NUMEROUS EFFORTS TARGETING AND ADDRESSING THE FIVE FOCUS AREAS OF NEED OUTLINED IN OUR LATEST COMMUNITY ASSESSMENT. THROUGH MONITORING AND CAREFUL EXAMINATION OF PROGRAM OUTCOMES, UNITED WAY OF TARRANT COUNTY DETERMINES THE SPECIFIC LEVEL OF FUNDING FOR EACH OF THESE PROGRAMS, BASED ON TOTAL FUNDS AVAILABLE THROUGH OUR ANNUAL WORKPLACE CAMPAIGN. TOTAL NUMBER OF GRANTEES: 36 (COVERS 47 PROGRAMS)

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			
TD SMYERS PARTIAL YEAR PRESIDENT & CEO	40.00			X				271,884	0	21,739
LEAH KING PARTIAL YEAR PRESIDENT & CEO	40.00			X				179,456	0	25,782
BEVERLY BOYD CORPORATE SECRETARY	40.00			X				70,030	0	5,520
MICHELLE BLEIBERG EVP & CCMO	40.00			X				125,416	0	18,152
JEFFREY ALLISON EVP & CFO	40.00			X				174,269	0	12,994
CAROLYN GALVAN PARTIAL YEAR VP & CONTROLLER	40.00			X				65,700	0	4,005
SOMMER STEELEPARTIAL YEAR VP & CONTROLLER	40.00			X				9,132	0	667
ELIZABETH WATSON EVP & CHRO	40.00			X				125,846	0	18,027
DONALD SMITH VP COMMUNITY INVESTMENT	40.00			X				102,645	0	16,526
CHRISTOPHER ALVARADO VP COMMUNITY INVESTMENT	40.00			X				100,042	0	16,117

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			
PEGGY BEAULIEU SVP COMMUNITY INVESTMENT & DEVELOPMENT	40.00			X				104,050	0	16,109
KENNETH ANDERSON PARTIAL YEAR VP COMMUNITY INVESTMENT	40.00			X				35,254	0	2,403
REGINA WILLIAMS VP COMMUNITY INVESTMENT	40.00			X				95,154	0	15,840
VICKIE ALLEN PARTIAL YEAR SVP COMMUNITY INVESTMENT & DEVELOPMENT	40.00			X				50,281	0	8,082
JAMES POWELL CHAIR OF THE BOARD	1.00	X						0	0	0
PAT LINARES VICE CHAIR, ANNUAL CAMPAIGN	1.00	X						0	0	0
SCOTT HICKSON VICE CHAIR, AUDIT & FINANCE COMMITTEE	1.00	X						0	0	0
JOSH MCNAMARA VICE CHAIR, INVESTMENT COMMITTEE	1.00	X						0	0	0
JILL LYTTLE VICE CHAIR, BENEFITS AND COMPENSATION COMMITTEE	1.00	X						0	0	0
JUSTIN CHAPA VICE CHAIR, GOVERNANCE COMMITTEE	1.00	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			
ALLISON MULLIS VICE CHAIR, STRATEGIC PLANNING COMMITTEE	1.00	X						0	0	0
SHANNON FLETCHER VICE CHAIR, DIVERSITY COMMITTEE CHAIR	1.00	X						0	0	0
KRISTY ODOM CO-CHAIR, COMMUNITY INVESTMENT COMMITTEE	1.00	X						0	0	0
C COREY FICKES EXECUTIVE COMMITTEE	1.00	X						0	0	0
MELINDA M JOHNSTON EXECUTIVE COMMITTEE	1.00	X						0	0	0
BRIAN GOLDEN BOARD MEMBER	1.00	X						0	0	0
HADLEY WOERNER CO-CHAIR ANNUAL CAMPAIGN	1.00	X						0	0	0
AMANDA ROBBINS BOARD MEMBER	1.00	X						0	0	0
OLIVIA TEMPLETON BOARD MEMBER	1.00	X						0	0	0
PATRA STROEMER BOARD MEMBER	1.00	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			
KRISTEN JAMES BOARD MEMBER	1.00	X						0	0	0
MONA BAILEY BOARD MEMBER	1.00	X						0	0	0
DAN BERCE BOARD MEMBER	1.00	X						0	0	0
STEVAN BOBB BOARD MEMBER	1.00	X						0	0	0
BRIDGET BLAISE-SHAMAI BOARD MEMBER	1.00	X						0	0	0
EARNEST BOONE BOARD MEMBER	1.00	X						0	0	0
CARLO CAPUA BOARD MEMBER	1.00	X						0	0	0
BRIAN COLTHARP BOARD MEMBER	1.00	X						0	0	0
JUNE DAVIS BOARD MEMBER	1.00	X						0	0	0
JOSEPH DELEON BOARD MEMBER	1.00	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			
SEAN DONOHUE BOARD MEMBER	1.00	X						0	0	0
JOHN FLACK II BOARD MEMBER	1.00	X						0	0	0
MELODY JOHNSON BOARD MEMBER	1.00	X						0	0	0
DR PETER JORDAN BOARD MEMBER	1.00	X						0	0	0
CHERYL MOBLEY BOARD MEMBER	1.00	X						0	0	0
MARTIN NOTO BOARD MEMBER	1.00	X						0	0	0
BRIAN O'NEILL BOARD MEMBER	1.00	X						0	0	0
GLEN SIRLES BOARD MEMBER	1.00	X						0	0	0
GLORIA STARLING BOARD MEMBER	1.00	X						0	0	0
TOM STALLINGS BOARD MEMBER	1.00	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			
DANNY TORRES BOARD MEMBER	1.00	X						0	0	0
JEFF WHITFIELD BOARD MEMBER	1.00	X						0	0	0
DARWIN WINFIELD BOARD MEMBER	1.00	X						0	0	0

SCHEDULE A
 (Form 990 or
 990-EZ)

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
2019
Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

Name of the organization
 UNITED WAY OF TARRANT COUNTY

Employer identification number
 75-0858360

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.") . . .	26,644,009	24,612,851	19,593,315	22,128,074	22,463,438	115,441,687
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	26,644,009	24,612,851	19,593,315	22,128,074	22,463,438	115,441,687
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).						
6	Public support. Subtract line 5 from line 4.						115,441,687

Section B. Total Support

	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7	Amounts from line 4.	26,644,009	24,612,851	19,593,315	22,128,074	22,463,438	115,441,687
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	42,450	65,257	222,524	1,068,395	590,061	1,988,687
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.).	2,907	25,142	191,494	32,543	21,549	273,635
11	Total support. Add lines 7 through 10						117,704,009

12 Gross receipts from related activities, etc. (see instructions) **12**

13 **First five 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

14	Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	98.080 %
15	Public support percentage for 2018 Schedule A, Part II, line 14	15	98.660 %

16a **33 1/3% support test—2019.** 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

b **33 1/3% support test—2018.** 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

17a **10%-facts-and-circumstances test—2019.** 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

b **10%-facts-and-circumstances test—2018.** 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

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

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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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 five 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 2019 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2019 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2018 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2019. 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—2018. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 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 (b) and (c) 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 12a or 12b in Part I, answer (b) and (c) 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 (b) and (c) 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 (b) and (c) below, the governing body of a supported organization?		
b	A family member of a person described in (a) above?		
c	A 35% controlled entity of a person described in (a) or (b) above? <i>If "Yes" to a, b, or c, provide detail in Part VI.</i>		

Section B. Type I Supporting Organizations

		Yes	No
1	Did the 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 (2), 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 (a) and (b) 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>	Yes	No
b	Did the activities described in (a) 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 (a) and (b) 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>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 (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required-- explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014.			
b From 2015.			
c From 2016.			
d From 2017.			
e From 2018.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
i Carryover from 2014 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2019 from Section D, line 7:			
\$			
a Applied to underdistributions of prior years			
b Applied to 2019 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.			
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI . See instructions.			
7 Excess distributions carryover to 2020. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2015.			
b Excess from 2016.			
c Excess from 2017.			
d Excess from 2018.			
e Excess from 2019.			

