TAX RETURN FILING INSTRUCTIONS

PUBLIC INSPECTION COPY

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

EXTENDED TO MAY 16, 2022

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

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

OMB No. 1545-0047

2020

Open to Public Inspection

A For the 2020 calendar year, or tax year beginning JUL 1, 2020 and ending JUN 30, 2021

B Check if applicable:
- ☐ Address change
- ☐ Name change
- ☐ Initial return
- ☐ Final return/ termin-ated
- ☐ Amended return
- ☐ Applica-tion pending

C Name of organization
UNITED WAY OF METROPOLITAN DALLAS, INC

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
1800 N. LAMAR STREET

City or town, state or province, country, and ZIP or foreign postal code
DALLAS, TX 75202

F Name and address of principal officer: JENNIFER SAMPSON
SAME AS C ABOVE

D Employer identification number
75-6005352

E Telephone number
214-978-0000

G Gross receipts $ 61,265,319.

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.UNITEDWAYDALLAS.ORG

K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation: 1961 M State of legal domicile: TX

Part I Summary

1 Briefly describe the organization's mission or most significant activities: UNITED WAY OF METROPOLITAN DALLAS IS A SOCIAL CHANGE ORGANIZATION (CONTINUED IN SCHEDULE O)

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	23
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	23
5	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	113
6	Total number of volunteers (estimate if necessary)	6	10812
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	53,655,309.	59,237,501.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	162,532.	105,229.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,099,447.	1,922,589.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	54,917,288.	61,265,319.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	38,629,217.	43,217,445.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	9,795,247.	9,505,860.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,682,007.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	6,088,682.	6,327,163.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	54,513,146.	59,050,468.
19	Revenue less expenses. Subtract line 18 from line 12	404,142.	2,214,851.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	44,474,521.	52,867,984.
21	Total liabilities (Part X, line 26)	12,498,289.	18,102,673.
22	Net assets or fund balances. Subtract line 21 from line 20	31,976,232.	34,765,311.

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

▶ JANICE HARISSIS, CFO
Type or print name and title

COPY, NOT FOR FILING

Paid Preparer Use Only

Print/Type preparer's name: MICHELLE L WEBER
Preparer's signature: Michelle L Weber Digitally signed by Michelle L Weber Date: 2022.06.29 12:55:36 -05'00' Date
Check ☐ if self-employed
PTIN: P00556798

Firm's name ▶ GRANT THORNTON LLP
Firm's EIN ▶ 36-6055558

Firm's address ▶ 100 E. WISCONSIN AVE.
MILWAUKEE, WI 53202
Phone no. 414-289-8200

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

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

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

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... ☐ Yes ☒ 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 $ 23,022,748. including grants of $ 19,801,490.) (Revenue $ 7,070.)
UWMD BUILDS AND LEADS COLLABORATIVE INITIATIVES THAT ENSURE MORE STUDENTS GRADUATE READY TO SUCCEED, ENABLE MORE FAMILIES TO BECOME FINANCIALLY STABLE, AND GIVE PEOPLE THE TOOLS TO LEAD HEALTHY, PRODUCTIVE LIVES. EXAMPLES INCLUDE:

1. PATHWAYS TO ECONOMIC MOBILITY HELPS FAMILIES INCREASE SAVINGS, IMPROVE CREDIT SCORES, REDUCE DEBT AND AVOID PREDATORY LENDING PRODUCTS. IN FISCAL YEAR 2020-2021, AS A RESULT OF THE PANDEMIC, UNITED WAY EXPANDED BASIC NEEDS PROGRAM THAT PROVIDED HOUSING AND SHELTER SERVICES TO 4,500 HOUSEHOLDS, FOOD TO 100,000 HOUSEHOLDS, PREPARED MEALS TO 23,000 PEOPLE, AND FINANCIAL ASSISTANCE FOR RENT, UTILITY AND TRANSPORTATION TO 10,000 HOUSEHOLDS. OUR FREE (CONTINUED IN SCHEDULE O)

4b (Code:) (Expenses $ 19,667,708. including grants of $ 15,067,459.) (Revenue $ 0.)
AT UWMD, OUR MISSION IS TO ENSURE ALL NORTH TEXANS HAVE THE OPPORTUNITY AND ACCESS TO THRIVE. WE BELIEVE IN THE POWER OF UNITY AND EQUITY TO CREATE LASTING CHANGE, AND WE WORK WITH SUPPORTERS FROM THE PHILANTHROPIC, EDUCATION, CIVIC, CORPORATE AND NONPROFIT SECTORS, AS WELL AS THE COMMUNITY AS A WHOLE, TO CREATE OPPORTUNITY FOR ALL NORTH TEXANS. OUR ORGANIZATION PARTNERS WITH AND SUPPORTS MORE THAN 200 NONPROFIT SERVICE PROVIDERS, MOBILIZING A COMMUNITY-WIDE MOVEMENT THAT WORKS TO ENSURE ALL OUR NEIGHBORS HAVE ACCESS TO EDUCATION, INCOME, AND HEALTH-THE BUILDING BLOCKS OF OPPORTUNITY.

WORKING WITH OTHER COMMUNITY LEADERS, UWMD HAS SET BOLD ASPIRE UNITED GOALS FOR 2030. IN EDUCATION WE SEEK TO (CONTINUED IN SCHEDULE O)

4c (Code:) (Expenses $ 8,348,496. including grants of $ 8,348,496.) (Revenue $ 1,798,931.)
DISTRIBUTING DONOR-DESIGNATED CONTRIBUTIONS TO NONPROFIT ORGANIZATIONS: UWMD ALSO ENABLES DONORS TO DESIGNATE THEIR GIFTS TO OTHER UNITED WAYS OR TO SPECIFIC AGENCIES. IN FISCAL YEAR 2020-2021, UWMD PROCESSED $8,348,496 MILLION IN DESIGNATIONS.

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

4e Total program service expenses ▶ 51,038,952.

Form 990 (2020)

032002 12-23-20

SEE SCHEDULE O FOR CONTINUATION(S)

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*	1	X	
2	Is the organization required to complete *Schedule B, Schedule of Contributors*?	2	X	
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*	3		X
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*	4	X	
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*	5		X
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*	6		X
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*	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? *If "Yes," complete Schedule D, Part III*	8		X
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*	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? *If "Yes," complete Schedule D, Part V*	10	X	
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.			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	X	
b	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*	11b		X
c	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*	11c		X
d	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*	11d	X	
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	X	
f	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*	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a		X
b	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*	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? *If "Yes," complete Schedule E*	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	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*	14b		X
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*	15		X
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*	16		X
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*	17		X
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*	18		X
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*	19		X
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
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*	21	X	

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b	X	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O	38	X	

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 ☐

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	79		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c X	

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a	113		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		X	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a			X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	3b			
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a			X
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a			X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b			X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c			
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a			X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b			
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c			X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e			X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f			X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h			
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8			
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a			
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b			
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?	13a			
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a			X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b			
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	15			X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16			X

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	23		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	23		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

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

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶ NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☒ Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶

JANICE HARISSIS - 214-978-0000

1800 N LAMAR STREET, DALLAS, TX 75202

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than $100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than $10,000 of reportable compensation from the organization and any related organizations.

See instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(1) JENNIFER SAMPSON	32.00									
PRESIDENT AND CEO	8.00			X				625,178.	0.	129,953.
(2) SUSAN HOFF	34.00									
CHIEF IMPACT/STRATEGY OFFICER	6.00			X				441,586.	0.	46,200.
(3) JANICE HARISSIS	38.00									
CHIEF FINANCIAL OFFICER	2.00			X				312,412.	0.	8,253.
(4) ASHLEY BRUNDAGE	40.00									
SVP, COMMUNITY IMPACT	0.00					X		154,176.	0.	40,600.
(5) KIMBERLY SCOTT	40.00									
VP, STRATEGIC DEVELOPMENT PROJECTS	0.00					X		159,356.	0.	29,212.
(6) CANDACE BARNES	40.00									
SVP, HUMAN RESOURCES	0.00					X		131,504.	0.	43,211.
(7) JAIME GARCIA	40.00									
DIRECTOR, ENTERPRISE ANALYTICS	0.00					X		131,444.	0.	29,709.
(8) MELISSA REDDICK	40.00									
VP, CORPORATE ENGAGEMENT	0.00					X		135,231.	0.	22,950.
(9) JENNIFER REEVES	40.00									
CORPORATE SECRETARY	0.00			X				93,310.	0.	28,089.
(10) CHARLENE LAKE	5.00									
BOARD CHAIR	0.00	X		X				0.	0.	0.
(11) TERRI WEST	5.00									
UWFMD BOARD CHAIR	5.00	X		X				0.	0.	0.
(12) MICHELLE VOPNI	5.00									
TREASURER	0.00	X		X				0.	0.	0.
(13) JAMES HINTON	5.00									
COMPENSATION COMMITTEE CHAIR	0.00	X						0.	0.	0.
(14) DAN BERNER	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(15) KARL BOVEE	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(16) ANTONIO CARRILLO	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(17) JORGE CORRAL	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(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			
(18) RICHARD FEDOCK	5.00									
AUDIT AND ETHICS CHAIR	0.00	X						0.	0.	0.
(19) REGEN HORCHOW	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(20) SCOTT HUDSON	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(21) PEDRO LERMA	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(22) DAVID MARTIN	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(23) GAIL MCDONALD	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(24) SCOTT MOORE	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(25) DAVID PARK	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
(26) SANDRA PHILLIPS ROGERS	2.00									
AT-LARGE MEMBER	0.00	X						0.	0.	0.
1b Subtotal ▶								2,184,197.	0.	378,177.
c Total from continuation sheets to Part VII, Section A ▶								0.	0.	0.
d Total (add lines 1b and 1c) ▶								2,184,197.	0.	378,177.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 17

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
VOOKS, INC., 25 NW 23RD PLACE, SUITE 6, PMB#122, PORTLAND, OR 97210	PROGRAM IMPL & OVERSIGHT	472,509.
DALLAS INDEPENDENT SCHOOL DISTRICT 801 MAIN STREET, DALLAS, TX 75202	HHSC CONTRACTOR	308,267.
DALLAS COUNTY HOSPITAL DISTRICT P.O. BOX 660599, DALLAS, TX 75266	HOPES PROGRAM CONTRACTOR	292,607.
FERST FOUNDATION FOR CHILDHOOD LITERACY 237 N. SECOND STREET, MADISON, GA 30650	PROGRAM IMPL & OVERSIGHT	207,227.
FAMILY CARE CONNECTION, 6969 PASTOR BAILEY DRIVE, SUITE 140, DALLAS, TX 75237	PROGRAM IMPL & OVERSIGHT	168,846.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 10

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(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
(27) JENNIFER SAENZ AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(28) PETER SEFZIK AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(29) JULIE VAN HAREN RESOURCE DEVELOPMENT CHAIR	5.00 0.00	X						0.	0.	0.
(30) STEVEN WILLIAMS AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
(31) BOB WRIGHT COMMUNITY IMPACT CHAIR	5.00 0.00	X						0.	0.	0.
(32) CHRIS WYSE AT-LARGE MEMBER	2.00 0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

				(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	257,150.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	2,600,000.				
	e Government grants (contributions)	1e	17,704,522.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	38,675,829.				
	g Noncash contributions included in lines 1a-1f	1g	$ 436,886.				
	h **Total.** Add lines 1a-1f ▶			59,237,501.			
Program Service Revenue			**Business Code**				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f ▶						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶			105,229.			105,229.
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
			(i) Real / (ii) Personal				
	6a Gross rents	6a					
	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 / (ii) Other				
	b Less: cost or other basis and sales expenses	7b					
	c Gain or (loss)	7c					
	d Net gain or (loss) ▶						
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	8a					
	b Less: direct expenses	8b					
	c Net income or (loss) from fundraising events ▶						
	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 DESIGNATION PROCESSING FEES		561000	1,798,931.	1,798,931.		
	b FLEX CREDITS		900099	46,656.			46,656.
	c INSURANCE REIMBURSEMENT		900099	43,559.			43,559.
	d All other revenue		900099	33,443.	7,070.		26,373.
	e **Total.** Add lines 11a-11d ▶			1,922,589.			
	12 **Total revenue.** See instructions ▶			61,265,319.	1,806,001.	0.	221,817.

