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**NAUSHAD MOOLLA, CONTROLLER
UNITED WAY OF GREATER MILWAUKEE, INC.**

FORM 990 INCOME TAX RETURN

FOR YEAR ENDED JUNE 30, 2020

Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization

OMB No. 1545-1878

For calendar year 2019, or fiscal year beginning JUL 1, 2019, and ending JUN 30, 2020

2019

Department of the Treasury
Internal Revenue Service

▶ Do not send to the IRS. Keep for your records.
▶ Go to www.irs.gov/Form8879EO for the latest information.

Name of exempt organization

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Employer identification number

39-0806190

Name and title of officer

**FILIPPO CARINI
CHIEF OPERATING OFFICER**

Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a	Form 990 check here	▶ <input checked="" type="checkbox"/>	b	Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	<u>59,961,080.</u>
2a	Form 990-EZ check here	▶ <input type="checkbox"/>	b	Total revenue, if any (Form 990-EZ, line 9)	2b	_____
3a	Form 1120-POL check here	▶ <input type="checkbox"/>	b	Total tax (Form 1120-POL, line 22)	3b	_____
4a	Form 990-PF check here	▶ <input type="checkbox"/>	b	Tax based on investment income (Form 990-PF, Part VI, line 5)	4b	_____
5a	Form 8868 check here	▶ <input type="checkbox"/>	b	Balance Due (Form 8868, line 3c)	5b	_____

Declaration and Signature Authorization of Officer

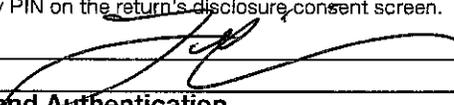
Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

I authorize CLIFTONLARSONALLEN LLP to enter my PIN 06190
ERO firm name Enter five numbers, but do not enter all zeros

as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶  Date ▶ 12/15/20

Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

39631212345
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ KIMBERLY ANDERSON Date ▶ 12/15/20

**ERO Must Retain This Form - See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.

Form **8879-EO** (2019)

923051 10-03-19

Return of Organization Exempt From Income Tax

Form **990**
(Rev. January 2020)
Department of the Treasury
Internal Revenue Service

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.

2019

A For the 2019 calendar year, or tax year beginning **JUL 1, 2019** and ending **JUN 30, 2020**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.		D Employer identification number 39-0806190	
	Doing business as		E Telephone number 414-263-8141	
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite 225 WEST VINE STREET		G Gross receipts \$ 64,403,192.	
	City or town, state or province, country, and ZIP or foreign postal code MILWAUKEE, WI 53212		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
F Name and address of principal officer: AMY LINDNER SAME AS C ABOVE				
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c)() (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527				
J Website: ▶ WWW.UNITEDWAYGMWC.ORG				
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶				
			L Year of formation: 1909	
				M State of legal domicile: WI

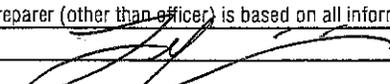
Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: UNITED WAY CHANGES LIVES AND IMPROVES OUR COMMUNITY BY MOBILIZING PEOPLE/RESOURCES TO DRIVE	
	2 Check this box <input type="checkbox"/> 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)	51
	4 Number of independent voting members of the governing body (Part VI, line 1b)	50
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	149
	6 Total number of volunteers (estimate if necessary)	2500
	7a Total unrelated business revenue from Part VIII, column (C), line 12	0.
	7b Net unrelated business taxable income from Form 990-T, line 39	0.

		Prior Year	Current Year
Revenue	8 Contributions and grants (Part VIII, line 1h)	56,249,894.	58,882,574.
	9 Program service revenue (Part VIII, line 2g)	857,622.	806,960.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	990,313.	232,387.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	46,679.	39,159.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	58,144,508.	59,961,080.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	48,508,399.	49,067,847.
	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)	7,528,626.	7,303,456.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,511,414.		
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,136,930.	3,060,860.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	59,173,955.	59,432,163.	
19 Revenue less expenses. Subtract line 18 from line 12	-1,029,447.	528,917.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	38,095,967.	37,310,546.
	21 Total liabilities (Part X, line 26)	7,681,372.	7,905,416.
	22 Net assets or fund balances. Subtract line 21 from line 20	30,414,595.	29,405,130.