Additional Data

Software ID:

Software Version:

EIN: 75-0858360

Name: UNITED WAY OF TARRANT COUNTY

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2019
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 TARRANT COUNTY

Employer identification number
75-0858360

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		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in 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 SFAS 116 (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 SFAS 116 (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 SFAS 116 (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	9,446,362	15,281,347	14,826,689	13,487,412	14,288,772
b Contributions					22,722
c Net investment earnings, gains, and losses	12,803	-798,299	1,149,662	2,019,793	-180,443
d Grants or scholarships	2,151,553	6,474,331	695,004	680,516	643,639
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	7,307,612	9,446,362	15,281,347	14,826,689	13,487,412

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

- a** Board designated or quasi-endowment ▶ 80.240 %
- b** Permanent endowment ▶ 6.350 %
- c** Temporarily restricted endowment ▶ 13.410 %

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)	Yes	No
3a(ii)	No	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		264,797	258,477	6,320
d Equipment		428,897	190,309	238,588
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				244,908

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)		

Part VIII Investments—Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (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) LEGACY I FUND	2,491,537
(2) LEGACY II FUND	1,743,480
(3) WOMEN'S LEADERSHIP FUND	851,558
(4) BARNETT SHALE FUND	1,490,381
(5) 457 PLAN ASSETS	78,980
(6) ALEXIS DE TOCQUEVILLE	730,656
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	7,386,592

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) DUE TO DESIGNATED ORGANIZATIONS	2,369,477
(3) ACCRUED POST-RETIREMENT BENEFITS	178,280
(4) FUNDS HELD FOR CITY OF FORT WORTH	5,000,000
(5) LOAN	1,080,312
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	8,628,069

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	18,564,536
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-149,214	
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	-12,803	
e	Add lines 2a through 2d			2e -162,017
3	Subtract line 2e from line 1			3 18,726,553
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	4,659,543	
c	Add lines 4a and 4b			4c 4,659,543
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)			5 23,386,096

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	22,447,667
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	68,022	
e	Add lines 2a through 2d			2e 68,022
3	Subtract line 2e from line 1			3 22,379,645
4	Amounts included on Form 990, Part IX, line 25, but not on line 1 :			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII.)	4b	4,714,726	
c	Add lines 4a and 4b			4c 4,714,726
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)			5 27,094,371

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: 75-0858360

Name: UNITED WAY OF TARRANT COUNTY

Supplemental Information

Return Reference	Explanation
PART V, LINE 4:	\$6,318,684 OF BOARD DESIGNATED FUNDS UNDERWRITES A PORTION OF UNITED WAY'S OPERATING COSTS . \$1,055,518 OF QUASI-ENDOWMENT FUNDS ARE DESIGNATED FOR COMMUNITY PROGRAMS. \$500,125 FOR PERMANENT ENDOWMENT.

Supplemental Information

Return Reference	Explanation
PART X, LINE 2:	THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 50L(C)(3) OF THE INTERNAL REVENUE CODE, AS AN ORGANIZATION OTHER THAN A PRIVATE FOUNDATION, THEREFORE, NO PROVISION FOR INCOME TAXES IS MADE IN THE ACCOMPANYING FINANCIAL STATEMENTS. THE ORGANIZATION FOLLOWS U.S. GAAP, WHICH PRESCRIBES A COMPREHENSIVE MODEL FOR THE FINANCIAL STATEMENT RECOGNITION, MEASUREMENT, PRESENTATION, AND DISCLOSURE OF UNCERTAIN TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN IN INCOME TAX RETURNS. MANAGEMENT BELIEVES THAT IT HAS NOT TAKEN A TAX POSITION THAT, IF CHALLENGED, WOULD HAVE A MATERIAL EFFECT ON THE ORGANIZATION'S FINANCIAL STATEMENTS. THE ORGANIZATION FILES A FORM 990 IN THE UNITED STATES FEDERAL JURISDICTION AND NO TAX RETURNS ARE CURRENTLY UNDER EXAMINATION BY ANY TAX AUTHORITIES. THE ORGANIZATION HAS NOT INCURRED ANY PENALTIES OR INTEREST DURING THE YEARS ENDED JUNE 30, 2020 AND 2019.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS:	OTHER CHANGES IN ASSETS HELD BY OTHERS -12,803.

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS:	DONOR DESIGNATED FUNDS 4,727,565. FUNDRAISING EXPENSES -68,022.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	FUNDRAISING EXPENSES 68,022.

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	DONOR DESIGNATED FUNDS 4,712,014. PENSION PLAN ADJUSTMENT 2,712.

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

Revenue		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		GOLF TOURNAMENTS (event type)	(event type)	(total number)	(add col. (a) through col. (c))
1	Gross receipts	231,958			231,958
2	Less: Contributions	231,958			231,958
3	Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	22,848			22,848
	6 Rent/facility costs	33,689			33,689
	7 Food and beverages	2,032			2,032
	8 Entertainment				
	9 Other direct expenses	9,453			9,453
10	Direct expense summary. Add lines 4 through 9 in column (d) ▶				68,022
11	Net income summary. Subtract line 10 from line 3, column (d) ▶				-68,022

Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col.(a) through col.(c))
		1	Gross revenue		
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6	Volunteer labor	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No
7	Direct expense summary. Add lines 2 through 5 in column (d) ▶				
8	Net gaming income summary. Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities: _____

a Is the organization licensed to conduct gaming activities in each of these states? Yes No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No

b If "Yes," explain: _____

- 11** Does the organization conduct gaming activities with nonmembers? Yes No
- 12** Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13** Indicate the percentage of gaming activity conducted in:

a The organization's facility	13a	%
b An outside facility	13b	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶

Address ▶

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____.

c If "Yes," enter name and address of the third party:

Name ▶

Address ▶

16 Gaming manager information:

Name ▶

Gaming manager compensation ▶ \$

Description of services provided ▶

- Director/officer Employee Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

Return Reference	Explanation
------------------	-------------

Note: To capture the full content of this document as Filed, 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

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization UNITED WAY OF TARRANT COUNTY

Employer identification number 75-0858360

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. 169
3 Enter total number of other organizations listed in the line 1 table.

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) CAREGIVER RESPITE	134	180,856	65,132	YEARLY REPORT SUBMITTED TO HHS	IN-KIND MATCH
(2) HEALTH MAINTENANCE SERVICES	1136	251,586	99,828	YEARLY REPORT SUBMITTED TO HHS	IN-KIND MATCH
(3) INCOME SUPPORT	569	158,518	0	YEARLY REPORT SUBMITTED TO HHS	CASH MATCH
(4) RESIDENTIAL REPAIR	234	340,096	73,731	YEARLY REPORT SUBMITTED TO HHS	IN-KIND MATCH
(5) ARTISTS RELIEF FUND GRANTS	40	12,000			
(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

Additional Data

Software ID:
Software Version:
EIN: 75-0858360
Name: UNITED WAY OF TARRANT COUNTY

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
22KILL 13625 NEUTRON ROAD DALLAS, TX 75244	47-3864997	501(C)(3)	30,000				PROVIDES MENTAL WELLNESS PROGRAMS AND THERAPIES FOR VETERANS
6 STONES MISSION NETWORK 209 NORTH INDUSTRIAL BOULEVARD 241 BEDFORD, TX 76021	24-4829432	501(C)(3)	14,031				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF AND DONOR DIRECTED FUNDS

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AB CHRISTIAN LEARNING CENTER PO BOX 51078 FORT WORTH, TX 76105	27-0141151	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
ACH - CHILD & FAMILY SERVICES 1424 SUMMIT AVENUE FORT WORTH, TX 76102	75-0818140	501(C)(3)	115,582	5,803	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES SUPPORT AND EDUCATION TO THOSE AND THEIR FAMILIES WITH DEVELOPMENTAL DISABILITIES.