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 X

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	43,217,445.	43,217,445.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
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	1,657,628.	562,133.	439,581.	655,914.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	89,376.	30,884.		58,492.
7 Other salaries and wages	6,219,327.	2,404,636.	1,611,320.	2,203,371.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	252,890.	111,911.	49,913.	91,066.
9 Other employee benefits	738,026.	290,230.	151,689.	296,107.
10 Payroll taxes	548,613.	235,101.	92,670.	220,842.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	159,323.	30,370.	92,646.	36,307.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	1,546,448.	694,667.	541,432.	310,349.
12 Advertising and promotion	728,194.	461,616.	1,934.	264,644.
13 Office expenses	125,498.	34,333.	42,672.	48,493.
14 Information technology	566,800.	207,651.	142,677.	216,472.
15 Royalties				
16 Occupancy	273,754.	172,773.	19,256.	81,725.
17 Travel	5,840.	3,357.	279.	2,204.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	240,326.	205,953.	3,759.	30,614.
20 Interest	14,760.	11,070.	1,218.	2,472.
21 Payments to affiliates	576,212.	481,886.	37,684.	56,642.
22 Depreciation, depletion, and amortization	710,307.	594,030.	46,454.	69,823.
23 Insurance	71,486.	54,032.	5,760.	11,694.
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a DESIGNATION PROC. FEES	1,193,014.	1,193,014.	0.	0.
b MEMBERSHIP DUES	38,083.	10,527.	22,728.	4,828.
c EXTERNAL GIFTS	32,614.	3,197.	16,537.	12,880.
d SUBSCRIPTIONS & DUES	18,887.	12,805.	3,614.	2,468.
e All other expenses	25,617.	15,331.	5,686.	4,600.
25 **Total functional expenses.** Add lines 1 through 24e	59,050,468.	51,038,952.	3,329,509.	4,682,007.
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 ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing	7,689,161.	1	11,860,175.
	2	Savings and temporary cash investments	4,347,798.	2	6,353,458.
	3	Pledges and grants receivable, net	13,765,195.	3	14,145,173.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	434,626.	9	401,572.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 13,448,576.			
	b	Less: accumulated depreciation — 10b: 8,653,785.	5,340,410.	10c	4,794,791.
	11	Investments - publicly traded securities		11	484,660.
	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	12,897,331.	15	14,828,155.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	44,474,521.	16	52,867,984.
Liabilities	17	Accounts payable and accrued expenses	1,375,305.	17	7,411,724.
	18	Grants payable	7,382,500.	18	7,450,000.
	19	Deferred revenue	0.	19	0.
	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	1,398,300.	24	1,653,966.
	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	2,342,184.	25	1,586,983.
	26	**Total liabilities.** Add lines 17 through 25	12,498,289.	26	18,102,673.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here ▶ ☒ and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	6,133,757.	27	14,450,136.
	28	Net assets with donor restrictions	25,842,475.	28	20,315,175.
		Organizations that do not follow FASB ASC 958, check here ▶ ☐ 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	31,976,232.	32	34,765,311.
	33	Total liabilities and net assets/fund balances	44,474,521.	33	52,867,984.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	61,265,319.
2	Total expenses (must equal Part IX, column (A), line 25)	2	59,050,468.
3	Revenue less expenses. Subtract line 2 from line 1	3	2,214,851.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	31,976,232.
5	Net unrealized gains (losses) on investments	5	-96,590.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	670,818.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	34,765,311.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ 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	2a		X
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	2b	X	
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 on Schedule O.	2c	X	
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?	3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	X	

Form 990 (2020)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number
75-6005352

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 **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3).** Check the box 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? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	62951397.	56302770.	63322626.	53655309.	59237501.	295469603
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	62951397.	56302770.	63322626.	53655309.	59237501.	295469603
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)						72053378.
6 **Public support.** Subtract line 5 from line 4.						223416225

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
7 Amounts from line 4	62951397.	56302770.	63322626.	53655309.	59237501.	295469603
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	93,400.	163,334.	262,509.	162,532.	105,229.	787,004.
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.)	76,358.	90,631.	16,641.	89,810.	116,588.	390,028.
11 **Total support.** Add lines 7 through 10						296646635

12 Gross receipts from related activities, etc. (see instructions) ..... 12 6,717,577.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) ..... 14 75.31 %

15 Public support percentage from 2019 Schedule A, Part II, line 14 ..... 15 72.78 %

16a **33 1/3% support test - 2020.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☒

b **33 1/3% support test - 2019.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ..... ▶ ☐

17a **10% -facts-and-circumstances test - 2020.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... ▶ ☐

b **10% -facts-and-circumstances test - 2019.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ..... ▶ ☐

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) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2019 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

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

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

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

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *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.*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in* **Part VI** *how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer lines 3b and 3c below.*	3a		
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)? *If "Yes," describe in* **Part VI** *when and how the organization made the determination.*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in* **Part VI** *what controls the organization put in place to ensure such use.*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *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.*	4b		
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)? *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.*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in* **Part VI,** *including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	5a		
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?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
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? *If "Yes," provide detail in* **Part VI.**	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	8		
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))? *If "Yes," provide detail in* **Part VI.**	9a		
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? *If "Yes," provide detail in* **Part VI.**	9b		
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? *If "Yes," provide detail in* **Part VI.**	9c		
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)? *If "Yes," answer line 10b below.*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	10b		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in line 11a above?	**11b**		
c	A 35% controlled entity of a person described in line 11a or 11b above? *If "Yes" to line 11a, 11b, or 11c, provide detail in* **Part VI.**	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? *If "No," describe in* **Part VI** *how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
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? *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.*	**2**		

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)? *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).*	**1**		

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?	**1**		
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? *If "No," explain in* **Part VI** *how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in* **Part VI** *the role the organization's supported organizations played in this regard.*	**3**		

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** ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*
- **b** ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*
- **c** ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

			Yes	No
2	Activities Test. **Answer lines 2a and 2b below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *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.*	**2a**		
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *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.*	**2b**		
3	Parent of Supported Organizations. **Answer lines 3a and 3b below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If "Yes" or "No" provide details in* **Part VI.**	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*	**3b**		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (*explain in detail in* **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by 0.035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	**1**		
2 Enter 0.85 of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions			**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	**1**	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	**2**	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	**3**	
4	Amounts paid to acquire exempt-use assets	**4**	
5	Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	**5**	
6	Other distributions (*describe in* **Part VI**). See instructions.	**6**	
7	**Total annual distributions.** Add lines 1 through 6.	**7**	
8	Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	**8**	
9	Distributable amount for 2020 from Section C, line 6	**9**	
10	Line 8 amount divided by line 9 amount	**10**	

Section E - Distribution Allocations (see instructions)		**(i) Excess Distributions**	**(ii) Underdistributions Pre-2020**	**(iii) Distributable Amount for 2020**
1	Distributable amount for 2020 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2020 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2020			
a	From 2015			
b	From 2016			
c	From 2017			
d	From 2018			
e	From 2019			
f	**Total** of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2020 distributable amount			
i	Carryover from 2015 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2020 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2020 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, *explain in* **Part VI.** See instructions.			
6	Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI**. See instructions.			
7	**Excess distributions carryover to 2021.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2016			
b	Excess from 2017			
c	Excess from 2018			
d	Excess from 2019			
e	Excess from 2020			

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

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

OTHER INCOME

2016 AMOUNT: $ 76,358.

2017 AMOUNT: $ 30.

2018 AMOUNT: $ 914.

2019 AMOUNT: $ 3,386.

2020 AMOUNT: $ 18,933.

FLEX CREDIT

2017 AMOUNT: $ 25,682.

2018 AMOUNT: $ 9,295.

2019 AMOUNT: $ 52,919.

2020 AMOUNT: $ 46,656.

INSURANCE COMPANY DIVIDEND

2017 AMOUNT: $ 8,989.

2018 AMOUNT: $ 6,432.

2019 AMOUNT: $ 13,523.

2020 AMOUNT: $ 43,559.

GROSS FUNDRAISING REVENUE

2017 AMOUNT: $ 55,930.

DEFERRED COMPENSATION

2019 AMOUNT: $ 19,982.

2020 AMOUNT: $ 7,440.

** PUBLIC DISCLOSURE COPY **

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2020

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

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

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

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

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

Name of organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 11,931,761.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 5,166,428.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 3,767,814.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 2,600,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5		$ 2,374,443.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)
6		$ 1,856,334.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		$ 1,626,542.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)
8		$ 1,413,060.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
9		$ 1,403,109.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		$	

Name of organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part III **Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this info. once.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

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

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

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

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

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

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

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

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political campaign activity expenditures ▶ $

3 Volunteer hours for political campaign activities

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ $

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

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No

4a Was a correction made? ☐ Yes ☐ No

b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ $

4 Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	211,716.	0.
b Total lobbying expenditures to influence a legislative body (direct lobbying)	5,000.	0.
c Total lobbying expenditures (add lines 1a and 1b)	216,716.	0.
d Other exempt purpose expenditures	58,833,752.	0.
e Total exempt purpose expenditures (add lines 1c and 1d)	59,050,468.	0.
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	0.
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	0.
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	177,421.	219,009.	246,022.	216,716.	859,168.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	176,990.	218,936.	241,022.	211,716.	848,664.

Schedule C (Form 990 or 990-EZ) 2020

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

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

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

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

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

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

Part IV **Supplemental Information**

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

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number
75-6005352

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(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 (for example, recreation or education)
- ☐ Preservation of a 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 Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ $ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

(ii) Assets included in Form 990, Part X ▶ $ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 ▶ $ _____

b Assets included in Form 990, Part X ▶ $ _____

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

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange program
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII ☐

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	43,865,673.	47,147,486.	45,173,952.	41,867,356.	34,658,230.
b Contributions	1,376,636.	2,242,870.	1,799,685.	3,258,494.	5,769,411.
c Net investment earnings, gains, and losses	12,536,616.	1,682,382.	2,761,370.	3,137,160.	4,641,271.
d Grants or scholarships					
e Other expenditures for facilities and programs	3,206,594.	3,182,266.	2,587,521.	3,089,058.	1,420,820.
f Administrative expenses		4,024,799.			1,780,736.
g End of year balance	54,572,331.	43,865,673.	47,147,486.	45,173,952.	41,867,356.

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

a Board designated or quasi-endowment ▶ 51.4900 %
b Permanent endowment ▶ 42.3500 %
c Term endowment ▶ 6.1600 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

	Yes	No
(i) Unrelated organizations (3a(i))		X
(ii) Related organizations (3a(ii))	X	
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? (3b)	X	

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		211,259.		211,259.
b Buildings		8,797,847.	5,541,852.	3,255,995.
c Leasehold improvements		1,138,954.	550,157.	588,797.
d Equipment		2,491,726.	1,878,691.	613,035.
e Other		808,790.	683,085.	125,705.
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				4,794,791.

Part VII Investments - Other Securities.

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

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

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) ▶		

Part IX Other Assets.

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

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN TRUSTS	12,001,239.
(2) DUE FROM UNITED WAY FOUNDATION	2,709,274.
(3) DEFERRED COMPENSATION	117,642.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	14,828,155.

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DONOR DESIGNATIONS	1,321,099.
(3) DUE TO UNITED WAY FOUNDATION	265,884.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	1,586,983.

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

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	53,813,253.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-96,590.		
b	Donated services and use of facilities	2b	322,202.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-7,677,678.		
e	Add lines **2a** through **2d**			2e	-7,452,066.
3	Subtract line **2e** from line **1**			3	61,265,319.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total revenue. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 12.)*			5	61,265,319.

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

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

1	Total expenses and losses per audited financial statements			1	51,024,174.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	322,202.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	-8,348,496.		
e	Add lines **2a** through **2d**			2e	-8,026,294.
3	Subtract line **2e** from line **1**			3	59,050,468.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	0.
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	59,050,468.

Part XIII Supplemental Information.

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

PART V, LINE 4:

INTENDED USE OF ENDOWMENT FUNDS

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

PART X, LINE 2:

LIABILITY FOR UNCERTAIN TAX POSITIONS (ASC 740)

BOTH UNITED WAY AND THE FOUNDATION ARE EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THUS, NO PROVISION FOR INCOME TAXES IS INCLUDED IN THE ACCOMPANYING CONSOLIDATED FINANCIAL

Part XIII Supplemental Information *(continued)*

STATEMENTS.