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 12/15/20	
	FILIPPO CARINI, CHIEF OPERATING OFFICER Type or print name and title			
Paid Preparer Use Only	Print/Type preparer's name KIMBERLY ANDERSON	Preparer's signature KIMBERLY ANDERSON	Date 12/15/20	Check if self-employed <input type="checkbox"/> PTIN P00188889
	Firm's name ▶ CLIFTONLARSONALLEN LLP		Firm's EIN ▶ 41-0746749	
Firm's address ▶ 8215 GREENWAY BOULEVARD, SUITE 600 MIDDLETON, WI 53562			Phone no. 608-662-8600	

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.

Form 990 (2019)

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Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
OUR MISSION: UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY CHANGES LIVES AND IMPROVES OUR COMMUNITY BY MOBILIZING PEOPLE AND RESOURCES TO DRIVE STRATEGIC IMPACT IN HEALTH, EDUCATION AND FINANCIAL STABILITY.

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 \$ 26,400,674. including grants of \$ 24,529,485.) (Revenue \$ _____)
COMMUNITY INVESTMENT STRATEGIES - SEE SCHEDULE O

4b (Code: _____) (Expenses \$ 1,091,312. including grants of \$ _____) (Revenue \$ 353,301.)
VOLUNTEER ENGAGEMENT - SEE SCHEDULE O

4c (Code: _____) (Expenses \$ 525,317. including grants of \$ _____) (Revenue \$ _____)
GRANTS - SEE SCHEDULE O

4d Other program services (Describe on Schedule O.)
(Expenses \$ 24,538,362. including grants of \$ 24,538,362.) (Revenue \$ 453,659.)

4e Total program service expenses **52,555,665.**

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	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	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		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		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		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		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		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		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		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	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	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	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		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		X
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	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		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		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		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		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		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		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	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		X
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		X
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	X	

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WAUKESHA COUNTY INC.**

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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? <i>If "Yes," complete Schedule I, Parts I and III</i>	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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i>	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? <i>If "Yes," complete Schedule L, Part III</i>	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? <i>If "Yes," complete Schedule L, Part IV</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c	X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	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? <i>If "Yes," complete Schedule R, Part I</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	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? <i>If "Yes," complete Schedule R, Part VI</i>	37	X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	X

Note: All Form 990 filers are required to complete Schedule O

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	49
b Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	7
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

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WAUKESHA COUNTY INC.**

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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		149
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		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		
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)?		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?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
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?	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		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?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
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?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
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?		
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? 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?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
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.		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.		X

Form 990 (2019)

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

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 51 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 50		
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?		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?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		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?		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?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	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		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?		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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	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	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	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	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	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	X	
b	Other officers or key employees of the organization	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?		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?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **WI**
- 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 **FILIPPO CARINI - 414-263-8100**
225 W. VINE STREET, MILWAUKEE, WI 53212

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) LINDA BENFIELD VICE CHAIR	1.10	X		X				0.	0.	0.
(2) STEVEN BOOTH DIRECTOR	0.30	X						0.	0.	0.
(3) DANIEL BUKIEWICA DIRECTOR	0.30	X						0.	0.	0.
(4) CHERYL CARRON DIRECTOR	0.30	X						0.	0.	0.
(5) MICHAEL CARTER DIRECTOR	0.30	X						0.	0.	0.
(6) SHEILA COCHRAN DIRECTOR	0.30	X						0.	0.	0.
(7) ERIC CONLEY DIRECTOR	0.30	X						0.	0.	0.
(8) NICOLE CONRAD DIRECTOR	0.30	X						0.	0.	0.
(9) PAMELA FENDT DIRECTOR	0.60	X						0.	0.	0.
(10) KEVIN FLETCHER DIRECTOR	0.30	X						0.	0.	0.
(11) JOHN FLORSHEIM DIRECTOR	0.30	X						0.	0.	0.
(12) MICHAEL FLYNN DIRECTOR	0.30	X						0.	0.	0.
(13) CRISTY GARCIA-THOMAS DIRECTOR	0.30	X						0.	0.	0.
(14) CINDY GNADINGER DIRECTOR	0.30	X						0.	0.	0.
(15) CECELIA GORE DIRECTOR	0.30	X						0.	0.	0.
(16) KELLY GREBE SECRETARY	2.60	X		X				0.	0.	0.
(17) JACQUELINE HERD-BARBER DIRECTOR	0.60	X						0.	0.	0.