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ACTS 4 OTHERS PO BOX 811 DECATUR, TX 76234	45-4872620	501(C)(3)	5,808				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
AIDS OUTREACH CENTER 400 NORTH BEACH STREET FORT WORTH, TX 76111	75-2139336	501(C)(3)	76,125				PROMOTING HEALTH AND HEALING - CLIENT INTERVENTION AND CASE MANAGEMENT

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ALZHEIMER'S ASSOCIATION OF NORTH CENTRAL TEXAS 2630 WEST FREEWAY SUITE 100 FORT WORTH, TX 76102	75-1984152	501(C)(3)	240,318				PROVIDES SENIOR SUPPORT AND CARE TO PREVENT SENIOR ISOLATION
AMERICAN RED CROSS - CHISHOLM TRAIL CHAPTER 1515 SOUTH SYLVANIA FORT WORTH, TX 76111	53-0196605	501(C)(3)	75,613				PROVIDES CLIENT INTERVENTIONS AND CASE MANAGEMENT. PROVIDES DISASTER RELIEF AND TRANSPORTATION TO PREVENT ISOLATION.

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APARTMENT LIFE 610 S INDUSTRIAL BOULEVARD SUITE 170 EULESS, TX 76040	75-2868621	501(C)(3)	25,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
ARISE AFRICA 1628 FAIRMOUNT AVENUE FORT WORTH, TX 76104	27-2014915	501(C)(3)	10,002				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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ARLINGTON CHARITIES INC 811 SECRETARY DRIVE ARLINGTON, TX 760151626	75-1668092	501(C)(3)	21,500				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD
ARLINGTON LIFE SHELTER 325 WEST DIVISION STREET ARLINGTON, TX 760117415	75-2235099	501(C)(3)	21,184				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF AND DONOR DESIGNATED FUNDS

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ARLINGTON URBAN MINISTRIES 701 DUGAN STREET ARLINGTON, TX 760101220	75-2959884	501(C)(3)	15,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
BEAUTIFUL FEET MINISTRIES 1709 EAST HATTIE STREET FORT WORTH, TX 76104	75-2316728	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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BIG BROTHERS BIG SISTERS OF NORTH TEXAS 205 WEST MAIN STREET ARLINGTON, TX 76010	75-0800632	501(C)(3)	92,055				PROVIDE CHILDREN WITH STRONG AND ENDURING, PROFESSIONALLY SUPPORTED ONE-TO-ONE RELATIONSHIPS THAT CHANGES LIVES FOR THE BETTER
BLUE FAMILY FUND INC 760 FLAMINGO CIRCLE BURLESON, TX 76028	81-5438694	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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BOARD DEVELOPMENT SYSTEMS INC 1500 NORTH MAIN SUITE 200 FORT WORTH, TX 76164	83-1151273	501(C)(3)	103,371				NON-PROFIT BOARD MEMBER TRAINING
BOY SCOUTS OF AMERICA LONGHORN COUCIL DENTON PO BOX 54190 HURST, TX 76054	75-0800614	501(C)(3)	55,072				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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BOYS & GIRLS CLUB OF ARLINGTON 608 NORTH ELM ARLINGTON, TX 76011	75-1046644	501(C)(3)	15,890				PROVIDES SOCIAL DEVELOPMENT PROGRAMS FOR CHILDREN
BOYS & GIRLS CLUBS OF GREATER FORT WORTH INC 3218 EAST BELKNAP FORT WORTH, TX 76111	75-0808785	501(C)(3)	86,727	484	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES SOCIAL DEVELOPMENT PROGRAMS FOR CHILDREN

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CAMP FIRE USA FIRST TEXAS COUNCIL INC 2700 MEACHAM BOULEVARD FORT WORTH, TX 76137	75-0851201	501(C)(3)	201,334				PROVIDES SCHOOL AGE CHILD CARE. ALSO PROVIDES CREATIVE SOLUTIONS TO CONNECT FAMILIIES TOGETHER AND PROVIDE SUPPORT SERVICES. ALSO PROVIDES ADMINISTRATIVE AND CLASSROOM MENTORING AND TRAINING SERVICES TO THE KIDS WAY CHILD CARE QUALITY ENHANCEMENT PROGRAM PARTICIPANTS.
CAMP SUMMIT 17210 CAMPBELL ROAD 180 DALLAS, TX 75252	75-2488486	501(C)(3)	10,130				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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CANCER CARE SERVICES 623 SOUTH HENDERSON FORT WORTH, TX 76104	75-1025511	501(C)(3)	286,276				PROVIDES FINANCIAL ASSISTANCE FOR HEALTHCARE NEEDS
CATHOLIC CHARITIES PO BOX 15610 FORT WORTH, TX 79119	75-0808769	501(C)(3)	565,459				INCREASING SELF-SUFFICIENCY-FINANCIAL ASSISTANCE AND EMPLOYMENT; PROMOTING HEALTH & HEALING-HEALTH SERVICES; PROVIDES CHILD CARE, COUNSELING AND FAMILY SERVICES, AND SUPPORT SERVICES. ALSO PROVIDED DISASTER RESPONSE SERVICES WHICH PROVIDES LONG-TERM RECOVERY CASE MANAGEMENT TO SURVIVORS OF HURRICANES KATRINA AND RITA. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE SUPPORTIVE SERVICES FOR 36 HIGH INTENSITY CLIENTS.

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

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CENTER FOR TRANSFORMING LIVES 512 WEST 4TH STREET FORT WORTH, TX 76102	75-0829389	501(C)(3)	180,375	1,638	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES CHILDREN DEVELOPMENT PROGRAMS, SUPPORTIVE LIVING IN TRANSITIONAL HOUSING ARRANGEMENTS, AND MY OWN PLACE PROGRAM WHICH PROVIDE YOUNG ADULT WOMEN AGING OUT OF FOSTER CARE INTO INDEPENDENT LIVING. RUNS THE READY FOR SCHOOL INITIATIVE.
CENTER OF HOPE PO BOX 190 WEATHERFORD, TX 76086	75-2762501	501(C)(3)	6,318				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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CHILD CARE ASSOCIATES TARRANT COUNTY 3000 EAST BELKNAP 3RD FLOOR FORT WORTH, TX 76111	84-0587601	501(C)(3)	128,436	10,400	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES EARLY CHILDHOOD DEVELOPMENT PROGRAMS
CHILD STUDY CENTER INC 1300 W LANCASTER FORT WORTH, TX 76102	75-1099536	501(C)(3)	63,909				PROVIDES PEDIATRIC MEDICAL SERVICES, PSYCHOLOGICAL SERVICES, DENTAL SERVICES, AND SPECIAL EDUCATION. ALSO PROVIDE A NIGRADS WHICH PROVIDES RECENT NEONATAL ICU CASES WITH DEVELOPMENTAL SUPPORT.