UNITED WAY AND THE FOUNDATION FOLLOW THE ACCOUNTING GUIDANCE FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES, RECOGNIZING THE FINANCIAL STATEMENT BENEFIT OF A TAX POSITION ONLY AFTER DETERMINING THAT THE RELEVANT TAX AUTHORITY WOULD MORE LIKELY THAN NOT SUSTAIN THE POSITION FOLLOWING AN AUDIT. FOR TAX POSITIONS MEETING THE MORE-LIKELY-THAN-NOT THRESHOLD, THE AMOUNT RECOGNIZED IN THE FINANCIAL STATEMENTS IS THE LARGEST BENEFIT THAT HAS A GREATER THAN 50% LIKELIHOOD OF BEING REALIZED UPON ULTIMATE SETTLEMENT WITH THE RELEVANT TAX AUTHORITY. UNITED WAY AND THE FOUNDATION APPLIED THE UNCERTAIN TAX POSITION GUIDANCE TO ALL TAX POSITIONS FOR WHICH THE STATUTE OF LIMITATIONS REMAINED OPEN AND DETERMINED THERE WERE NO MATERIAL UNRECOGNIZED TAX BENEFITS AS OF THAT DATE. UNITED WAY AND THE FOUNDATION DO NOT BELIEVE THERE IS ANY UNCERTAINTY WITH RESPECT TO THE TAX POSITION WHICH WOULD RESULT IN A MATERIAL CHANGE TO THE FINANCIAL STATEMENTS.

UNITED WAY AND THE FOUNDATION ARE SUBJECT TO FEDERAL AND STATE INCOME TAXES TO THE EXTENT THEY HAVE UNRELATED BUSINESS INCOME. IN ACCORDANCE WITH THE GUIDANCE FOR UNCERTAINTY IN INCOME TAXES, MANAGEMENT HAS EVALUATED THEIR MATERIAL TAX POSITIONS AND DETERMINED THAT THERE ARE NO MATERIAL INCOME TAX EFFECTS WITH RESPECT TO ITS FINANCIAL STATEMENTS. MANAGEMENT HAS DETERMINED THAT THERE IS NO MATERIAL UNRELATED BUSINESS INCOME TO REPORT FOR UNITED WAY OR THE FOUNDATION AND HAS NOT HISTORICALLY FILED UNRELATED BUSINESS INCOME TAX RETURNS. THEREFORE, TAX YEARS REMAIN OPEN FOR YEARS IN WHICH AN INCOME TAX RETURN HAS NOT BEEN FILED.

THERE WAS NO INTEREST RELATED TO INCOME TAXES THAT HAS BEEN ACCRUED OR

Part XIII Supplemental Information *(continued)*

RECOGNIZED AS OF AND FOR THE YEARS ENDED JUNE 30, 2021 AND 2020. THERE WERE NOMINAL PENALTIES RELATED TO INCOME TAXES RECOGNIZED AS OF AND FOR THE YEARS ENDED JUNE 30, 2021 AND 2020.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

DESIGNATIONS TO AGENCIES	-10,019,563.
CHANGE OF INTEREST HELD IN TRUSTS	2,341,885.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-7,677,678.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

DESIGNATIONS TO AGENCIES	-8,348,496.

RECONCILIATION OF ASSETS AND LIABILITIES TO FINANCIALS:

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

	UWMD	UWFMD	ELIMINATIONS	CONSOLIDATED
TOTAL ASSETS	52,867,984	60,886,315	(2,975,158)	110,779,141
TOTAL LIABILITIES	18,102,673	2,709,274	(2,975,158)	17,836,789
NET ASSETS	34,765,311	58,177,041	0	92,942,352

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization
UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number
75-6005352

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ..... [X] Yes [ ] No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
2 INSPIRE PEACE INC. 1409 S. LAMAR STREET #211 DALLAS, TX 75208	84-3727348	501(C)(3)	10,250.	0.			PROGRAM OPS COST
2000 ROSES FOUNDATION INCORPORATED 2000 W 10TH ST DALLAS, TX 75208	75-2825776	501(C)(3)	27,716.	0.			PROGRAM OPS COST
ACHIEVE (FKA CITIZENS DEVELOPMENT CENTER) - 8800 AMBASSADOR ROW - DALLAS, TX 75247	75-1008422	501(C)(3)	185,000.	0.			PROGRAM OPS COST
ADVANCENET LABS P.O. BOX 368 GRAPEVINE, TX 76099	46-5492631	501(C)(3)	50,000.	0.			PROGRAM OPS COST
AES LITERACY INSTITUTE 8204 ELMBROOK DR, STE. 221 DALLAS, TX 75247	83-3899952	501(C)(3)	23,985.	0.			PROGRAM OPS COST
AFTER8TOEDUCATE 2904 FLOYD ST., STE B DALLAS, TX 75230	82-3145228	501(C)(3)	20,833.	0.			PROGRAM OPS COST

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... ▶ 252.

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

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AFTER-SCHOOL ALL-STARS NORTH TEXAS 2904 FLOYD STREET DALLAS, TX 75204	95-4441208	501(C)(3)	164,650.	0.			PROGRAM OPS COST
AGAPE RESOURCE & ASSISTANCE CENTER, INC. - PO BOX 861664 - PLANO, TX 75086-1664	75-2942035	501(C)(3)	100,000.	0.			PROGRAM OPS COST
ALLEN COMMUNITY OUTREACH 801 E. MAIN STREET ALLEN, TX 75002	75-1986190	501(C)(3)	25,000.	0.			PROGRAM OPS COST
AMERICA CAN! 325 W. 12TH STREET, 2ND FLOOR DALLAS, TX 75208	75-2251099	501(C)(3)	35,000.	0.			PROGRAM OPS COST
ANITA N. MARTINEZ BALLET FOLKLORIC INC - 4422 LIVE OAK ST - DALLAS, TX 75204	75-1814458	501(C)(3)	34,587.	0.			PROGRAM OPS COST
ARTIST OUTREACH, INC 10,000 N CENTRAL EXPRESSWAY STE 400 DALLAS, TX 75231	46-0638240	501(C)(3)	12,000.	0.			PROGRAM OPS COST
ASSISTANCE CENTER OF COLLIN COUNTY 900 EAST 18TH STREET PLANO, TX 75074	75-1550604	501(C)(3)	20,000.	0.			PROGRAM OPS COST
AUSTIN STREET CENTER 2929 HICKORY STREET DALLAS, TX 75226	75-1881365	501(C)(3)	71,392.	0.			PROGRAM OPS COST
AVANCE DALLAS 2060 SINGLETON BLVD., STE. 103 DALLAS, TX 75212	75-2699260	501(C)(3)	715,694.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AZAR FOUNDATION 1111 W. MOCKINGBIRD LN. STE 1300-5 DALLAS, TX 75247	45-2670332	501(C)(3)	26,407.	0.			PROGRAM OPS COST
BACHMAN LAKE TOGETHER 9507 OVERLAKE DR DALLAS, TX 75220	81-4526609	501(C)(3)	80,000.	0.			PROGRAM OPS COST
BAYLOR HEALTH CARE SYSTEM FOUNDATION - 3600 GASTON AVE., BARNETT TOWER SUITE 100 - DALLAS, TX 75246	75-1606705	501(C)(3)	60,000.	0.			PROGRAM OPS COST
BAYLOR UNIVERSITY 1111 W. MOCKINGBIRD LANE, STE 1350 DALLAS, TX 75247	74-1159753	501(C)(3)	77,000.	0.			PROGRAM OPS COST
BEACON HILL PREPARATORY INSTITUTE 1402 CORINTH STREET, SUITE 257 DALLAS, TX 75215	42-1624235	501(C)(3)	178,500.	0.			PROGRAM OPS COST
BELKNAP MINISTRIES 2019 N MASTERS DALLAS, TX 75217	45-2810447	501(C)(3)	15,000.	0.			PROGRAM OPS COST
BETTER BLOCK FOUNDATION PO BOX 4007 DALLAS, TX 75382	47-4885264	501(C)(3)	55,000.	0.			PROGRAM OPS COST
BIG BROTHERS BIG SISTERS LONE STAR 450 E JOHN CHCARP FREEWAY, STE 300 IRVING, TX 75062	75-0800632	501(C)(3)	100,000.	0.			PROGRAM OPS COST
BIG THOUGHT 1409 S LAMAR STREET, STE 1015 DALLAS, TX 75215	75-2170035	501(C)(3)	27,547.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUBS OF COLLIN COUNTY - 7790 MAIN STREET - FRISCO, TX 75033	75-1296869	501(C)(3)	55,000.	0.			PROGRAM OPS COST
BOYS & GIRLS CLUBS OF GREATER DALLAS - 4816 WORTH STREET - DALLAS, TX 75246	75-1152657	501(C)(3)	370,000.	0.			PROGRAM OPS COST
BRIDGE LACROSSE DALLAS INC P.O. BOX 190844 DALLAS, TX 75219	16-1671742	501(C)(3)	6,000.	0.			PROGRAM OPS COST
BRIDGE STEPS DBA THE BRIDGE 1818 CORSICANA ST. DALLAS, TX 75201	45-3452817	501(C)(3)	46,392.	0.			PROGRAM OPS COST
BROTHER BILL'S HELPING HAND 3906 N WESTMORELAND DALLAS, TX 75212	75-6027740	501(C)(3)	396,342.	0.			PROGRAM OPS COST
BUCKNER CHILDREN AND FAMILY SERVICES, INC. - 700 N PEARL STE 1200 - DALLAS, TX 75201	75-2571395	501(C)(3)	8,000.	0.			PROGRAM OPS COST
BUILDERS OF HOPE CDC 2215 CANADA DRIVE DALLAS, TX 75212	75-2756681	501(C)(3)	32,000.	0.			PROGRAM OPS COST
CAFE MOMENTUM 1510 PACIFIC AVE DALLAS, TX 75201	32-0384561	501(C)(3)	25,000.	0.			PROGRAM OPS COST
CARDBOARD PROJECT 4008 CAVALRY DR PLANO, TX 75023	81-4431217	501(C)(3)	7,759.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CARING FOR CHILDREN FOUNDATION OF TEXAS - P.O. BOX 660583 - DALLAS, TX 75266	75-2393811	501(C)(3)	20,000.	0.			PROGRAM OPS COST
CARSON'S VILLAGE 303 SADDLE TREE TRAIL COPPELL, TX 75019	82-1854361	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CARTER'S HOUSE 2922 MARTIN LUTHER KING JR. DALLAS, TX 75215	46-5198495	501(C)(3)	10,000.	0.			PROGRAM OPS COST
CASA OF COLLIN COUNTY 101 E. DAVIS MCKINNEY, TX 75069	75-2391961	501(C)(3)	25,000.	0.			PROGRAM OPS COST
CASA OF DENTON COUNTY, INC. 614 NORTH BELL AVENUE DENTON, TX 76209	75-2417472	501(C)(3)	25,000.	0.			PROGRAM OPS COST
CATCH UP & READ 3001 KNOX ST., SUITE 207 DALLAS, TX 75205	45-3533496	501(C)(3)	167,500.	0.			PROGRAM OPS COST
CATHOLIC CHARITIES OF DALLAS INC. 1421 W. MOCKINGBIRD LANE DALLAS, TX 75247	75-2745221	501(C)(3)	371,000.	0.			PROGRAM OPS COST
CATHOLIC CHARITIES OF DALLAS, INC. 1421 W. MOCKINGBIRD LANE DALLAS, TX 75247	75-2745221	501(C)(3)	2,373,139.	0.			PROGRAM OPS COST
CEDAR HILL INDEPENDENT SCHOOL DISTRICT - 285 UPTOWN BLVD, BLDG 300 - CEDAR HILL, TX 75104	75-6000346	501(C)(3)	110,100.	0.			PROGRAM OPS COST