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Form 990 (2019)

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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) NANCY HERNANDEZ DIRECTOR	0.30	X					0.	0.	0.	
(19) MARK IRGENS DIRECTOR	0.30	X					0.	0.	0.	
(20) JASMINE JOHNSON DIRECTOR	0.30	X					0.	0.	0.	
(21) SUZANNE KELLEY DIRECTOR	0.30	X					0.	0.	0.	
(22) JOHN KISSINGER DIRECTOR	0.30	X					0.	0.	0.	
(23) DR. JEANNETTE KOWALIK DIRECTOR	0.30	X					0.	0.	0.	
(24) DONALD LAYDEN VICE CHAIR	0.60	X		X			0.	0.	0.	
(25) MATTHEW LEVATICH DIRECTOR	0.30	X					0.	0.	0.	
(26) EARNELL LUCAS DIRECTOR	0.30	X					0.	0.	0.	
1b Subtotal							0.	0.	0.	
c Total from continuation sheets to Part VII, Section A							1,138,885.	0.	184,650.	
d Total (add lines 1b and 1c)							1,138,885.	0.	184,650.	

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 7

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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
NONE		

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 0

SEE PART VII, SECTION A CONTINUATION SHEETS

Form **990** (2019)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

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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 (check all that apply)						(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			
(27) ROBYN LUDTKE DIRECTOR	0.30	X						0.	0.	0.
(28) JAY MAGULSKI DIRECTOR	0.30	X						0.	0.	0.
(29) GREGORY MARCUS DIRECTOR	0.60	X						0.	0.	0.
(30) BLAKE MORET DIRECTOR	0.30	X						0.	0.	0.
(31) WAYNE MORGAN DIRECTOR	0.60	X						0.	0.	0.
(32) CORY NETTLES DIRECTOR	0.60	X						0.	0.	0.
(33) GEORGE OLIVER DIRECTOR	0.30	X						0.	0.	0.
(34) JEFFREY PEELEN DIRECTOR	0.30	X						0.	0.	0.
(35) CHRISTOPHER PIOTROWSKI DIRECTOR	0.60	X						0.	0.	0.
(36) DR. KEITH POSLEY DIRECTOR	0.30	X						0.	0.	0.
(37) JONAS PRISING DIRECTOR	0.30	X						0.	0.	0.
(38) AUSTIN RAMIREZ DIRECTOR	2.60	X						0.	0.	0.
(39) DR. JOHN RAYMOND DIRECTOR	2.60	X						0.	0.	0.
(40) MICHAEL ROWE DIRECTOR	0.30	X						0.	0.	0.
(41) STEVE SALOUTOS DIRECTOR	0.30	X						0.	0.	0.
(42) BERNIE SHERRY DIRECTOR	0.30	X						0.	0.	0.
(43) THELMA SIAS DIRECTOR	0.30	X						0.	0.	0.
(44) ERIKA SMITH DIRECTOR	0.30	X						0.	0.	0.
(45) JUDSON SNYDER DIRECTOR	2.60	X						0.	0.	0.
(46) SCOTT TURNER DIRECTOR	0.30	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