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CHRISTIAN COMMUNITY STOREHOUSE PO BOX 1321 KELLER, TX 76244	75-1929755	501(C)(3)	30,279				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD
CHRIST'S HAVEN FOR CHILDREN PO BOX 467 KELLER, TX 75248	23-7164673	501(C)(3)	12,990				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF AND DONOR DIRECTED FUNDS

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CITY OF FORT WORTH LA GRAN PLAZA 2200 4200 SOUTH FREEWAY FORT WORTH, TX 76115	75-6000528	GOVERNMENT	77,819				INCREASING SELF-SUFFICIENCY-FINANCIAL ASSISTANCE AND EMPLOYMENT; PROMOTING HEALTH & HEALING-HEALTH SERVICES; PROVIDES CHILD CARE, COUNSELING AND FAMILY SERVICES, AND SUPPORT SERVICES. ALSO PROVIDED DISASTER RESPONSE SERVICES WHICH PROVIDES LONG-TERM RECOVERY CASE MANAGEMENT TO SURVIVORS OF HURRICANES KATRINA AND RITA. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE SUPPORTIVE SERVICES FOR 36 HIGH INTENSITY CLIENTS.
CLAYTON YOUTH ENRICHMENT 1215 COUNTRY CLUB LANE FORT WORTH, TX 76112	75-1485951	501(C)(3)	160,000				SCALEABLE COMMUNITY CHANGE GRANT

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CLC - COMMUNITY LEARNING CTR 555 NORTH GRANTS LANE FORT WORTH, TX 76108	75-2866735	501(C)(3)	80,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
COMMUNITIES IN SCHOOLS 6707 BRENTWOOD STAIR ROAD SUITE 510 510 FORT WORTH, TX 76112	75-2411238	501(C)(3)	184,907				PROVIDES CASE MANAGEMENT FOR CHILDREN AND THEIR FAMILIES, AS WELL AS SUPPORT IN THEIR EDUCATIONAL AND SOCIAL DEVELOPMENT, TO HELP CHILDREN REACH THEIR FULL EDUCATIONAL POTENTIAL.

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COMMUNITY COUNCIL OF GREATER DALLAS 1349 EMPIRE CENTRAL BOULEVARD 400 DALLAS, TX 75247	75-0800631	GOVERNMENT	25,800				HEALTH LITERACY
COMMUNITY ENRICHMENT CENTER 6250 NE LOOP 820 FORT WORTH, TX 76180	75-2231694	501(C)(3)	81,238	464	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES ADULT LITERACY PROGRAMS

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COMMUNITY FOUNDATION OF NORTH TEXAS 306 W 7TH STREET 1045 FORT WORTH, TX 76102	75-2267767	501(C)(3)	6,251				EARLY LEARNING ALLIANCE BUILDS THE FOUNDATION TO IMPROVE EARLY LEARNING TO HELP CHILDREN SUCCEED IN SCHOOL
COMMUNITY FRONTLINE OF FORT WORTH 824 GREEN HEATH AVENUE FORT WORTH, TX 76120	82-1299722	501(C)(3)	11,500				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD

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COMMUNITY LINK MISSION 300 BELMONT STREET SAGINAW, TX 761791617	75-2231694	501(C)(3)	33,528				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF AND DONOR DESIGNATED FUNDS
COMO LIONS HEART INC 4840 BELLFLOWER WAY FORT WORTH, TX 76123	47-3486169	501(C)(3)	15,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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CONNELL BAPTIST CHURCH 4736 BRUCE AVENUE FORT WORTH, TX 76107	75-0939911	501(C)(3)	6,016				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
COOK CHILDREN'S HEALTH CARE SYSTEM 801 SEVENTH AVENUE FORT WORTH, TX 76104	75-2705881	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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COOK CHILDREN'S MEDICAL CTR 801 SEVENTH AVENUE FORT WORTH, TX 76104	75-2051646	501(C)(3)	6,674				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
CROWLEY HOUSE OF HOPE PO BOX 300 CROWLEY, TX 76036	75-2625043	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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DALLAS FOUNDATION 3963 MAPLE AVENUE SUITE 390 DALLAS, TX 75219	75-2890371	501(C)(3)	20,336				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
DENTAL HEALTH FOR ARLINGTON PO BOX 1542 ARLINGTON, TX 76004	75-2467366	501(C)(3)	60,422				RUNS THE ALLAN SAXE CLINIC WHICH PROVIDES FREE TO LOW COST DENTAL SERVICES. AS WELL AS THE SMILES SCHOOL-BASED PREVENTION PROGRAM.

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DFW ASYLUM SEEKER HOUSING NETWORK PO BOX 470783 FORT WORTH, TX 76147	81-4685664	501(C)(3)	15,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
DOLLYWOOD FOUNDATION 1020 DOLLYWOOD LANE PIGEON FORGE, TN 37863	62-1348105	501(C)(3)	27,310				FUNDING FOR BOOKS FOR IMAGINATION LIBRARY

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DOXOLOGY BIBLE CHURCH 4805 ARBORLAWN DRIVE FORT WORTH, TX 76109	75-1446859	501(C)(3)	11,936				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
EASTER SEALS NORTH TEXAS 1424 HEMPHILL STREET FORT WORTH, TX 76104	75-0827419	501(C)(3)	43,246				PROVIDES OUTPATIENT REHAB, CLIENT INTERVENTION AND CASE MANAGEMENT. ALSO PROVIDES HOMEMAKER AND RESPITE CARE. HELPS CLIENTS WITH JOB PLACEMENT.

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EDUCATION SERVICE CENTER 1451 S CHERRY LANE WHITE SETTLEMENT, TX 76108	75-1246000	501(C)(3)	117,000				EDUCATION IMPACT GRANT
EMERGENCY ASSISTANCE FOUNDATION 700 S DIXIE HIGHWAY 200 WEST PALM BEACH, FL 33401	45-1813056	501(C)(3)	15,371				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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FAMILY PATHFINDERS OF TARRANT COUNTY PO BOX 470869 FORT WORTH, TX 76147	73-1643384	501(C)(3)	427,169				PROVIDES ASSET DEVELOPMENT FOR CLIENTS
FEEL THE COLOR 10709 KITTERING TRAIL HASLET, TX 76052	84-3929225	501(C)(3)	12,500				KERNEL AWARD

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FIRST COMMAND EDUCATIONAL FDN 1 FIRST COMMAND PLAZA FORT WORTH, TX 76109	75-1973894	501(C)(3)	36,651				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
FIRST PRESBYTERIAN CHURCH OF FORT WORTH 1000 PENN STREET FORT WORTH, TX 76102	75-0818160	501(C)(3)	5,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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FIRST STREET METHODIST MISSION 801 WEST 1ST STREET FORT WORTH, TX 76102	56-2570858	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
FORT WORTH DROWNING PREVENTION COALITION PO BOX 11813 FORT WORTH, TX 76110	47-3716924	501(C)(3)	12,000				SCALEABLE COMMUNITY CHANGE GRANT

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FORT WORTH HOPE CENTER 3625 E LOOP 820 S FORT WORTH, TX 76119	01-0801061	501(C)(3)	25,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
FORT WORTH HOUSING AUTHORITY PO BOX 430 FORT WORTH, TX 76101	75-6001818	501(C)(3)	100,357				HOMELESSNESS GRANT

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FORT WORTH JUNIOR GOLF FDN PO BOX 4767 FORT WORTH, TX 76164	20-5545252	501(C)(3)	5,317				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
FORTRESS YOUTH DEVELOPMENT CENTER 712 STELLA STREET FORT WORTH, TX 76104	42-1588482	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF