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CENTER FOR SURVIVORS OF TORTURE 9415 BURNET ROAD SUITE 201 AUSTIN, TX 78758	75-2872010	501(C)(3)	30,000.	0.			PROGRAM OPS COST
CHALLENGE ISLAND - MID CITIES TEXAS LLC - 2301 POPLAR LN - COLLEYVILLE, TX 76034	86-3495504	501(C)(3)	10,800.	0.			PROGRAM OPS COST
CHILD AND FAMILY GUIDANCE CENTERS 8915 HARRY HINES BLVD DALLAS, TX 75235-1717	75-0800630	501(C)(3)	200,000.	0.			PROGRAM OPS COST
CHILDCAREGROUP 1420 W MOCKINGBIRD LANE, STE 300 DALLAS, TX 75247	75-0800634	501(C)(3)	1,433,257.	0.			PROGRAM OPS COST
CHILDREN FIRST, INC. 202 COLLEGE STREET GRAND PRAIRIE, TX 75050	75-2100237	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER FOR NORTH TEXAS - 1854 CAIN DRIVE - LEWISVILLE, TX 75077	75-2559765	501(C)(3)	55,000.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER FOR ROCKWALL COUNTY - 1350 E. WASHINGTON STREET - ROCKWALL, TX 75087	47-4946358	501(C)(3)	40,000.	0.			PROGRAM OPS COST
CHILDREN'S ADVOCACY CENTER OF COLLIN COUNTY - 2205 LOS RIOS BOULEVARD - PLANO, TX 75074	75-2389095	501(C)(3)	120,000.	0.			PROGRAM OPS COST
CHILDREN'S HEALTH SYSTEM OF TEXAS 2777 STEMMONS FREEWAY, SUITE 1700 DALLAS, TX 75207	75-2062015	501(C)(3)	50,500.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CHILDREN'S MEDICAL CENTER FOUNDATION - 1935 MEDICAL DISTRICT DR - DALLAS, TX 75235	75-2062015	501(C)(3)	37,000.	0.			PROGRAM OPS COST
CHOCOLATE MINT FOUNDATION 201 EXECUTIVE WAY DESOTO, TX 75115	27-1589053	501(C)(3)	1,397,459.	0.			PROGRAM OPS COST
CHRISTIAN COMMUNITY ACTION 200 SOUTH MILL STREET LEWISVILLE, TX 75057	23-7319371	501(C)(3)	20,000.	0.			PROGRAM OPS COST
CIRCLE TEN COUNCIL, BOY SCOUTS OF AMERICA - 8605 HARRY HINES BOULEVARD - DALLAS, TX 75235	75-0800615	501(C)(3)	100,000.	0.			PROGRAM OPS COST
CITY YEAR, INC 1201 MAIN STREET, SUITE 1300 DALLAS, TX 75218	22-2882549	501(C)(3)	130,000.	0.			PROGRAM OPS COST
CITYSQUARE 1610 S. MALCOLM X BLVD. DALLAS, TX 75226	75-2332948	501(C)(3)	1,491,124.	0.			PROGRAM OPS COST
COALITION FOR AGING LGBT P.O. BOX 793329 DALLAS, TX 75379	81-1968355	501(C)(3)	30,000.	0.			PROGRAM OPS COST
COMMIT! 3800 MAPLE AVENUE, SUITE 800 DALLAS, TX 75219	80-0790222	501(C)(3)	110,000.	0.			PROGRAM OPS COST
COMMUNITIES FOUNDATION OF TEXAS INC - 5500 CARUTH HAVEN LANE - DALLAS, TX 75225	75-0964565	501(C)(3)	125,000.	0.			PROGRAM OPS COST

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COMMUNITIES IN SCHOOLS OF NORTH TEXAS, INC. - 217 S. STEMMONS FWY - LEWISVILLE, TX 75067	75-2496426	501(C)(3)	70,000.	0.			PROGRAM OPS COST
COMMUNITIES IN SCHOOLS OF THE DALLAS REGION - 1341 W. MOCKINGBIRD LANE, SUITE 1000E - DALLAS, TX 75247	75-2044117	501(C)(3)	50,000.	0.			PROGRAM OPS COST
COMMUNITY COUNCIL OF GREATER DALLAS - 1341 W MOCKINGBIRD LN, SUITE 1000W - DALLAS, TX 75247-6913	75-0800631	501(C)(3)	100,000.	0.			PROGRAM OPS COST
COMMUNITY OUTREACH HOUSING 3436 LIVINGSTON LN CARROLLTON, TX 75007	47-1872559	501(C)(3)	15,000.	0.			PROGRAM OPS COST
CONCORD MISSIONARY BAPTIST CHURCH 6808 PASTOR BAILEY DRIVE DALLLAS, TX 75237	75-1523441	501(C)(3)	82,000.	0.			PROGRAM OPS COST
CONNECTED BODY INC. 4100 ELDORADO PKWY STE. 100-226 MCKINNEY, TX 75070	82-1970615	501(C)(3)	25,000.	0.			PROGRAM OPS COST
CORNBREAD HUSTLE INC. 17766 PRESTON RD. DALLAS, TX 75252	81-3859574	501(C)(3)	170,000.	0.			PROGRAM OPS COST
CORNERSTONE ASSISTANCE NETWORK OF NORTH CENTRAL TEXAS - PO BOX 53 - PROSPER, TX 75078	27-2535979	501(C)(3)	25,000.	0.			PROGRAM OPS COST
CORNERSTONE COMMUNITY DEVELOPMENT CORPORATION INC - 1819 MARTIN LUTHER KING JR BLVD - DALLAS, TX 75215	75-2623357	501(C)(3)	23,400.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CORNERSTONE CROSSROADS ACADEMY 2815 S. ERVAY STREET DALLAS, TX 75215	11-3761734	501(C)(3)	75,000.	0.			PROGRAM OPS COST
CORPORATE GAMING, INC 502 S 2ND AVENUE DALLAS, TX 75226	45-3722119	501(C)(3)	7,612.	0.			PROGRAM OPS COST
COUNTY OF DALLAS 1201 ELM STREET, SUITE 2300 DALLAS, TX 75270	75-6000905	501(C)(3)	29,144.	0.			PROGRAM OPS COST
CRISTO REY DALLAS HIGH SCHOOL 1064 N ST AUGUSTINE DRIVE DALLAS, TX 75217	46-3737066	501(C)(3)	100,000.	0.			PROGRAM OPS COST
CUMBERLAND PRESBYTERIAN CHILDREN'S HOME - P.O. DRAWER G - DENTON, TX 76202	75-0878543	501(C)(3)	20,000.	0.			PROGRAM OPS COST
DALLAS AFTERSCHOOL 3900 WILLOW ST., STE 110 DALLAS, TX 75226	76-0838983	501(C)(3)	200,000.	0.			PROGRAM OPS COST
DALLAS ARBORETUM & BOTANICAL SOCIETY - 8617 GARLAND RD. - DALLAS, TX 75218	23-7375815	501(C)(3)	12,000.	0.			PROGRAM OPS COST
DALLAS BETHLEHEM CENTER 4410 LELAND AVENUE DALLAS, TX 75215	75-0800667	501(C)(3)	10,000.	0.			PROGRAM OPS COST
DALLAS CHILDREN'S ADVOCACY CENTER 5351 SAMUELL BLVD. DALLAS, TX 75228	75-2303404	501(C)(3)	170,000.	0.			PROGRAM OPS COST

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

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DALLAS COUNTY COMMUNITY COLLEGE DISTRICT FOUNDATION INC - 1601 BOTHAM JEAN BLVD - DALLAS, TX 75215	23-7326612	501(C)(3)	209,845.	0.			PROGRAM OPS COST
DALLAS COUNTY HOSPITAL DISTRICT PARKLAND HEALTH & HOSPITAL SYSTEM, DALLAS, TX 75266	75-6004221	501(C)(3)	294,069.	0.			PROGRAM OPS COST
DALLAS COUNTY MENTAL HEALTH & MENTAL RETARDATION CENTER - 1345 RIVER BEND DRIVE, SUITE 200 - DALLAS, TX 75247	75-1285603	501(C)(3)	97,500.	0.			PROGRAM OPS COST
DALLAS EDUCATION FOUNDATION 3700 ROSS AVENUE, BOX 108 DALLAS, TX 75204	20-5533398	501(C)(3)	55,548.	0.			PROGRAM OPS COST
DALLAS FURNITURE BANK P.O. BOX 815788 DALLAS, TX 75381	48-1279673	501(C)(3)	10,000.	0.			PROGRAM OPS COST
DALLAS INDEPENDENT SCHOOL DISTRICT 3700 ROSS AVENUE, BOX 375 DALLAS, TX 75204-5491	75-6001278	501(C)(3)	358,867.	0.			PROGRAM OPS COST
DALLAS MORNING NEWS CHARITIES 5500 CARUTH HAVEN LANE DALLAS, TX 75225-8146	75-0964565	501(C)(3)	75,000.	0.			PROGRAM OPS COST
DALLAS SERVICES 5442 LA SIERRA DRIVE DALLAS, TX 75231	75-0958408	501(C)(3)	75,000.	0.			PROGRAM OPS COST
DALLAS SOCIAL VENTURE PARTNERS 12900 PRESTON ROAD SUITE 1220 DALLAS, TX 75230	75-2945359	501(C)(3)	119,167.	0.			PROGRAM OPS COST

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DALLAS WINGS COMMUNITY FOUNDATION 500 E. BORDER, STE 250 ARLINGTON, TX 76010	32-0340066	501(C)(3)	8,000.	0.			PROGRAM OPS COST
DALLAS-FORT WORTH HOSPITAL COUNCIL 300 DECKER DRIVE SUITE 300 IRVING, TX 75062	23-7004426	501(C)(3)	10,000.	0.			PROGRAM OPS COST
DENTON COUNTY FRIENDS OF THE FAMILY - PO BOX 640 - DENTON, TX 76202	75-1734175	501(C)(3)	75,000.	0.			PROGRAM OPS COST
DESOTO INDEPENDENT SCHOOL DISTRICT 200 E. BELTLINE ROAD DESOTO, TX 75115	75-6001316	501(C)(3)	77,065.	0.			PROGRAM OPS COST
DWELL WITH DIGNITY 3112 HOOD STREET DALLAS, TX 75219	26-4658235	501(C)(3)	50,000.	0.			PROGRAM OPS COST
EDCOR HEALTH INITIATIVES 1506 W GRIFFIN ST DALLAS, TX 75215	82-4447606	501(C)(3)	50,000.	0.			PROGRAM OPS COST
EDEN OUTREACH INC. PO BOX 151352 DALLAS, TX 75315	75-2960929	501(C)(3)	22,409.	0.			PROGRAM OPS COST
EDUCATION IS FREEDOM 1111 W MOCKINGBIRD LANE STE 1300B DALLAS, TX 75247	04-3643313	501(C)(3)	50,000.	0.			PROGRAM OPS COST
EDUCATION OPENS DOORS, INC. 2804 SWISS AVENUE DALLAS, TX 75204	46-0781846	501(C)(3)	60,000.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EDUCATIONAL FIRST STEPS 2815 GASTON AVENUE DALLAS, TX 75226	75-2334053	501(C)(3)	30,000.	0.			PROGRAM OPS COST
EMPOWERING THE MASSES 2922 MARTIN LUTHER KING JR. BLVD. DALLAS, TX 75215	82-4300966	501(C)(3)	20,000.	0.			PROGRAM OPS COST
EQUAL HEART 4848 LEMMON AVE #513 DALLAS, TX 75219	46-2846816	501(C)(3)	20,000.	0.			PROGRAM OPS COST
ESSILOR VISION FOUNDATION 13515 N. STEMMONS FWY DALLAS, TX 75234	33-1174387	501(C)(3)	30,000.	0.			PROGRAM OPS COST
EXCELLENT DESIGN RESOLUTIONS LLC 6806 CLIFFWOOD DRIVE DALLAS, TX 75237	82-2158942	501(C)(3)	15,205.	0.			PROGRAM OPS COST
FAIRHILL SCHOOL 16150 PRESTON ROAD DALLAS, TX 75248	75-1406064	501(C)(3)	7,953.	0.			PROGRAM OPS COST
FAMILY CARE CONNECTION 6969 PASTOR BAILEY DR., SUITE 140 DALLAS, TX 75237	20-1211618	501(C)(3)	156,179.	0.			PROGRAM OPS COST
FAMILY COMPASS 4210 JUNIUS STREET DALLAS, TX 75246	75-2400158	501(C)(3)	556,591.	0.			PROGRAM OPS COST
FAMILY GATEWAY, INC 711 S. ST. PAUL STREET DALLAS, TX 75201	75-2105579	501(C)(3)	75,000.	0.			PROGRAM OPS COST

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FAMILY INDEPENDENCE INITIATIVE 663 13TH STREET, SUITE 200 OAKLAND, CA 94612	02-0784790	501(C)(3)	60,000.	0.			PROGRAM OPS COST
FAMILY PLACE PO BOX 7999 DALLAS, TX 75209	75-1590896	501(C)(3)	500,000.	0.			PROGRAM OPS COST
FERST FOUNDATION FOR CHILDHOOD LITERACY - 237 N SECOND STREET - MADISON, GA 30650	58-2489181	501(C)(3)	323,664.	0.			PROGRAM OPS COST
FIRST STEP COMMUNITY EMPOWERMENT 7120 PLAYA IMPERIAL LANE GRAND PRAIRIE, TX 75054	47-5546751	501(C)(3)	7,114.	0.			PROGRAM OPS COST
FIRST3YEARS 15851 DALLAS PARKWAY, #106 ADDISON, TX 75001	75-2067421	501(C)(3)	20,000.	0.			PROGRAM OPS COST
FOSTER KIDS CHARITY 12830 HILLCREST ROAD, STE. 111 DALLAS, TX 75230	35-2409387	501(C)(3)	26,684.	0.			PROGRAM OPS COST
FOUNDATION COMMUNITIES 3036 SOUTH FIRST STREET AUSTIN, TX 78704	74-2563260	501(C)(3)	215,910.	0.			PROGRAM OPS COST
FRIENDS OF MLK PO BOX 225431 DALLAS, TX 75222	94-3433234	501(C)(3)	15,000.	0.			PROGRAM OPS COST
FSA SCHOLARSHIP FOUNDATION 1224 N. HWY 377 #303-139 ROANOKE, TX 76262	91-1864067	501(C)(3)	15,000.	0.			PROGRAM OPS COST