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Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	25,508.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	783,492.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	58,073,574.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 4,744,654.				
	h Total. Add lines 1a-1f			58,882,574.			
Program Service Revenue	2 a SERVICE FEES	Business Code					
		900099	446,409.	446,409.			
	b VOLUNTEER ENGAGEMENT FEES	900099	353,301.	353,301.			
	c MEMBERSHIP FEES	900099	7,250.	7,250.			
	d _____						
	e _____						
	f All other program service revenue						
g Total. Add lines 2a-2f			806,960.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		432,528.			432,528.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	2,516,201.	1,714,719.		
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	2,629,556.	1,801,505.			
	c Gain or (loss)	7c	-113,355.	-86,786.			
	d Net gain or (loss)			-200,141.		-200,141.	
8 a Gross income from fundraising events (not including \$ 25,508. of contributions reported on line 1c). See Part IV, line 18	8a		19,382.				
		b Less: direct expenses	8b	11,051.			
c Net income or (loss) from fundraising events			8,331.		8,331.		
9 a Gross income from gaming activities. See Part IV, line 19	9a		1,172.				
		b Less: direct expenses	9b	0.			
c Net income or (loss) from gaming activities			1,172.		1,172.		
10 a 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	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue	900099	29,656.			29,656.	
	e Total. Add lines 11a-11d			29,656.			
12 Total revenue. See instructions			59,961,080.	806,960.	0.	271,546.	

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Form 990 (2019)

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Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	49,067,847.	49,067,847.		
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	552,364.	101,236.	341,845.	109,283.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	5,217,347.	1,865,650.	1,062,031.	2,289,666.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	406,969.	169,540.	87,360.	150,069.
9 Other employee benefits	714,993.	254,714.	153,640.	306,639.
10 Payroll taxes	411,783.	138,335.	91,518.	181,930.
11 Fees for services (nonemployees):				
a Management				
b Legal	23,600.	1,275.	17,934.	4,391.
c Accounting	30,401.	1,643.	23,102.	5,656.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	32,637.		32,637.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch. O.)	493,735.	115,391.	163,707.	214,637.
12 Advertising and promotion	156,990.	816.	87.	156,087.
13 Office expenses	100,619.	23,449.	30,927.	46,243.
14 Information technology	161,225.	29,818.	22,722.	108,685.
15 Royalties				
16 Occupancy	184,835.	78,928.	32,331.	73,576.
17 Travel	48,385.	17,583.	5,407.	25,395.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	57,038.	40,166.	5,777.	11,095.
20 Interest	2,025.	616.	485.	924.
21 Payments to affiliates	583,413.	177,520.	139,765.	266,128.
22 Depreciation, depletion, and amortization	213,859.	65,072.	51,234.	97,553.
23 Insurance	27,921.	3,777.	17,455.	6,689.
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 MISCELLANEOUS	425,975.	102,941.	80,230.	242,804.
b CAMPAIGN & AGENCY RELAT	341,121.	242,986.	2,811.	95,324.
c PRINTING, PUBLICATIONS,	106,888.	56,362.	2,079.	48,447.
d UNITED EWAY EXPENSE	70,193.			70,193.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	59,432,163.	52,555,665.	2,365,084.	4,511,414.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Form 990 (2019)

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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		1		
	2 Savings and temporary cash investments	5,128,576.	2	4,759,520.	
	3 Pledges and grants receivable, net	12,862,290.	3	12,084,162.	
	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	400,000.	7	400,000.	
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	55,550.	9	48,768.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 5,260,344.			
	b Less: accumulated depreciation	10b 3,273,510.	2,119,836.	10c	1,986,834.
	11 Investments - publicly traded securities		11		
	12 Investments - other securities. See Part IV, line 11	17,274,352.	12	17,736,536.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	255,363.	15	294,726.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	38,095,967.	16	37,310,546.		
Liabilities	17 Accounts payable and accrued expenses	831,346.	17	756,083.	
	18 Grants payable	6,278,579.	18	5,428,121.	
	19 Deferred revenue	524,250.	19	1,627,450.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			22	
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	47,197.	25	93,762.	
	26 Total liabilities. Add lines 17 through 25	7,681,372.	26	7,905,416.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	25,976,962.	27	24,862,530.	
	28 Net assets with donor restrictions	4,437,633.	28	4,542,600.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building, or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
	32 Total net assets or fund balances	30,414,595.	32	29,405,130.	
	33 Total liabilities and net assets/fund balances	38,095,967.	33	37,310,546.	