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
FOUNDATION COMMUNITIES 3036 SOUTH FIRST STREET SUITE 200 AUSTIN, TX 78704	74-2563260	501(C)(3)	107,250				INCREASING SELF-SUFFICIENCY-FINANCIAL ASSISTANCE AND EMPLOYMENT; PROMOTING HEALTH & HEALING-HEALTH SERVICES; PROVIDES CHILD CARE, COUNSELING AND FAMILY SERVICES, AND SUPPORT SERVICES. ALSO PROVIDED DISASTER RESPONSE SERVICES WHICH PROVIDES LONG-TERM RECOVERY CASE MANAGEMENT TO SURVIVORS OF HURRICANES KATRINA AND RITA. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE SUPPORTIVE SERVICES FOR 36 HIGH INTENSITY CLIENTS.
FOUNDATION FOR EDUCATION & RESEARCH IN VISION 4901 CALHOUN ROAD HOUSTON, TX 772042020	76-0216422	501(C)(3)	10,363				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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GATEHOUSE PROJECT HANDUP PO BOX 398 GRAPEVINE, TX 76099	90-0705496	501(C)(3)	85,040				LIVING COMMUNITY FOR WOMEN - WHETHER SINGLE OR WITH CHILDREN - LEAVING A CRISIS, SUCH AS ABUSE, POVERTY, HOMELESSNESS, TRAGIC DIVORCE OR OTHER REASONS
GATEWAY CHURCH 500 S NOLEN DRIVE SUITE 300 SOUTHLAKE, TX 760929171	75-2870806	501(C)(3)	10,139				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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GEMS CAMP 5404 BEXAS STREET DALLAS, TX 75215	46-3363376	501(C)(3)	11,562				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
GIRL SCOUTS OF TEXAS 4901 BRIARHAVEN FORT WORTH, TX 76109	75-0818162	501(C)(3)	75,010				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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GIRLS INCORPORATED TARRANT CTY 2820 MATLOCK ROAD ARLINGTON, TX 76015	75-1514683	501(C)(3)	225,605				PROVIDES SCHOOL AGE CHILD CARE
GRAPEVINE RELIEF & COMMUNITY EXCHANGE PO BOX 412 GRAPEVINE, TX 76099	75-2195702	501(C)(3)	160,752				PROVIDES DIABETIC EDUCATION

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HARVESTING INTERNATIONAL MINISTRY CENTER 150 S SIXTH AVENUE MANSFIELD, TX 76063	74-2510566	501(C)(3)	25,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF
HEALTHY TARRANT COUNTY COLLABORATION POBOX 8040 FORT WORTH, TX 76124	43-2087946	501(C)(3)	22,175				PARTNERSHIP TO BUILD HEALTHIER COMMUNITIES THROUGH ACCESS TO HEALTHY FOODS, INCREASING LOCAL POLICIES THAT SUPPORT HEALTH

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

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HOPE COTTAGE INC PO BOX 140459 DALLAS, TX 75214	75-0800652	501(C)(3)	5,452				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
HULEN STREET BAPTIST CHURCH 7100 SOUTH HULEN STREET FORT WORTH, TX 76133	75-6005028	501(C)(3)	40,017				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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HUMANE SOCIETY OF NORTH TEXAS 1840 EAST LANCASTER AVENUE FORT WORTH, TX 76103	75-1245911	501(C)(3)	6,168				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
I CAN STILL SHINE PROGRAM 729 GRAPEVINE HIGHWAY HURST, TX 76054	27-4672450	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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JEWISH FEDERATION FORT WORTH 4049 KINGSRIDGE ROAD FORT WORTH, TX 76109	75-0808797	501(C)(3)	7,111				PROVIDES CLIENT INTERVENTION AND CASE MANAGEMENT TO LOCAL FAMILIES
JPS FOUNDATION 1223 S MAIN STREET FORT WORTH, TX 76104	75-2717782	501(C)(3)	19,122				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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KANSAS STATE UNIV FOUNDATION 1800 KIMBALL AVENUE SUITE 200 MANHATTAN, KS 66502	48-0667209	501(C)(3)	6,744				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
LADDER ALLIANCE 1100 HEMPHILL STREET 302 FORT WORTH, TX 76104	06-1674011	501(C)(3)	8,193				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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LEARNING CENTER OF NORTH TEXAS 101 SUMMIT AVENUE 612 FORT WORTH, TX 76102	75-2905243	501(C)(3)	49,000				PROVIDES PRACTICAL, ACCESSIBLE, AND AFFORDABLE TESTING AND RESOURCES TO ENHANCE THE SUCCESS OF THOSE WITH LEARNING DIFFERENCES AND DISABILITIES
LENA POPE HOME 3131 SANGUINET STREET FORT WORTH, TX 76107	75-6003583	501(C)(3)	118,487				PROVIDES DAY TREATMENT CENTER AND CLINICAL COUNSELING. ALSO RUNS FORT WORTH FAMILY SUPPORT CENTER

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MARRIAGE MANAGEMENT 1061 MEADOW SCAPE DRIVE BURLESON, TX 76028	56-2591161	501(C)(3)	15,000				VETERANS FUND GRANT
MARY QUEEN OF HEAVEN CHURCH PO BOX 508 MALKOFF, TX 75148	75-2662685	501(C)(3)	10,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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MASONIC HOME & SCHOOL OF TEXAS 1240 KELLER PARKWAY SUITE 200 KELLER, TX 76248	75-1528075	501(C)(3)	13,500				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
MEALS ON WHEELS INC OF TARRANT COUNTY 320 SOUTH FREEWAY FORT WORTH, TX 76104	75-1568798	501(C)(3)	2,653,360	5,223	COST	PERSONAL PROTECTIVE EQUIPMENT	TRANSPORTATION VOUCHERS & HOME DELIVERED MEALS & PARTICIPANT ASSESSMENT, HEALTHY IDEAS, CLP.

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MENTAL HEALTH AMERICA OF TARRANT COUNTY 3136 WEST 4TH STREET FORT WORTH, TX 76107	75-0983834	501(C)(3)	34,545				PROVIDES PEER SUPPORT THROUGH CRISIS INTERVENTION AND CASE MANAGEMENT, MENTAL HEALTH EDUCATION. AS WELL AS A OMBUDSMAN PROGRAM AND ADVOCACY TO THOSE WITH MENTAL HEALTH ISSUES. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE SUPPORTIVE SERVICES TO 8 HIGH INTENSITY AND 40 MEDIUM INTENSITY CLIENTS.
MENTAL HEALTH CONNECTION OF TARRANT COUNTY 3131 SANGUINET STREET FORT WORTH, TX 76107	75-2659610	501(C)(3)	21,500				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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MERCY CLINIC OF FORT WORTH PO BOX 11557 FORT WORTH, TX 76110	45-3841621	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF
MHMR OF TARRANT COUNTY PO BOX 2603 FORT WORTH, TX 76113	75-2890731	501(C)(3)	148,600	4,672	COST	PERSONAL PROTECTIVE EQUIPMENT	SAFETY NET GRANT AND DONOR DIRECTED FUNDS FOR HOMELESSNESS