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GATEWAY OF GRACE 6941 KINGDOM ESTATES DR. DALLAS, TX 75236	47-1922215	501(C)(3)	98,520.	0.			PROGRAM OPS COST
GENESIS WOMEN'S SHELTER AND SUPPORT - 4411 LEMMON AVENUE, SUITE 201 - DALLAS, TX 75219	75-1881365	501(C)(3)	235,010.	0.			PROGRAM OPS COST
GIRL SCOUTS OF NORTHEAST TEXAS 6001 SUMMERSIDE DRIVE DALLAS, TX 75252	75-1101571	501(C)(3)	235,000.	0.			PROGRAM OPS COST
GIRLS INC. OF METROPOLITAN DALLAS 2040 EMPIRE CENTRAL DRIVE DALLAS, TX 75235	75-1305705	501(C)(3)	160,000.	0.			PROGRAM OPS COST
GOODWILL INDUSTRIES OF DALLAS, INC. - 3020 N. WESTMORELAND RD. - DALLAS, TX 75212	75-0800649	501(C)(3)	500,000.	0.			PROGRAM OPS COST
GREATER LEWISVILLE YOUTH & FAMILY 105 KATHRYN DRIVE SUITE 3A LEWISVILLE, TX 75067	75-1741284	501(C)(3)	10,000.	0.			PROGRAM OPS COST
HARMONY COMMUNITY DEVELOPMENT CORPORATION - 6969 PASTOR BAILEY DR., STE. 110 - DALLAS, TX 75237	26-1245799	501(C)(3)	1,821,848.	0.			PROGRAM OPS COST
HEALING HANDS MINISTRIES P.O. BOX 741524 DALLAS, TX 75374	65-1259379	501(C)(3)	75,000.	0.			PROGRAM OPS COST
HEALTH SERVICES OF NORTH TEXAS, INC. - 4401 N. I-35, SUITE 312 - DENTON, TX 76207	75-2252866	501(C)(3)	180,000.	0.			PROGRAM OPS COST

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HEART HOUSE P.O. BOX 823162 DALLAS, TX 75382-3162	75-2898097	501(C)(3)	45,000.	0.			PROGRAM OPS COST
HEART OF COURAGE (DBA CUP OF COURAGE) - 7441 MARVIN D LOVE FWY, SUITE 130 - DALLAS, TX 75237	81-3117972	501(C)(3)	17,422.	0.			PROGRAM OPS COST
HOPE SUPPLY COMPANY 10480 SHADY TRAIL, SUITE 104 DALLAS, TX 75220	75-2284779	501(C)(3)	10,000.	0.			PROGRAM OPS COST
HOUSING CRISIS CENTER 4210 JUNIUS STREET DALLAS, TX 75246	75-1633304	501(C)(3)	292,552.	0.			PROGRAM OPS COST
HUMAN RIGHTS INITIATIVE OF NORTH TEXAS - 2801 SWISS AVENUE - DALLAS, TX 75204	75-2842602	501(C)(3)	40,000.	0.			PROGRAM OPS COST
I LOOK LIKE LOVE INC. 2711 S. ERVAY #102 DALLAS, TX 75215	81-0807264	501(C)(3)	28,863.	0.			PROGRAM OPS COST
ICNA RELIEF USA PROGRAMS INC. 1529 JERICHO TURNPIKE NEW HYDE PARK, NY 11040	04-3810161	501(C)(3)	15,000.	0.			PROGRAM OPS COST
IF INSTITUTE 1312 PAINTBRUSH ST MESQUITE, TX 75149	84-3239436	501(C)(3)	30,000.	0.			PROGRAM OPS COST
INSPIRING TOMORROW'S LEADERS 8828 N STEMMONS FREEWAY, STE 507 DALLAS, TX 75247	90-0672495	501(C)(3)	26,667.	0.			PROGRAM OPS COST

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INSPIRING TOMORROWS LEADERS, INC. 1114 REDMAN LANE DUNCANVILLE, TX 75137	90-0672495	501(C)(3)	13,333.	0.			PROGRAM OPS COST
INTERFAITH FAMILY SERVICES 5600 ROSS AVENUE DALLAS, TX 75206	75-2028254	501(C)(3)	323,918.	0.			PROGRAM OPS COST
INTERNATIONAL RESCUE COMMITTEE 6500 GREENVILLE AVE, SUITE 500 DALLAS, TX 75206	13-5660870	501(C)(3)	30,000.	0.			PROGRAM OPS COST
IRVING - THE MAIN PLACE 600 BELLAH DRIVE IRVING, TX 75062	45-4289421	501(C)(3)	10,000.	0.			PROGRAM OPS COST
IRVING CARES P.O. BOX 177425 IRVING, TX 75017-7425	75-1436937	501(C)(3)	30,000.	0.			PROGRAM OPS COST
JEWISH FAMILY SERVICE OF GREATER DALLAS - 5402 ARAPAHO ROAD - DALLAS, TX 75248	75-1992728	501(C)(3)	620,577.	0.			PROGRAM OPS COST
JUBILEE PARK & COMMUNITY CENTER 917 BANK STREET DALLAS, TX 75223	75-2726296	501(C)(3)	135,000.	0.			PROGRAM OPS COST
JUNIOR ACHIEVEMENT OF DALLAS, INC. 1201 EXECUTIVE DR. WEST RICHARDSON, TX 75081	75-0881589	501(C)(3)	45,000.	0.			PROGRAM OPS COST
JUNIOR PLAYERS 4054 MCKINNEY AVE., SUITE 104 DALLAS, TX 75204	75-6061082	501(C)(3)	18,000.	0.			PROGRAM OPS COST

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KIMIYA INTERNATIONAL 4605 CEDAR SPRINGS RD #301 DALLAS, TX 75219	27-3100279	501(C)(3)	27,500.	0.			PROGRAM OPS COST
KIPP DALLAS-FORT WORTH, INC. 3200 S LANCASTER RD STE 230-A DALLAS, TX 75216	01-0639602	501(C)(3)	100,000.	0.			PROGRAM OPS COST
LA COSECHA PROJECT DBA HARVEST PROJECT FOOD RESCUE - 3445 LINDA DRIVE - DALLAS, TX 75220	82-2023088	501(C)(3)	10,000.	0.			PROGRAM OPS COST
LAX PARTNERS, LLC 500 E BORDER ST 250 ARLINGTON, TX 76010	84-4637926	501(C)(3)	8,000.	0.			PROGRAM OPS COST
LIFE SCHOOL OF DALLAS 132 EAST OVILLA RD. RED OAK, TX 75154	75-2722521	501(C)(3)	8,000.	0.			PROGRAM OPS COST
LITEHOUSE WELLNESS 5931 GREENVILE AVENUE #763 DALLAS, TX 75206	84-3884158	501(C)(3)	9,100.	0.			PROGRAM OPS COST
LITERACY ACHIEVES 4210 JUNIUS ST, 5TH FLOOR DALLAS, TX 75246	75-2708992	501(C)(3)	266,395.	0.			PROGRAM OPS COST
LITERACY INSTRUCTION FOR TEXAS (LIFT) - 1610 S MALCOLM X BOULEVARD, STE 320 - DALLAS, TX 75226	75-1095223	501(C)(3)	344,000.	0.			PROGRAM OPS COST
LOS BARRIOS UNIDOS COMMUNITY CLINIC - 809 SINGLETON BLVD - DALLAS, TX 75212	75-1378664	501(C)(3)	300,000.	0.			PROGRAM OPS COST

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LUMIN EDUCATION 924 WAYNE STREET DALLAS, TX 75223	75-1612054	501(C)(3)	535,845.	0.			PROGRAM OPS COST
MEALS ON WHEELS COLLIN COUNTY 600 N TENNESSEE STREET MCKINNEY, TX 75069	75-1544507	501(C)(3)	20,000.	0.			PROGRAM OPS COST
MERRYMAKERS 2313 MEADOW CREST IRVING, TX 75060	45-2065353	501(C)(3)	8,000.	0.			PROGRAM OPS COST
METRO DALLAS HOMELESS ALLIANCE 2816 SWISS AVE. DALLAS, TX 75204	75-2461679	501(C)(3)	20,000.	0.			PROGRAM OPS COST
METROCREST SERVICES 13801 HUTTON DR #150 FARMERS BRANCH, TX 75234	75-1548334	501(C)(3)	609,668.	0.			PROGRAM OPS COST
METROPLEX ECONOMIC DEVELOPMENT CORPORATION DBA T.O.R.I - 6777 W. KIEST BLVD. - DALLAS, TX 75236	75-2768840	501(C)(3)	30,000.	0.			PROGRAM OPS COST
MI ESCUELITA PRESCHOOL, INC. 4231 MAPLE AVENUE DALLAS, TX 75219	75-1728505	501(C)(3)	300,000.	0.			PROGRAM OPS COST
MILES OF FREEDOM 2922 MARTIN LUTHER KING JR. BLVD, BUILDING A STE 118B - DALLAS, TX 75215	45-4959062	501(C)(3)	49,128.	0.			PROGRAM OPS COST
MINNIE'S FOOD PANTRY 3033 W. PARKER ROAD, SUITE 117 PLANO, TX 75023	27-2363211	501(C)(3)	75,000.	0.			PROGRAM OPS COST

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MOSAIC FAMILY SERVICES, INC. 12225 GREENVILLE AVENUE, SUITE 800 DALLAS, TX 75243	75-2484565	501(C)(3)	360,000.	0.			PROGRAM OPS COST
MY POSSIBILITIES 3601 MAPLESHADE LANE PLANO, TX 75023	26-1509133	501(C)(3)	165,000.	0.			PROGRAM OPS COST
NATIONAL AUDUBON SOCIETY, INC. 225 VARICK ST., 7TH FLR NEW YORK, NY 10014	13-1624102	501(C)(3)	17,665.	0.			PROGRAM OPS COST
NATIONAL INVENTORS HALL OF FAME, INC. - 3701 HIGHLAND PARK NW - NORTH CANTON, OH 44720	34-1580038	501(C)(3)	10,000.	0.			PROGRAM OPS COST
NATIONAL MATH AND SCIENCE INITIATIVE - 8350 N. CENTRAL EXPRESSWAY SUITE M-2200 - DALLAS, TX 75206	11-3769438	501(C)(3)	30,000.	0.			PROGRAM OPS COST
NETWORK OF COMMUNITY MINISTRIES, INC. - 741 SOUTH SHERMAN STREET - RICHARDSON, TX 75081	75-2060900	501(C)(3)	20,000.	0.			PROGRAM OPS COST
NEW FRIENDS NEW LIFE 6060 N CENTRAL EXPY, STE 250 DALLAS, TX 75206	75-2820473	501(C)(3)	20,000.	0.			PROGRAM OPS COST
NEXUS RECOVERY CENTER INCORPORATED 8733 LA PRADA DRIVE DALLAS, TX 75201	23-7169388	501(C)(3)	225,000.	0.			PROGRAM OPS COST
NORTH DALLAS SHARED MINISTRIES 2875 MERRELL ROAD DALLAS, TX 75229	75-1908563	501(C)(3)	122,500.	0.			PROGRAM OPS COST

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NPOWER 55 WASHINGTON STREET, SUITE 560 BROOKLYN, NY 11201	13-4145441	501(C)(3)	100,000.	0.			PROGRAM OPS COST
OAK CLIFF BIBLE FELLOWSHIP 1808 W. CAMP WISDOM ROAD DALLAS, TX 75232	75-1548305	501(C)(3)	77,144.	0.			PROGRAM OPS COST
ON THE ROAD LENDING 1305 WYCLIFF AVENUE, SUITE 140 DALLAS, TX 75207	38-3910893	501(C)(3)	20,000.	0.			PROGRAM OPS COST
OPEN ARMS INC.-BRYAN'S HOUSE PO BOX 35868 DALLAS, TX 75235	75-2217559	501(C)(3)	10,000.	0.			PROGRAM OPS COST
OUR FRIENDS PLACE 6500 GREENVILLE AVENUE, SUITE 620 DALLAS, TX 75206	75-2077719	501(C)(3)	10,000.	0.			PROGRAM OPS COST
PARKLAND FOUNDATION FOR PARKLAND HEALTH & HOSPITAL SYSTEM - 1341 W. MOCKINGBIRD LANE, SUITE 1100E - DALLAS, TX 75247	75-2089180	501(C)(3)	225,000.	0.			PROGRAM OPS COST
PEDIPLACE 502 S. OLD ORCHARD, SUITE 126 LEWISVILLE, TX 75067	75-2512752	501(C)(3)	250,000.	0.			PROGRAM OPS COST
PER SCHOLAS 211 N ERVAY STREET, SUITE 700 DALLAS, TX 75201	04-3252955	501(C)(3)	111,025.	0.			PROGRAM OPS COST
PRISM HEALTH NORTH TEXAS 3900 JUNIUS ST. #300 DALLAS, TX 75246	75-2306145	501(C)(3)	200,000.	0.			PROGRAM OPS COST