Form **990** (2019)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Form 990 (2019)

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Part XI Reconciliation of Net Assets

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

1 Total revenue (must equal Part VIII, column (A), line 12)	1	59,961,080.
2 Total expenses (must equal Part IX, column (A), line 25)	2	59,432,163.
3 Revenue less expenses. Subtract line 2 from line 1	3	528,917.
4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	30,414,595.
5 Net unrealized gains (losses) on investments	5	311,535.
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	-1,849,917.
10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	29,405,130.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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?	2a		X
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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
b Were the organization's financial statements audited by an independent accountant?	2b	X	
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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		

Form **990** (2019)

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

2019

Open to Public Inspection

Name of the organization **UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.** Employer identification number **39-0806190**

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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	58015256.	60058019.	54945626.	56249894.	58882574.	288151369
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	58015256.	60058019.	54945626.	56249894.	58882574.	288151369
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)						24622232.
6 Public support. Subtract line 5 from line 4.						263529137

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4	58015256.	60058019.	54945626.	56249894.	58882574.	288151369
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	334,091.	426,574.	467,769.	392,884.	432,528.	2053846.
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.)						
11 Total support. Add lines 7 through 10						290205215
12 Gross receipts from related activities, etc. (see instructions)					12	3,434,890.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f))	14	90.81 %
15 Public support percentage from 2018 Schedule A, Part II, line 14	15	90.75 %
16a 33 1/3% support test - 2019. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2018. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2019. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2018. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

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

19a 33 1/3% support tests - 2019. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2018. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>		
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2019 from Section C, line 6	
10 Line 8 amount divided by line 9 amount	

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

UNITED WAY OF GREATER MILWAUKEE &

Schedule A (Form 990 or 990-EZ) 2019 WAUKESHA COUNTY INC.

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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.)

Multiple horizontal lines for supplemental information.

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

2019

Name of the organization

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Employer identification number

39-0806190

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, 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 GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number 39-0806190
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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	_____ _____ _____	\$ <u>2,138,396.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>1,969,601.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>4,185,750.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
4	_____ _____ _____	\$ <u>1,189,070.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	_____ _____ _____	\$ <u>1,300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number 39-0806190
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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
3	5,000 SHARES OF APPLE INC, 60,000 SHARES OF ASSOCIATED BANK CORP, 4,000 SHARES OF BRISTOL MYERS	\$ 2,870,410.	12/31/19
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number 39-0806190
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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	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

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

2019

Open to Public Inspection

Name of the organization UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC. Employer identification number 39-0806190

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include total number at end of year, aggregate value of contributions, grants, and end of year, and two yes/no questions about donor property and grant fund usage.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include purpose of easements, a table for 2a-2d (Total number, acreage, certified historic structures, and National Register), and questions about monitoring, staff hours, expenses, and reporting requirements.

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.

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Rows include questions about reporting art and historical treasures, and a table for 2a-2b (Revenue and Assets included).

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule D (Form 990) 2019

39-0806190 Page **3**

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) ENDOWMENT-MUTUAL FUNDS	4,986,065.	END-OF-YEAR MARKET VALUE
(B) GENERAL - MUTUAL FUNDS	12,441,229.	END-OF-YEAR MARKET VALUE
(C) ENDOWMENT-CASH FUNDS	309,242.	END-OF-YEAR MARKET VALUE
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	17,736,536.	

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) 457(B) PLAN PARTICIPANT LIABILITY	93,762.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	93,762.

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 ...

Schedule D (Form 990) 2019

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	34,035,180.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	311,535.	
b	Donated services and use of facilities	2b	183,481.	
c	Recoveries of prior year grants	2c	-1,849,917.	
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		-1,354,901.
3	Subtract line 2e from line 1	3		35,390,081.
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	32,637.	
b	Other (Describe in Part XIII.)	4b	24,538,362.	
c	Add lines 4a and 4b	4c		24,570,999.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5		59,961,080.