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MIDWEST FOOD BANK PO BOX 1321 KELLER, TX 76244	80-2980367	501(C)(3)	15,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD
MISSION ARLINGTONMETROPLEX 210 WEST SOUTH STREET ARLINGTON, TX 76010	75-2354962	501(C)(3)	29,874				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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MISSION CENTRAL OF TARRANT CO 740 EAST PIPELINE ROAD HURST, TX 76053	06-1709651	501(C)(3)	20,648				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF
MONCRIEF CANCER INSTITUTE 400 W MAGNOLIA AVENUE FORT WORTH, TX 76104	75-2655008	501(C)(3)	40,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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NEURO ASSISTANCE FOUNDATION 2320 BRIDGEWOOD DRIVE KELLER, TX 76262	26-2464596	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
NEW DAY INC PO BOX 171722 ARLINGTON, TX 760031722	80-0789676	501(C)(3)	7,500				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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NORTH CENTRAL TEXAS COUNCIL OF GOVERNMENTS 616 SIX FLAGS DRIVE ARLINGTON, TX 76011	75-6049012	GOVERNMENT	140,203				GRANT SUBCONTRACTOR FOR AREA AGENCY ON AGING
NORTH TEXAS AREA COMMUNITY HEALTH CENTERS 2100 NORTH MAIN STREET FORT WORTH, TX 76164	54-2117989	501(C)(3)	20,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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NORTH TEXAS COMMUNITY TABLE IN 7530 APRIL LANE N RICHLAND HILLS, TX 76182	81-4810991	501(C)(3)	25,515				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND DONOR DIRECTED FUNDS
NORTHEAST EMERGENCY DISTRIBUTION PO BOX 1376 HURST, TX 76053	75-1928662	501(C)(3)	25,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD

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NORTHSIDE INTER-COMMUNITY AGENCY 1600 CIRCLE PARK BOULEVARD FORT WORTH, TX 76164	75-1554285	501(C)(3)	8,194				EMERGENCY ASSISTANCE, PROFESSIONAL SOCIAL WORK SERVICES FOR LOW-INCOME CLIENTS. PROVIDES FOOD, CLOTHING, AND FINANCIAL ASSISTANCE
PARENTING CENTER 2928 WEST FIFTH STREET FORT WORTH, TX 76107	23-7454254	501(C)(3)	44,985				PROVIDES FAMILY LIFE EDUCATION, CHILD ABUSE PREVENTION, CRISIS INTERVENTION AND CASE MANAGEMENT AS WELL AS COUNSELING SERVICES.

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PRESBYTERIAN NIGHT SHELTER TC PO BOX 2645 FORT WORTH, TX 76113	75-1985591	501(C)(3)	153,226				PROVIDES SHELTER CARE. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE CASE MANAGEMENT FOR 100 CLIENTS; SUPPORT SERVICES FOR 40 HIGH INTENSITY AND 20 MEDIUM INTENSITY CLIENTS.
PROJECT BELOVED THE MOLLY JANE MISSION 2930 BLESOE STREET 124 FORT WORTH, TX 76107	82-3446280	501(C)(3)	6,267				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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PROMISE HOUSE 224 WEST PAGE AVENUE DALLAS, TX 75208	75-2180083	501(C)(3)	10,205				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
READING PARTNERS 2910 SWISS AVENUE DALLAS, TX 75204	77-0568469	501(C)(3)	64,000				SCALEABLE COMMUNITY CHANGE GRANT

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RECOVERY RESOURCE COUNCIL 2700 AIRPORT FREEWAY FORT WORTH, TX 76111	75-6005093	501(C)(3)	283,426				PROVIDES CLIENT INTERVENTION AND CASE MANAGEMENT, GENERAL DRUG AND ALCOHOL EDUCATION PROGRAMS, PARENT CONNECTION CLASSES, AND RUNS THE SUNSHINE CLUB WHICH IS AIMED AT PROVIDING DRUG AND ALCOHOL EDUCATION AND SUPPORT TO CHILDREN IN HIGH RISK AREAS. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE CASE MANAGEMENT FOR 75 CLIENTS; STORAGE SPACE FOR 150 CLIENTS DAILY.
ROLL CALL OF NORTH TEXAS PO BOX 35052 FORT WORTH, TX 76162	81-4297002	501(C)(3)	10,613				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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SAFEHAVEN OF TARRANT COUNTY 1100 HEMPHILL STREET 303 FORT WORTH, TX 76104	75-1670281	501(C)(3)	446,009				PROVIDES EMERGENCY CRISIS SHELTER, TRANSITIONAL LIVING ARRANGEMENTS, PREGNANCY/PARENTING TEENS SERVICES, MEN'S NON-VIOLENCE EDUCATIONAL PROGRAMS, AND FILIAL THERAPY WHICH PROVIDES ALTERNATIVE EMOTIONAL SUPPORT FOR ABUSED CHILDREN. ALSO PROVIDES A MULTI-DISCIPLINARY TEAM WITH CPS AND A COLLABORATIVE COMMUNITY RESPONSE TO CHILD WITNESSES OF DOMESTIC VIOLENCE.
SALVATION ARMY PO BOX 2333 FORT WORTH, TX 76113	75-0800678	501(C)(3)	153,839				PROVIDES A FORT WORTH AND ARLINGTON SHELTER, EMERGENCY ASSISTANCE, AND SHELTER CARE. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE CASE MANAGEMENT FOR 60-70 CLIENTS; SUPPORTIVE SERVICES FOR 8 HIGH INTENSITY AND 20 MEDIUM INTENSITY CLIENTS.

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SEASONS OF CHANGE INC 1008 W MAIN STREET ARLINGTON, TX 76013	33-1212039	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF
SEED EFFECT PO BOX 141223 DALLAS, TX 75214	46-0639137	501(C)(3)	13,024				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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SERENITY TRANSFORMATION HOME I 1425 STAFFORD DRIVE FORT WORTH, TX 76134	47-4418825	501(C)(3)	5,605				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
SHAKEN BABY ALLIANCE 8101 BOAT CLUB ROAD SUITE 240 154 FORT WORTH, TX 76179	75-2758611	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF

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SHARED WORTH OF TARRANT COUNTY 1459 ARBOR RIDGE DRIVE FORT WORTH, TX 76112	84-2730988	501(C)(3)	5,000				KERNEL AWARD
SICKLE CELL DISEASE ASSOC PO BOX 570817 DALLAS, TX 753570817	75-1384657	501(C)(3)	15,520				PROVIDES SICKLE CELL DISEASE EDUCATIONAL PROGRAM

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SIXTY AND BETTER INC 1400 CIRCLE DRIVE 300 FORT WORTH, TX 76119	75-1251339	501(C)(3)	1,513,497	90	COST	PERSONAL PROTECTIVE EQUIPMENT	NUTRITION EDUCATION, PHYSICAL FITNESS, MATTER OF BALANCE CLASSES, CONGREATE MEALS, HEALTHY IDEAS.
SOCIETY OF ST VINCENT DE PAUL FW DIOCESAN COUNCIL 1912 NORWOOD LANE ARLINGTON, TX 76013	75-2887696	501(C)(3)	17,558				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF

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SOUTHWESTERN DIABETIC FND PO BOX 918 GAINESVILLE, TX 76241	75-6002547	501(C)(3)	54,262				RUNS CAMP SWEENEY WHICH PROVIDES A RESIDENTIAL DIABETIC LIFE SKILLS TRAINING PROGRAM FOR CHILDREN WITH DIABETES.
ST JUDE CHILDREN'S RESEARCH HOSPITAL 501 ST JUDE PLACE MEMPHIS, TN 38105	62-0646012	501(C)(3)	7,107				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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STEPPING STONES FOUNDATION 905 BOURLAND ROAD KELLER, TX 762483809	90-0578693	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF
SUSAN G KOMEN BREAST CANCER FOUNDATION - MARGO LUCERO 5005 LBJ FREEWAY 250 DALLAS, TX 75244	75-2844652	501(C)(3)	5,216				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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(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
TARRANT AREA FOOD BANK 2600 CULLEN STREET FORT WORTH, TX 76107	75-1822473	501(C)(3)	49,518				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
TARRANT COUNTY COLLEGE 1500 HOUSTON STREET FORT WORTH, TX 76102	75-2277475	501(C)(3)	25,000				INCREASING SELF-SUFFICIENCY-FINANCIAL ASSISTANCE AND EMPLOYMENT; PROMOTING HEALTH & HEALING-HEALTH SERVICES; PROVIDES CHILD CARE, COUNSELING AND FAMILY SERVICES, AND SUPPORT SERVICES. ALSO PROVIDED DISASTER RESPONSE SERVICES WHICH PROVIDES LONG-TERM RECOVERY CASE MANAGEMENT TO SURVIVORS OF HURRICANES KATRINA AND RITA. RECEIVED PART OF THE HOMELESSNESS GRANT TO PROVIDE SUPPORTIVE SERVICES FOR 36 HIGH INTENSITY CLIENTS.