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PRISON ENTREPRENEURSHIP PROGRAM 10830 CENTRAL EXPRESSWAY, STE 240 DALLAS, TX 75231	20-1384253	501(C)(3)	220,500.	0.			PROGRAM OPS COST
PROJECT TRANSFORMATION 4024 CARUTH BLVD. DALLAS, TX 75225	75-2930405	501(C)(3)	50,000.	0.			PROGRAM OPS COST
RAINBOW DAYS, INC. THREE FOREST PLAZA, 12221 MERIT DRIVE, SUITE 1700 - DALLAS, TX 75251	75-1844908	501(C)(3)	104,520.	0.			PROGRAM OPS COST
RAPE CRISIS CENTER OF COLLIN COUNTY DBA THE TURNING POINT - 3325 SILVERSTONE DR. - PLANO, TX 75023	75-2065785	501(C)(3)	35,000.	0.			PROGRAM OPS COST
READERS 2 LEADERS 2800 N. HAMPTON RD, SUITE 120 DALLAS, TX 75212	90-0641325	501(C)(3)	180,000.	0.			PROGRAM OPS COST
READING PARTNERS 2910 SWISS AVENUE DALLAS, TX 75204	77-0568469	501(C)(3)	170,000.	0.			PROGRAM OPS COST
REAL SCHOOL GARDENS 1700 UNIVERSITY DRIVE, SUITE 260 FORT WORTH, TX 76107	20-5946552	501(C)(3)	135,000.	0.			PROGRAM OPS COST
REDEMPTION BRIDGE 1506 W. PIONEER PARKWAY, SUITE 101 ARLINGTON, TX 76013	27-3500079	501(C)(3)	42,000.	0.			PROGRAM OPS COST
RESOURCE CENTER OF DALLAS, INC. 5750 CEDAR SPRINGS ROAD DALLAS, TX 75235-6802	75-1892059	501(C)(3)	185,000.	0.			PROGRAM OPS COST

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RICHARDSON ADULT LITERACY CENTER PO BOX 835936 RICHARDSON, TX 75083	75-2337073	501(C)(3)	30,000.	0.			PROGRAM OPS COST
ROCKWALL COUNTY HELPING HANDS 950 WILLIAMS ST. ROCKWALL, TX 75087	75-2402276	501(C)(3)	100,000.	0.			PROGRAM OPS COST
SCHOLARSHOT 2904 SWISS AVE DALLAS, TX 75204	27-0232250	501(C)(3)	50,000.	0.			PROGRAM OPS COST
SCHOLASTIC, INC. PO BOX 639849 CINCINNATI, OH 45263	13-1824190	501(C)(3)	7,800.	0.			PROGRAM OPS COST
SEEDS 2 STEM, LLC 3662 W CAMP WISDOM RD. SUITE 2044 DALLAS, TX 75237	85-2932775	501(C)(3)	15,000.	0.			PROGRAM OPS COST
SENIOR CITIZENS OF GREATER DALLAS, INC. - 3910 HARRY HINES BLVD. - DALLAS, TX 75219	75-1085555	501(C)(3)	210,000.	0.			PROGRAM OPS COST
SENIORS PET ASSISTANCE NETWORK P.O. BOX 821173 DALLAS, TX 75382	20-5464573	501(C)(3)	18,886.	0.			PROGRAM OPS COST
SERVICES OF HOPE 5470 ELLSWORTH AVE. DALLAS, TX 75206	33-1104425	501(C)(3)	984,688.	0.			PROGRAM OPS COST
SHARED HOUSING CENTER, INC. 402 N. GOOD LATIMER EXPY DALLAS, TX 75204	75-2137522	501(C)(3)	75,000.	0.			PROGRAM OPS COST

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SHARING LIFE COMMUNITY OUTREACH, INC. - 3544 E EMPORIUM CIRCLE - MESQUITE, TX 75150	75-2831756	501(C)(3)	655,741.	0.			PROGRAM OPS COST
SLAPPY AND MONDAY'S FOUNDATION FOR LAUGHTER - 3630 HARRY HINES BLVD. - DALLAS, TX 75219	26-0598220	501(C)(3)	26,800.	0.			PROGRAM OPS COST
SOCIETY OF ST. VINCENT DE PAUL OF NORTH TEXAS - 3826 GILBERT AVE - DALLAS, TX 75219	75-1630370	501(C)(3)	60,000.	0.			PROGRAM OPS COST
SONYA'S HOUSE INC 7008 SORCEY RD. DALLAS, TX 75249	81-2390858	501(C)(3)	8,330.	0.			PROGRAM OPS COST
SOUTHERN DALLAS LINK 1020 SCOTLAND DR. #3115 DESOTO, TX 75115	82-2392922	501(C)(3)	30,000.	0.			PROGRAM OPS COST
SOUTHERN METHODIST UNIVERSITY 6401 AIRLINE DR.; SUITE 201, HAROLD CLARK SIMMONS HALL, SMU - DALLAS, TX 752	75-0800689	501(C)(3)	60,000.	0.			PROGRAM OPS COST
SOUTHWESTERN DIABETIC FOUNDATION INC. - PO BOX 918 - GAINESVILLE, TX 76241	75-6002547	501(C)(3)	25,000.	0.			PROGRAM OPS COST
STAND FOR CHILDREN-TEXAS 2121 SW BROADWAY, SUITE 130 PORTLAND, OR 97201	52-1957214	501(C)(3)	40,000.	0.			PROGRAM OPS COST
STARS UNITED GLOBAL OUTREACH 1600 PENNSYLVANIA AVENUE DALLAS, TX 75215	80-0967860	501(C)(3)	11,000.	0.			PROGRAM OPS COST

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STEP UP 901 S. CENTRAL EXPRESSWAY RICHARDSON, TX 75080	95-4701468	501(C)(3)	40,000.	0.			PROGRAM OPS COST
STUDIO BELLA FOR KIDS, LLC 1450 OLD GATE LANE DALLAS, TX 75218	82-1653436	501(C)(3)	12,000.	0.			PROGRAM OPS COST
T.R. HOOVER COMMUNITY DEVELOPMENT CENTER - 5106 BEXAR STREET - DALLAS, TX 75215	75-2700136	501(C)(3)	50,841.	0.			PROGRAM OPS COST
TECO THEATRICAL PRODUCTIONS, INC 215 S. TYLER STREET DALLAS, TX 75208	58-2069891	501(C)(3)	12,800.	0.			PROGRAM OPS COST
TEXAS MUSLIM WOMEN'S FOUNDATION, INC. - PO BOX 863388 - PLANO, TX 75086	20-3060929	501(C)(3)	95,000.	0.			PROGRAM OPS COST
TEXAS RESTAURANT ASSOCIATION EDUCATION FOUNDATION - P.O. BOX 1429 - AUSTIN, TX 78767	74-2732907	501(C)(3)	10,000.	0.			PROGRAM OPS COST
TEXAS TENANTS' UNION 8035 E RL THORNTON FWY., STE 535 DALLAS, TX 75228	75-1678612	501(C)(3)	20,000.	0.			PROGRAM OPS COST
TEXPROTECTS, THE TEXAS ASSOCIATION 1341 W MOCKINGBIRD LANE STE 560W DALLAS, TX 75247	46-1332547	501(C)(3)	51,250.	0.			PROGRAM OPS COST
THE CAPITAL GOOD FUND 22 A ST PROVIDENCE, RI 02907	80-0348382	501(C)(3)	39,769.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CONCILIO 400 S. ZANG BOULEVARD, SUITE 300 DALLAS, TX 75208	75-1770140	501(C)(3)	180,500.	0.			PROGRAM OPS COST
THE COOPER INSTITUTE 12330 PRESTON RD. DALLAS, TX 75230	23-7075529	501(C)(3)	258,139.	0.			PROGRAM OPS COST
THE DALLAS FOUNDATION - FOR OAK CLIFF - 4478 S. MARSALIS AVE. - DALLAS, TX 75232	75-2890371	501(C)(3)	50,000.	0.			PROGRAM OPS COST
THE DALLAS FOUNDATION-BONTON FARMS 6915 BEXAR STREET DALLAS, TX 75215	75-2890371	501(C)(3)	150,000.	0.			PROGRAM OPS COST
THE SALVATION ARMY DFW METROPLEX COMMAND - P.O. BOX 36006 - DALLAS, TX 75235	58-0660607	501(C)(3)	26,850.	0.			PROGRAM OPS COST
THE SALVATION ARMY DFWMC - TX 8787 N. STEMMONS FREEWAY, STE 800 DALLAS, TX 75247	58-0660607	501(C)(3)	375,000.	0.			PROGRAM OPS COST
THE SALVATION ARMY-CARR P COLLINS SOCIAL SERVICE CENTER, 5302 HARRY HINES BLVD. - DALLAS, TX 75235	58-0660607	501(C)(3)	569,048.	0.			PROGRAM OPS COST
THE SAMARITAN INN 1725 N MCDONALD ST MCKINNEY, TX 75071	75-1984285	501(C)(3)	40,000.	0.			PROGRAM OPS COST
THE STEWPOT OF FIRST PRESBYTERIAN CHURCH - 1835 YOUNG ST - DALLAS, TX 75201	75-0871727	501(C)(3)	36,961.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE TSTC FOUNDATION 3801 CAMPUS DR WACO, TX 76705	75-2892470	501(C)(3)	10,000.	0.			PROGRAM OPS COST
THE WARREN CENTER 320 CUSTER ROAD RICHARDSON, TX 75080	75-1282040	501(C)(3)	85,000.	0.			PROGRAM OPS COST
THE WAY BACK HOUSE 13490 TI BLVD., SUITE 102 DALLAS, TX 75243	75-1446346	501(C)(3)	25,000.	0.			PROGRAM OPS COST
THE WELMAN PROJECT 2232 IRWIN ST. FORT WORTH, TX 76110	81-1116926	501(C)(3)	75,000.	0.			PROGRAM OPS COST
THREE BROTHERS LEARNING 2313 LIVE OAK DRIVE LITTLE ELM, TX 75068	83-0776309	501(C)(3)	10,000.	0.			PROGRAM OPS COST
TIA'S STEAM ENRICHMENT, LLC 17630 DAVENPORT # 103 DALLAS, TX 75252	82-0680309	501(C)(3)	5,400.	0.			PROGRAM OPS COST
TO BE LIKE ME PO BOX 600101 DALLAS, TX 75360	83-2384204	501(C)(3)	50,000.	0.			PROGRAM OPS COST
TREY ATHLETES 3131 MAIN STREET, UNIT 1515 DALLAS, TX 75226	83-0807555	501(C)(3)	50,000.	0.			PROGRAM OPS COST
TRUSTED WORLD FOUNDATION 906 W MCDERMOTT DRIVE, STE 116-277 ALLEN, TX 75013	45-5264332	501(C)(3)	65,000.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TURTLE CREEK MANOR, INC. 2707 ROUTH STREET DALLAS, TX 75201	75-1282276	501(C)(3)	20,000.	0.			PROGRAM OPS COST
UNDER 1 ROOF 5787 S. HAMPTON RD SUITE 270 DALLAS, TX 75232	80-0765001	501(C)(3)	57,029.	0.			PROGRAM OPS COST
UNITE GREATER DALLAS 5470 ELLSWORTH AVE. DALLAS, TX 75206	46-3366457	501(C)(3)	12,601.	0.			PROGRAM OPS COST
UNITED TO LEARN 5310 HARVEST HILL ROAD SUITE 190 DALLAS, TX 75230	82-2121965	501(C)(3)	45,000.	0.			PROGRAM OPS COST
UNIVERSITY OF TX AT DALLAS, CALLIER CTR - 800 WEST CAMPBELL ROAD AD37 - RICHARDSON, TX 75080	75-6035865	501(C)(3)	50,000.	0.			PROGRAM OPS COST
UPLIFT EDUCATION 1825 MARKET CENTER BLVD. SUITE 500 DALLAS, TX 75207	75-2659683	501(C)(3)	305,000.	0.			PROGRAM OPS COST
VISUAL EXPRESSIONS ART SCHOOL 1425 N HWY 67 CEDAR HILL, TX 75104	20-0780106	501(C)(3)	8,000.	0.			PROGRAM OPS COST
VNA 1600 VICEROY DRIVE, SUITE 400 DALLAS, TX 75235	75-0800692	501(C)(3)	75,000.	0.			PROGRAM OPS COST
VOGEL ALCOVE 1723 GANO STREET DALLAS, TX 75213	75-2133827	501(C)(3)	88,000.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
VOICE OF HOPE MINISTRIES 4120 GENTRY DR DALLAS, TX 75212	75-1850380	501(C)(3)	32,000.	0.			PROGRAM OPS COST
VOOKS, INC. 25 NW 23RD PLACE, STE 6, PMB#122 PORTLAND, OR 97210	84-2073181	501(C)(3)	212,509.	0.			PROGRAM OPS COST
WILKINSON CENTER P.O. BOX 720248 DALLAS, TX 75372	75-2712117	501(C)(3)	600,092.	0.			PROGRAM OPS COST
WOMEN IN NEED OF GENEROUS SUPPORT "WINGS" - 2603 INWOOD ROAD - DALLAS, TX 75235	75-0800699	501(C)(3)	400,000.	0.			PROGRAM OPS COST
WORKLIFE PARTNERSHIP 3513 BRIGHTON BLVD, SUITE 489 DENVER, CO 80216	47-1331690	501(C)(3)	53,000.	0.			PROGRAM OPS COST
WTIA WORKFORCE INSTITUTE 2200 ALASKAN WAY, STE. 390 SEATTLE, WA 98121	47-3951262	501(C)(3)	50,000.	0.			PROGRAM OPS COST
YEAR UP DALLAS/FORT WORTH 701 ELM ST #400 DALLAS, TX 75202	04-3534407	501(C)(3)	25,000.	0.			PROGRAM OPS COST
YMCA OF METROPOLITAN DALLAS 601 NORTH AKARD ST DALLAS, TX 75201	75-0800696	501(C)(3)	210,000.	0.			PROGRAM OPS COST
YOUNG WOMEN'S PREPARATORY NETWORK 1722 ROUTH STREET, SUITE 720 DALLAS, TX 75201	47-0902114	501(C)(3)	75,000.	0.			PROGRAM OPS COST