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	35,044,645.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	183,481.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		183,481.
3	Subtract line 2e from line 1	3		34,861,164.
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	32,637.	
b	Other (Describe in Part XIII.)	4b	24,538,362.	
c	Add lines 4a and 4b	4c		24,570,999.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5		59,432,163.

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:

UNITED WAY'S ENDOWMENTS CONSIST OF VARIOUS FUNDS ESTABLISHED TO BENEFIT UNITED WAY FOR A VARIETY OF PURPOSES. UNITED WAY'S ENDOWMENTS INCLUDE BOTH DONOR-RESTRICTED ENDOWMENTS AND FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS AN ENDOWMENT. NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.

PART X, LINE 2:

MANAGEMENT ANALYZED THE REQUIREMENTS FOR ACCOUNTING FOR UNCERTAIN TAX POSITIONS. THE ORGANIZATION DETERMINED THAT IT WAS NOT REQUIRED TO RECORD A LIABILITY RELATED TO UNCERTAIN TAX POSITIONS AT JUNE 30, 2020 AND 2019.

UNITED WAY OF GREATER MILWAUKEE &

Schedule G (Form 990 or 990-EZ) 2019 **WAUKESHA COUNTY INC.**

39-0806190 Page 2

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		SPREE (event type)	(event type)	NONE (total number)	
Revenue	1 Gross receipts	44,890.			44,890.
	2 Less: Contributions	25,508.			25,508.
	3 Gross income (line 1 minus line 2)	19,382.			19,382.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages	6,928.			6,928.
	8 Entertainment				
	9 Other direct expenses	4,123.			4,123.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				11,051.
11 Net income summary. Subtract line 10 from line 3, column (d)				8,331.	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

**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

2019

**Open to Public
Inspection**

Name of the organization **UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

**Employer identification number
39-0806190**

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? **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
CITY OF MILWAUKEE HEALTH DEPT 200 E WELLS STREET MILWAUKEE, WI 53202		GOVT	5,000.	0.			HEALTHY BIRTH OUTCOMES AWARD
CITY OF MILWAUKEE HEALTH DEPT 200 E WELLS STREET MILWAUKEE, WI 53202		GOVT	15,000.	0.			BACK TO SCHOOL HEALTH FAIR
UNITED WAY OF WASHTENAW 2305 PLATT ROAD ANN ARBOR, MI 48104	38-1951024	501 (C)(3)	26,926.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PORTAL INC. 1015 CEDAR CREEK ROAD GRAFTON, WI 53024	39-1024001	501 (C)(3)	8,728.	0.			EMPLOYMENT READINESS AND ADVANCEMENT
SAINTA 28901 W CAPITOL DRIVE MILWAUKEE, WI 53222	39-1338354	501 (C)(3)	50,000.	0.			HEALTH IMPROVEMENT FUND AWARD
RIVERWEST FOOD PANTRY 2610 N MARTIN LUTHER KING DR MILWAUKEE, WI 53212	46-3422131	501 (C)(3)	6,137.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **661.**

3 Enter total number of other organizations listed in the line 1 table ▶ **0.**

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

Schedule I (Form 990) (2019)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule I (Form 990)