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
TARRANT COUNTY COLLEGE FDN 1500 HOUSTON STREET FORT WORTH, TX 76102	75-2277475	501(C)(3)	12,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
TARRANT COUNTY FURNITURE BANK 3717 CAROLYN ROAD FORT WORTH, TX 76109	83-1957997	501(C)(3)	7,500				KERNEL AWARD

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
TARRANT COUNTY HOMELESS COALITION PO BOX 471638 FORT WORTH, TX 761471406	75-2331643	501(C)(3)	418,492				SCALABLE COMMUNITY CHANGE GRANT AND VETERANS FUND GRANT FOR HOMELESSNESS
TARRANT COUNTY VETERANS TREATMENT COURT 100 E WEATHERFORD SUITE 501 FORT WORTH, TX 76196		GOVERNMENT	50,000				THE PROGRAM OFFERS ACCUSED VETERANS A TREATMENT OPTION THAT IS CLOSELY SUPERVISED BY THE JUDICIARY

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
TARRANT COUNTY YOUTH COLLABORATION 6707 BRENTWOOD STAIR ROAD FORT WORTH, TX 76112	75-1761497	501(C)(3)	11,250				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
TARRANT COUNTY YOUTH RECOVERY CAMPUS(MHMR) 1527 HEMPHILL STREET 622 FORT WORTH, TX 76104	75-2890731	501(C)(3)	76,500				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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
TARRANT LITERACY COALITION PO BOX 123537 FORT WORTH, TX 76124	26-3821487	501(C)(3)	22,341				THE COALITION IS DEDICATED TO ADVANCING THE ABILITY OF ADULTS TO READ, WRITE, SPEAK, COMPUTE, AND SOLVE PROBLEMS IN ENGLISH. THE TARRANT LITERACY COALITION IS WORKING TO INCREASE THE QUANTITY AND QUALITY OF PROGRAMS THROUGH INCREASED FUNDING, TRAINING AND COLLABORATION AMONG LITERACY SERVICE PROVIDERS, BUSINESS LEADERS AND ELECTED OFFICIALS.
TASTE PROJECT 1200 S MAIN STREET FORT WORTH, TX 76104	45-5471587	501(C)(3)	25,000				FEED PEOPLE IN THE COMMUNITY AT A PAY-WHAT-YOU-CAN RESTAURANT, EMERGENCY RELIEF GRANT

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
TEXAS WESLEYAN UNIVERSITY 1201 WESLEYAN STREET FORT WORTH, TX 76105	75-0800691	501(C)(3)	7,916				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
THE COOPER MAX FOUNDATION 2520 CR 531 BURLESON, TX 76028	82-3832813	501(C)(3)	27,145				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 WELMAN PROJECT 2232 IRWIN STREET FORT WORTH, TX 76110	81-1116926	501(C)(3)	6,750				DIRECTS SURPLUS MATERIAL FROM BUSINESSES TO CLASSROOMS FOR CREATIVE REUSE
UNITED COMMUNITY CENTERS 1200 E MADDOX AVENUE FORT WORTH, TX 76104	23-7122922	501(C)(3)	44,745	1,814	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDE CLIENT INTERVENTION, ADULT LITERACY PROGRAMS, SOCIAL DEVELOPMENT PROGRAMS FOR CHILDREN, CHILD ABUSE PREVENTION, CHILDHOOD OBESITY SUPPORT AND EDUCATION, AND SCHOOL AGE CARE.

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 ALBANY COUNTY 710 E GARFIELD STREET SUITE 240 LARAMIE, WY 820703986	83-0186732	501(C)(3)	8,300				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF BRAZORIA COUNTY PO BOX 1959 ANGLETON, TX 775161959	74-1362982	501(C)(3)	7,901				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 OKLAHOMA PO BOX 248919 OKLAHOMA CITY, OK 73124	73-0589829	501(C)(3)	12,239				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF DENTON COUNTY 625 DALLAS DRIVE 525 DENTON, TX 76205	75-1251128	501(C)(3)	73,743				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 ATLANTA 100 EDGEWOOD AVE NE ATLANTA, GA 30303	58-0566194	501(C)(3)	8,126				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF GREATER HOUSTON PO BOX 3247 HOUSTON, TX 772533247	74-1167964	501(C)(3)	13,982				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 GTR AUSTIN 2000 EAST MLK JR BOULEVARD AUSTIN, TX 78702	74-1193439	501(C)(3)	34,741				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF HOOD COUNTY PO BOX 1611 GRANBURY, TX 76048	75-2794263	501(C)(3)	5,170				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 HUNT COUNTY PO BOX 224 GREENVILLE, TX 75401	75-0971619	501(C)(3)	10,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF JOHNSON COUNTY PO BOX 31 CLEBURNE, TX 76033	75-1101239	501(C)(3)	29,437				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 METROPOLITAN DALLAS 1800 NORTH LAMAR DALLAS, TX 75202	75-6005352	501(C)(3)	136,333				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF MID-SOUTH 1005 TILLMAN STREET MEMPHIS, TN 38112	56-1010742	501(C)(3)	7,420				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 MOJAVE VALLEY PO BOX 362 BARSTOW, CA 92312	95-2431051	501(C)(3)	6,762				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF PARKER COUNTY PO BOX 1476 WEATHERFORD, TX 76086	75-2867921	501(C)(3)	79,965				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 SAN ANTONIO PO BOX 898 SAN ANTONIO, TX 78293	74-1272381	501(C)(3)	13,874				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF THE COASTAL BEND 4659 EBERHART ROAD CORPUS CHRISTI, TX 78411	74-1207552	501(C)(3)	6,563				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 WACO- MCLENNAN CO 1516 AUSTIN AVENUE STE 2 WACO, TX 76710	74-1189027	501(C)(3)	10,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY OF WISE COUNTY PO BOX 213 DECATUR, TX 76234	75-1748583	501(C)(3)	16,876				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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 LUBBOCK AREA 1655 MAIN STREET 101 LUBBOCK, TX 794014592	75-0961812	501(C)(3)	5,327				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
UNITED WAY VALLEY OF THE SUN 3200 EAST CAMELBACK ROAD 375 PHOENIX, AZ 850182328	86-0104419	501(C)(3)	8,119				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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
UT SOUTHWESTERN MEDICAL CENTER PO BOX 910888 DALLAS, TX 753910888	75-2556007	501(C)(3)	10,000				RESEARCH GRANT
VOLUNTEERS OF AMERICA 300 E MIDWAY DRIVE EULESS, TX 76039	75-0827469	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

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 FORT WORTH CENTER OF HOPE 9516 CAMP BOWIE WEST SUITE A FORT WORTH, TX 76116	84-1890465	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF
WHAT ABOUT REMEMBERING ME DBA THE WARM PLACE 809 LIPSCOMB FORT WORTH, TX 761043121	75-2220859	501(C)(3)	5,055				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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
WHOLY WORKS CDC 12280 BUD CROSS ROAD FORT WORTH, TX 76179	81-5131144	501(C)(3)	10,000				OUTREACH AND PEER SUPPORT FOR WOMEN VETERANS
WOMEN'S CENTER OF TARRANT COUNTY 1723 HEMPHILL FORT WORTH, TX 76110	75-1501868	501(C)(3)	915,328				PROVIDES ADULT LITERACY EDUCATION PROGRAMS, SUPPORT AND SECURITY TO RAPED ADULTS AND CHILDREN, EMPLOYMENT PREPARATION, AND COUNSELING. ADULT LITERACY EVALUATION PROGRAM.