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH WITH FACES 6333 E. MOCKINGBIRD LANE, 147-872 DALLAS, TX 75214	30-0018778	501(C)(3)	75,000.	0.			PROGRAM OPS COST
YOUTH180, INC. 7777 FOREST LANE, BLDG C - STE 410 DALLAS, TX 75230	75-1964233	501(C)(3)	25,400.	0.			PROGRAM OPS COST
DESIGNATED DONATIONS TO UWMD 1800 N. LAMAR STREET DALLAS, TX 75202	75-6005352	501(C)(3)	8,348,496.	0.			DONOR DESIGNATIONS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

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

AS PART OF THE GRANT AGREEMENT, AN AGENCY AGREES TO OPERATE PROGRAMS IN A MANNER CONSISTENT WITH INFORMATION COMMUNICATED TO UWMD AND TO REGULARLY REPORT ON THOSE PROGRAMS SUPPORTED BY UWMD FUNDING. FOR GRANTS MADE IN SUPPORT OF PROGRAM OPERATIONS COSTS, THE AGENCY WILL REPORT INFORMATION BASED ON SIX CATEGORIES (DEMOGRAPHICS, ZIP CODES SERVED, DOLLARS SPENT, SUCCESS STORIES, OUTCOMES AND BUDGET), UNLESS SPECIAL ARRANGEMENTS HAVE BEEN MADE AND AGREED TO, IN WRITING, BY BOTH THE AGENCY AND UWMD. AN

Part IV Supplemental Information

APPROVED OUTCOME PLAN WILL BE PART OF EACH PROGRAM REPORT, WITH RESULTS BEING REPORTED IN A MANNER CONSISTENT WITH THE APPROVED PLAN. FAILURE TO HAVE AN APPROVED PLAN OR TO REPORT IN AN APPROPRIATE MANNER WILL LEAD TO A REVIEW OF GRANT FUNDING. ANY MATERIAL CHANGE IN THE OPERATING OF A PROGRAM THAT IS GRANT FUNDED WILL BE REPORTED TO UWMD IN A TIMELY MANNER, WITH CONTINUED FUNDING SUBJECT TO UWMD REVIEW. AS PART OF THE SCREENING PROCESS, ALL AGENCIES ARE ALSO REQUIRED TO SIGN A USA PATRIOT ACT COMPLIANCE FORM THAT REQUIRES AGENCIES TO CERTIFY THAT UWMD FUNDS AND DONATIONS WILL BE USED IN COMPLIANCE WITH ALL APPLICABLE ANTI-TERRORIST FINANCING AND ASSET CONTROL LAWS, STATUTES, AND EXECUTIVE ORDERS. UWMD ALSO VERIFIES CURRENT 501(C)(3) STATUS AND SCREENS THE AGENCY TO ENSURE IT IS NOT LISTED ON TERRORIST WATCH LISTS. ORGANIZATIONS RECEIVING DESIGNATED CONTRIBUTIONS THROUGH UNITED WAY ARE SUBJECT TO VETTING AND SCREENING THROUGH SUPPORT SERVICES PROVIDED BY GUIDESTAR.

IN ADDITION TO THOSE AGENCIES LISTED, UWMD ALSO HAD DONOR DESIGNATED FUNDS TO AGENCIES IN THE AMOUNT OF $8,348,496.

SCHEDULE J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

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.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☒ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☒ Personal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	**1b**	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	**2**	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☒ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☒ Compensation survey or study		
	☒ Form 990 of other organizations	☒ 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**		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	**4b**	X	
c	Participate in or receive payment from an equity-based compensation arrangement?	**4c**		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	**5a**		X
b	Any related organization?	**5b**		X
	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**		X
b	Any related organization?	**6b**		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	**7**	X	
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**		X
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 II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) JENNIFER SAMPSON	(i)	406,428.	198,146.	20,604.	89,950.	40,003.	755,131.	0.
PRESIDENT AND CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) SUSAN HOFF	(i)	304,078.	134,340.	3,168.	19,950.	26,250.	487,786.	0.
CHIEF IMPACT/STRATEGY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JANICE HARISSIS	(i)	240,344.	49,400.	22,668.	6,825.	1,428.	320,665.	0.
CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ASHLEY BRUNDAGE	(i)	139,996.	14,000.	180.	10,368.	30,232.	194,776.	0.
SVP, COMMUNITY IMPACT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KIMBERLY SCOTT	(i)	159,194.	0.	162.	4,475.	24,737.	188,568.	0.
VP, STRATEGIC DEVELOPMENT PROJECTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) CANDACE BARNES	(i)	131,234.	0.	270.	9,255.	33,956.	174,715.	0.
SVP, HUMAN RESOURCES	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) JAIME GARCIA	(i)	131,282.	0.	162.	6,875.	22,834.	161,153.	0.
DIRECTOR, ENTERPRISE ANALYTICS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MELISSA REDDICK	(i)	134,961.	0.	270.	9,733.	13,217.	158,181.	0.
VP, CORPORATE ENGAGEMENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES

UWMD REIMBURSES EMPLOYEES FOR HEALTH CLUB MEMBERSHIPS AT THE END OF EACH CALENDAR YEAR FOR UP TO $10 FOR EACH MONTH THEY ARE EMPLOYED WITH UWMD. THIS AMOUNT HAS NOT BEEN ADDED TO THE W-2.

PERSONAL SERVICES

A $5,000 ALLOWANCE WAS PROVIDED TO JENNIFER SAMPSON AS A LUMP SUM IN LIEU OF A REIMBURSEMENT TO COVER THE COST OF OBTAINING A FINANCIAL ADVISOR. THIS WAS AN ANNUAL PAYMENT AND INCLUDED IN JENNIFER'S TAXABLE EARNINGS.

PART I, LINE 4B:

PERSONS PARTICIPATING IN A SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

JENNIFER SAMPSON PARTICIPATED IN THE ORGANIZATION'S 457F PLAN. FOR CALENDAR YEAR 2020, MS. SAMPSON RECEIVED THE FOLLOWING;

EMPLOYER 457F DEFERRAL $70,000

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

Part III Supplemental Information

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

PART I, LINE 7:

THE ORGANIZATION'S BONUS PROGRAM IS BASED ON METRICS SET IN AN ORGANIZATIONAL SCORECARD.

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	17	424,886.	FMV
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ▶ (MASKS)	X	1	12,000.	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 V, Donee Acknowledgement 29

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

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

SCHEDULE M, PART I, COLUMN (B):

METHOD USED

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

Name of the organization
UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number
75-6005352

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

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

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

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

IN FISCAL YEAR 2020-2021, TOGETHER WE PUT OPPORTUNITY IN THE HANDS OF 1.3 MILLION NORTH TEXANS. WE INVITE ALL NORTH TEXANS TO BE PART OF THE CHANGE BY GIVING, ADVOCATING AND VOLUNTEERING.

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

TAX PROGRAM ADJUSTED TO A VIRTUAL FORMAT AND HELPED 6,000 PEOPLE OBTAIN $13.7 MILLION IN REFUNDS AND TAX CREDITS. 60,400 PEOPLE ACCESSED FINANCIAL CAPABILITY SERVICES THROUGH UNITED WAY, INCLUDING 6,100 THAT

Name of the organization: UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number: 75-6005352

PARTICIPATED IN FINANCIAL COACHING. UNITED WAY INCREASED ACCESS TO CREDIT-BUILDING LOANS AND COLLEGE SAVINGS ACCOUNTS, ADDING 175 CAPITAL GOOD FUND LOANS AND 500 DOLLARS FOR COLLEGE ACCOUNTS. OUR FINANCIAL INCLUSION ROUNDTABLE PROVIDED CAPACITY BUILDING AND NETWORKING OPPORTUNITIES FOR MORE THAN 100 COMMUNITY ORGANIZATIONS AND FINANCIAL INSTITUTIONS IN THE REGION.

2. GROW SOUTH, GROW STRONG, SERVES 1,700 STUDENTS AND THEIR FAMILIES WITHIN THREE TARGETED SCHOOLS IN DALLAS ISD'S ROOSEVELT FEEDER PATTERN. THE INITIATIVE AIMS TO SUPPORT STUDENTS AND FAMILIES AND ENGAGE THE COMMUNITY AND CORPORATIONS THROUGH TARGETED PROGRAMS, WORKSHOPS, AND EVENTS TO CAPITALIZE ON THE COMMUNITY'S BIGGEST OPPORTUNITIES AND ADDRESS THE COMMUNITY'S BIGGEST CHALLENGES.

DURING THE 2020-2021 SCHOOL YEAR, UNITED WAY IDENTIFIED PROGRAM PARTNERS TO BEGIN CREATING A DEDICATED COMMUNITY HUB AT JOHN NEELY BRYAN ELEMENTARY SCHOOL, WHICH WAS A PILOT PROJECT THAT WILL INFORM FUTURE SCHOOL-BASED COMMUNITY RESOURCE CENTERS. THROUGH THESE SERVICES, 15 ADULTS RECEIVED THEIR GED OR PASSED THE HIGH SCHOOL EQUIVALENCY TEST, 90 STUDENTS PARTICIPATED IN AFTER-SCHOOL ENRICHMENT ACTIVITIES, 21 THIRD GRADE STUDENTS RECEIVED READING AND GRAMMAR TUTORING, 2 PARENTS PARTICIPATED IN COMPUTER LITERACY TRAINING AND WERE CONNECTED TO ADDITIONAL COMMUNITY RESOURCES, AND 27 FOURTH AND FIFTH GRADERS PARTICIPATED IN THE BLUEPRINT FOR SUCCESS PROGRAM, WHICH COMBINES SOCIAL AND EMOTIONAL LEARNING, ACADEMIC SUPPORT, CRITICAL THINKING AND ENRICHMENT OPPORTUNITIES THROUGH THE LENS OF ENTREPRENEURSHIP.

3. SOUTHERN DALLAS THRIVES IS A TARGETED INITIATIVE ADVANCING OUR

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MISSION AND IMPACT WITH A FOCUS ON PROVIDING CRITICAL SERVICES AND SUPPORT IN A COMMUNITY THAT HAS BEEN DISPROPORTIONATELY IMPACTED BY HISTORY OF POVERTY, LONG-TERM SYSTEMIC AND SYSTEMATIC RACISM. THROUGH THE SOUTHERN DALLAS THRIVES INITIATIVE, UWMD AIMS TO BRING RESIDENTS, CORPORATIONS, SERVICE PROVIDERS, EDUCATORS, FUNDERS, AND CIVIC LEADERS TOGETHER TO CONTINUOUSLY IDENTIFY AND ASSESS ASSETS AND NEED'S AND LEVERAGE RESOURCES TO BUILD AN INCLUSIVE ECONOMY IN SOUTHERN DALLAS. OUR GOAL IS TO ADVANCE LONG TERM, SUSTAINABLE ECONOMIC MOBILITY FOR MARGINALIZED WOMEN AND THEIR CHILDREN.

4. UNITED WAY SOCIAL INNOVATION LAB IS A CONTINUUM OF CAPACITY BUILDING PROGRAMS FOR SOCIAL ENTREPRENEURS IN EDUCATION, INCOME AND HEALTH. THE LAB CURRENTLY INCLUDES THE INCUBATOR (EARLY-STAGE) AND ACCELERATOR (MID-STAGE) PROGRAMS AND IS LAUNCHING AN ALUMNI PROGRAM IN 2022. BOTH THE INCUBATOR AND ACCELERATOR ARE MENTOR-DRIVEN PROGRAMS THAT INVEST IN ORGANIZATIONS THAT ARE FOCUSED ON IMPLEMENTING NOVEL SOLUTIONS TO COMMUNITY CHALLENGES THROUGH SEED FUNDING, INTENSIVE PROFESSIONAL DEVELOPMENT, MENTORSHIP AND COACHING, AND INCREASED VISIBILITY OPPORTUNITIES. IN FISCAL YEAR 2020-2021 THE PROGRAM SUPPORTED 10 FELLOWS; $250,000 IN SEED FUNDING WAS INVESTED IN THE FELLOWS.

5. HEALTHY ZONE SCHOOL (HZS) PROGRAM SUPPORTS AND REWARDS SCHOOLS THAT PROMOTE HEALTHY BEHAVIORS. THE PROGRAM PROVIDES OVER 197 SCHOOLS WITH TOOLS AND RESOURCES TO CREATE A HEALTH-CONSCIOUS CULTURE AND ENGAGE THE SURROUNDING COMMUNITY IN A GROUP EFFORT TO ENCOURAGE HABITS FOR LIFELONG WELLBEING. RESULTS HAVE SHOWN THAT 73% OF STUDENTS IMPROVED AEROBIC CAPACITY AND 65% OF STUDENTS MOVED IN A HEALTHY DIRECTION FOR BODY COMPOSITION.

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6. THE TEXAS HOME VISITING PROGRAM, FUNDED BY THE TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES (DFPS), HELPS GOOD PEOPLE BECOME GREAT PARENTS. THIS PROGRAM MATCHES DALLAS COUNTY AND COLLIN COUNTY FAMILIES WITH A TRAINED HOME VISITOR, A NURSE, EXPERIENCED PARENT, TRAINED PROFESSIONAL OR VOLUNTEER TO ANSWER QUESTIONS, OFFER ADVICE, PROVIDE SUPPORT, AND TEACH PARENTS HOW TO PREPARE THEIR KIDS FOR KINDERGARTEN. IN 2019-2020, 629 FAMILIES RECEIVED HOME VISIT PROGRAM SERVICES.

7. THE HEALTHY OUTCOMES THROUGH PREVENTION AND EARLY INTERVENTION SUPPORT (HOPES) PROGRAM, FUNDED BY THE TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES (DFPS), HELPS DALLAS COUNTY PARENTS CREATE HOME ENVIRONMENTS IN WHICH YOUNG CHILDREN CAN THRIVE. WORKING WITH CLINICS, ORGANIZATIONS, AND GOVERNMENT AGENCIES, THE PROGRAM'S STAFF HELPS FAMILIES RECEIVE INSTRUCTION, SUPPORT, AND COMMUNITY RESOURCES. APPROXIMATELY 590 FAMILIES RECEIVED DIRECT PARENT EDUCATION PROGRAM SERVICES DURING FISCAL YEAR 2020-2021. ADDITIONALLY, 12,655 FAMILIES RECEIVED SERVICE SUPPORT REFERRALS THROUGH THE HOPES PROGRAM.

8. NORTH TEXAS SUMMER AND SUPPER COUNCIL, A MEMBER-LED COALITION OF NORTH TEXAS ORGANIZATIONS WORKING TO BUILD CAPACITY AND INCREASES AWARENESS OF THE ISSUE OF CHILD FOOD INSECURITY AND ACCESS. THE GOAL OF THE COUNCIL IS TO INCREASE THE EFFICIENCY AND EFFECTIVENESS OF SUMMER MEALS, AFTERSCHOOL SUPPER, AND NATIONAL SCHOOL LUNCH PROGRAMS TO ENSURE ACCESS TO HEALTHY MEALS FOR EVERY CHILD. THE COUNCIL DRAWS UPON A MYRIAD OF BEST PRACTICES AND IMPLEMENTATION TECHNIQUES TO BETTER EQUIP CONTRACTING ENTITIES IN HIGH NEED AREAS WITH TOOLS FOR SUCCESS, WHILE OFFERING A COLLABORATIVE ENVIRONMENT FOR OPEN DIALOGUE.

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9. THE NONPROFIT SUCCESS INSTITUTE STRENGTHENS AND SUPPORTS ORGANIZATIONS AND NONPROFITS AT DIFFERENT STAGES OF GROWTH IN SOUTHERN DALLAS AND COLLIN COUNTY. IN PARTNERSHIP WITH COMMUNITIES FOUNDATION OF TEXAS AND TOYOTA OF NORTH AMERICA, THIS PROGRAM PROVIDES TRAINING AND RESOURCES TO ENABLE SMALL AND MEDIUM SIZED NONPROFITS, CHURCHES, AND NEIGHBORHOOD ASSOCIATIONS TO OPERATE MORE EFFICIENTLY, INCREASE THEIR IMPACT, AND GAIN ACCESS TO CAPITAL. IN FISCAL YEAR 2020-2021 THE PROGRAM SUPPORTED 9 ORGANIZATIONS AND INVESTED MORE THAN $100,000 INTO TARGETED NONPROFITS.

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

INCREASE BY 50% THE NUMBER OF NORTH TEXAS STUDENTS READING ON GRADE LEVEL BY THIRD GRADE. IN INCOME WE SEEK TO INCREASE THE NUMBER OF NORTH TEXAS YOUNG ADULTS WHO EARN A LIVING WAGE BY 20%. IN HEALTH WE SEEK TO INCREASE TO 96% THE NUMBER OF NORTH TEXANS WITH ACCESS TO AFFORDABLE HEALTH CARE INSURANCE.

IN FISCAL YEAR 2020-2021, UWMD CREATED POSITIVE IMPACT ON THE LIVES OF MORE THAN 1.3 MILLION NORTH TEXANS AND INVESTED IN 118 EXCEPTIONAL EDUCATION, INCOME, AND HEALTH ORGANIZATIONS THROUGH OUR COMMUNITY IMPACT GRANTS.

EDUCATION

712,000 STUDENTS, FROM PRE-K THROUGH HIGH SCHOOL, ON THE PATH TO EDUCATION SUCCESS.

INCOME

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157,000 RESIDENTS RECEIVED ASSISTANCE TO GET AND KEEP BETTER JOBS, GET OUT OF DEBT AND BUILD SAVINGS FOR THE FUTURE.

HEALTH

332,000+ NORTH TEXANS RECEIVED ACCESS TO THE PRIMARY HEALTH AND WELLNESS RESOURCES THEY NEED TO LIVE HEALTHY LIVES.

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

EXECUTIVE COMMITTEE

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

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

FORM 990 REVIEW PROCESS

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

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

CONFLICT OF INTEREST POLICY MONITORING AND ENFORCEMENT

THE CODE OF BUSINESS CONDUCT, ETHICS AND CONFLICT OF INTEREST IS DISTRIBUTED TO DIRECTORS, OFFICERS, STANDING COMMITTEE MEMBERS, AND

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

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

PROCESS FOR DETERMINING COMPENSATION

THE COMPENSATION COMMITTEE IS THE EXECUTIVE COMMITTEE OF THE BOARD. THE COMMITTEE HAS THE RESPONSIBILITY OF DETERMINING AND RECOMMENDING TO THE BOARD FOR APPROVAL THE SENIOR LEADERSHIP TEAM COMPENSATION AND BENEFITS. UWMD'S VICE PRESIDENT OF HUMAN RESOURCES PROVIDES FACTUAL, SUPPORTIVE, AND COMPARATIVE INFORMATION, AS REQUESTED. THE COMMITTEE REVIEWS AND APPROVES UWMD'S GOALS AND OBJECTIVES RELEVANT TO CEO COMPENSATION AND EVALUATES THE PERFORMANCE OF THE CEO ANNUALLY AGAINST THOSE GOALS AND OBJECTIVES. THE COMMITTEE RECOMMENDS TO THE BOARD, FOR APPROVAL, THE CEO'S COMPENSATION PACKAGE BASED ON THIS EVALUATION. THE DELIBERATIONS AND DECISIONS OF THE COMMITTEE ARE DOCUMENTED IN CONTEMPORANEOUS SUBSTANTIATION. THE COMMITTEE WILL REVIEW ANNUALLY ALL INCENTIVE COMPENSATION PLANS AND/OR SPECIAL COMPENSATION ARRANGEMENTS FOR MEMBERS OF UWMD'S LEADERSHIP TEAM AND OTHER STAFF MEMBERS AS APPROPRIATE, INCLUDING BONUS AND INCENTIVE AWARDS, SEVERANCE PACKAGES, EMPLOYMENT AGREEMENTS, AND/OR OTHER SPECIAL SUPPLEMENTAL BENEFITS.

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

HOW DOCUMENTS ARE MADE AVAILABLE TO THE PUBLIC

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

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

SAME AS LINE 18 ABOVE.

FORM 990, PARTS VIII & IX

DONOR DESIGNATED FUNDS

THE AMOUNTS REPORTED IN THESE SECTIONS INCLUDE $10,019,563 OF DONOR DESIGNATED REVENUE AND $8,348,496 OF DONOR DESIGNATED GRANTS. $100,000 OF THE DONOR DESIGNATED FUNDS WAS GRANTED TO UNITED WAY FOUNDATION OF METROPOLITAN DALLAS, A RELATED ORGANIZATION.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE OF INTEREST HELD IN TRUSTS	2,341,885.
NET OF DESIGNATIONS TO AGENCIES	-1,671,067.
TOTAL TO FORM 990, PART XI, LINE 9	670,818.

SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization

UNITED WAY OF METROPOLITAN DALLAS, INC

Employer identification number

75-6005352

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

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

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

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

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

Schedule R (Form 990) 2020

032161 10-28-20 LHA

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? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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	(i) No

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		X
b Gift, grant, or capital contribution to related organization(s)	1b		X
c Gift, grant, or capital contribution from related organization(s)	1c	X	
d Loans or loan guarantees to or for related organization(s)	1d		X
e Loans or loan guarantees by related organization(s)	1e		X
f Dividends from related organization(s)	1f		X
g Sale of assets to related organization(s)	1g		X
h Purchase of assets from related organization(s)	1h		X
i Exchange of assets with related organization(s)	1i		X
j Lease of facilities, equipment, or other assets to related organization(s)	1j		X
k Lease of facilities, equipment, or other assets from related organization(s)	1k		X
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	X	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
o Sharing of paid employees with related organization(s)	1o	X	
p Reimbursement paid to related organization(s) for expenses	1p		X
q Reimbursement paid by related organization(s) for expenses	1q		X
r Other transfer of cash or property to related organization(s)	1r		X
s Other transfer of cash or property from related organization(s)	1s		X

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)	UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	C	2,600,000.	FMV
(2)	UNITED WAY FOUNDATION OF METROPOLITAN DALLAS	O	460,443.	FMV
(3)				
(4)				
(5)				
(6)				

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners sec. 501(c)(3) orgs.? Yes	(e) No	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Form **8868**
(Rev. January 2020)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

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

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

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

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

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

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ▶ JANICE HARISSIS 1800 N LAMAR STREET - DALLAS, TX 75202
  Telephone No. ▶ 214-978-0000 Fax No. ▶
- If the organization does not have an office or place of business in the United States, check this box ..... ▶ ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box ▶ ☐. If it is for part of the group, check this box ▶ ☐ and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until MAY 16, 2022, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ ☐ calendar year _____ or
▶ ☒ tax year beginning JUL 1, 2020, and ending JUN 30, 2021.

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

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

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

LHA **For Privacy Act and Paperwork Reduction Act Notice, see instructions.** Form **8868** (Rev. 1-2020)

023841 04-01-20