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
WORLD RELIEF CORPORATION OF NAT'L ASSOC OF EVANGELICALS 7 EAST BALTIMORE STREET BALTIMORE, MD 21202	23-6393344	501(C)(3)	5,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE ACCESS TO FOOD AND OTHER EMERGENCY RELIEF
YMCA OF ARLINGTON 1148-H WEST PIONEER PARKWAY ARLINGTON, TX 76013	75-1000839	501(C)(3)	32,867	571	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES SCHOOL AGE CHILDCARE, SOCIAL DEVELOPMENT PROGRAMS FOR CHILDREN AND YOUNG ADULTS, CHILDHOOD OBESITY SUPPORT AND EDUCATIONAL PROGRAMS, RUNS TRUCE PROGRAM A GANG PREVENTION PROGRAM, AND PROGRAMS TO PREVENT OLDER ADULTS ISOLATION. ALSO, RUNS A FITFUTURE CHILDHOOD OBESITY IMPACT PROJECT WITHIN THE FORT WORTH ISD TO REDUCE OBESITY BY PROMOTING FITNESS.

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
YMCA OF METRO FORT WORTH 512 LAMAR STREET 400 FORT WORTH, TX 76102	75-0827471	501(C)(3)	184,437	2,066	COST	PERSONAL PROTECTIVE EQUIPMENT	PROVIDES SCHOOL AGE CHILDCARE, SOCIAL DEVELOPMENT PROGRAMS FOR CHILDREN AND YOUNG ADULTS, CHILDHOOD OBESITY SUPPORT AND EDUCATIONAL PROGRAMS, RUNS TRUCE PROGRAM A GANG PREVENTION PROGRAM, AND PROGRAMS TO PREVENT OLDER ADULTS ISOLATION. ALSO, RUNS A FITFUTURE CHILDHOOD OBESITY IMPACT PROJECT WITHIN THE FORT WORTH ISD TO REDUCE OBESITY BY PROMOTING FITNESS.
YOUNG LIFE PO BOX 100996 FORT WORTH, TX 761850996	84-0385934	501(C)(3)	5,578				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY

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
YOUNG LIVES REDEEMED 1105 E COMMONWEALTH AVE STE A2 FULLERTON, CA 92831	47-1849084	501(C)(3)	10,000				DONOR DIRECTED FUNDS TRANSFERRED TO DESIGNATED CHARITY
YOUNG WOMEN'S LEADERSHIP ACADEMY 401 E 8TH STREET FORT WORTH, TX 76102	46-4264052	501(C)(3)	15,000				ENHANCE ACADEMIC ACHIEVEMENT AND OFFER LEADERSHIP OPPORTUNITIES THAT PROMOTE THE SUCCESS OF THE STUDENTS

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
YOUTH ADVOCATE PROGRAM INC 2007 NORTH THIRD STREET HARRISBURG, PA 17102	23-1977514	501(C)(3)	10,000				EMERGENCY RELIEF FUND GRANT TO PROVIDE EMERGENCY RELIEF

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047
2019
Open to Public Inspection

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.

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF TARRANT COUNTY

Employer identification number
75-0858360

Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account		
<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input checked="" type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b Yes	
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?	2 Yes	
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.		
<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations		
<input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b Yes	
c Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	No
b Any related organization?	5b	No
If "Yes," on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	No
b Any related organization?	6b	No
If "Yes," on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	No
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.	8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	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 1A	UNITED WAY PAYS FOR THE PRESIDENT/CEO TO BE A MEMBER OF THE FORT WORTH CLUB TO FACILITATE THE RECRUITMENT AND DEVELOPMENT OF POTENTIAL VOLUNTEERS AND DONORS IN FURTHERANCE OF THE MISSION OF THE ORGANIZATION.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

▶ **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.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF TARRANT COUNTY

Employer identification number
75-0858360

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	X		37,619	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
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 ▶ (<u>CELL PHONES</u>)	X	600	60,000	FMV
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?		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?		No
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		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**

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.

OMB No. 1545-0047

2019**Open to Public Inspection**

Department of the Treasury

Name of the organization

UNITED WAY OF TARRANT COUNTY

Employer identification number

75-0858360

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 IS REVIEWED BY THE ORGANIZATION'S GOVERNING BODY BEFORE IT IS FILED.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	THE CONFLICT OF INTEREST POLICY IS MONITORED BY THE ORGANIZATION. BOARD MEMBERS MAKE AN ANNUAL DECLARATION IDENTIFYING OTHER ORGANIZATIONS AND BUSINESSES IN WHICH THEY HAVE AN INTEREST. THESE ARE THEN REVIEWED AGAINST THE VARIOUS INTERESTS OF THE ORGANIZATION TO IDENTIFY ANY POTENTIAL CONFLICTS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15	THE COMPENSATION COMMITTEE, MADE UP OF BOARD MEMBERS, DOES AN ANNUAL REVIEW OF ALL KEY EMPLOYEE'S COMPENSATION. THEY BENCHMARK CURRENT COMPENSATION AGAINST THE MARKET AS WELL AS UNITED WAY OF AMERICA & UNITED WAY OFFICES OF SIMILAR SIZE TO ENSURE CURRENT COMPENSATION IS COMPARABLE. COMPENSATION IS ALSO MONITORED AGAINST THE ANNUAL BUDGET. THE COMMITTEE THEN EVALUATES PRESIDENT/CEO COMPENSATION INCLUDING AN INCENTIVE PLAN; THE COMMITTEE THEN MAKES RECOMMENDATIONS FOR BOARD APPROVAL FOR PRESIDENT/CEO PAY ADJUSTMENT. THE COMMITTEE ALSO APPROVES THE PRESIDENT/CEO'S RECOMMENDATIONS FOR OTHER HIGHLY COMPENSATED EMPLOYEES' PAY ADJUSTMENTS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 18	THE ORGANIZATION MAKES ITS 990 AVAILABLE TO THE PUBLIC VIA THEIR WEBSITE. FORM 1023 IS AVAILABLE UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES THEIR AUDITED FINANCIAL STATEMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE TO THE PUBLIC VIA THEIR WEBSITE, OTHER GOVERNING DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9:	OTHER CHANGES IN ASSETS HELD BY OTHERS -12,803. TIMING DIFFERENCES FOR DONOR DESIGNATED FUNDS -15,551. PENSION ADJUSTMENT 2,712.

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2019

**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 TARRANT COUNTY

Employer identification number

75-0858360

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) BOARD DEVELOPMENT SYSTEMS INC 1500 NORTH MAIN STREET SUITE 200 FORT WORTH, TX 76164 83-1151273	SUPPORTING ORGANIZATION	TX	501(C)(3)	LINE 12A, I			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		No
b Gift, grant, or capital contribution to related organization(s)	Yes	
c Gift, grant, or capital contribution from related organization(s)		No
d Loans or loan guarantees to or for related organization(s)	Yes	
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses		No
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		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) BOARD DEVELOPMENT SYSTEMS	D	11,819	COST
(2) BOARD DEVELOPMENT SYSTEMS	B	123,371	COST
(3) BOARD DEVELOPMENT SYSTEMS	O	829,997	COST

Part VII **Supplemental Information**

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

Return Reference	Explanation