39-0806190

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
RONALD MCDONALD HOUSE CHARITIES OF EASTERN WISCONSIN - 8948 W WATERTOWN PLANK ROAD - WAUWATOSA, WI 53226	39-1433107	501 (C)(3)	6,800.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PREVENT BLINDNESS WISCONSIN 731 N JACKSON ST STE 405 MILWAUKEE, WI 53202-7600	39-6096227	501 (C)(3)	61,100.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PROGRESSIVE COMMUNITY HEALTH CENTERS - 3522 W. LISBON AVENUE - MILWAUKEE, WI 53208	39-1958810	501 (C)(3)	184,324.	0.			SHARED COMMUNITY INVESTMENT FUND
PROGRESSIVE COMMUNITY HEALTH CENTERS - 3522 W. LISBON AVENUE - MILWAUKEE, WI 53208	39-1958810	501 (C)(3)	30,000.	0.			HEALTHY BIRTH OUTCOMES AWARD
ADAPTIVE COMMUNITY APPROACH PROGRAM, INC. (ACAP) - 121 WISCONSIN AVENUE - WAUKESHA, WI 53186-4924	39-1867400	501 (C)(3)	16,680.	0.			COVID 19 FUNDING
MATC FOUNDATION (PROMISE SCHOLARSHIP FUND) - 700 WEST STATE STREET - MILWAUKEE, WI 53233	39-1341603	501 (C)(3)	175,927.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
RIVEREDGE NATURE CENTER INC 4458 COUNTY HWY Y NEWBURG, WI 53060	39-6108549	501 (C)(3)	5,442.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ROCKETSHIP EDUCATION WISCONSIN 3003 WEST CLEVELAND AVENUE MILWAUKEE, WI 53215	90-0951861	501 (C)(3)	6,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEIGHBORHOOD HOUSE OF MILWAUKEE, INC. - 2819 W. RICHARDSON PLACE - MILWAUKEE, WI 53208-3546	39-0806269	501 (C)(3)	93,159.	0.			EARLY CHILDHOOD EDUCATION

Schedule I (Form 990)

UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.

Schedule I (Form 990)

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
RUNNING REBELS COMMUNITY ORGANIZATION - 225 W CAPITOL DR - MILWAUKEE, WI 53212	39-3910464	501 (C)(3)	7,008.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
RUNNING REBELS COMMUNITY ORGANIZATION - 225 W CAPITOL DR - MILWAUKEE, WI 53212	39-3910464	501 (C)(3)	35,000.	0.			HEALTHY YOUTH INITIATIVE
PORTAL INC. 1015 CEDAR CREEK ROAD GRAFTON, WI 53024	39-1024001	501 (C)(3)	12,994.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SAFE AND SOUND 801 WEST MICHIGAN STREET MILWAUKEE, WI 53233	39-1940292	501 (C)(3)	13,588.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
RECIPE FOR CHANGE 1266 NORTH MILWAUKEE AVENUE CHICAGO, IL 60622	47-2510670	501 (C)(3)	5,875.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PENFIELD CHILDREN'S CENTER 833 NORTH 26TH STREET MILWAUKEE, WI 53233-1507	39-1093701	501 (C)(3)	40,964.	0.			BEHAVIORAL HEALTH CLINIC
PATHFINDERS 4200 NORTH HOLTON STREET, SUITE 400 MILWAUKEE, WI 53212	39-1185304	501 (C)(3)	30,000.	0.			COVID 19 FUNDING
PATHFINDERS 4200 NORTH HOLTON STREET, SUITE 400 MILWAUKEE, WI 53212	39-1185304	501 (C)(3)	36,605.	0.			SUPPORTED HOUSING
PARENTS PLACE 1570 EAST MORELAND BOULEVARD WAUKESHA, WI 53186	39-1513200	501 (C)(3)	51,626.	0.			COMMUNITY EDUCATION/BORN LEARNING

Schedule I (Form 990)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule I (Form 990)

39-0806190

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
META HOUSE, INC. 2625 NORTH WEIL STREET MILWAUKEE, WI 53212	39-1017822	501 (C)(3)	164,283.	0.			TRANSITIONAL LIVING
SKYLIGHT OPERA THEATRE 158 N BROADWAY ST STE 400 MILWAUKEE, WI 53202-6038	39-0975374	501 (C)(3)	6,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PLYMOUTH COMMUNITY UNITED WAY 960 W. ANN ARBOR TRAIL, SUITE 2 PLYMOUTH, MI 48170	23-7327248	501 (C)(3)	110,788.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PATHWAYS HIGH 336 W. WALNUT ST. MILWAUKEE, WI 53212	81-2564093	501 (C)(3)	21,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PARENTS PLACE 1570 EAST MORELAND BOULEVARD WAUKESHA, WI 53186	39-1513200	501 (C)(3)	10,992.	0.			SUPERVISED VISITATION
PATHFINDERS 4200 NORTH HOLTON STREET, SUITE 400 MILWAUKEE, WI 53212	39-1185304	501 (C)(3)	256,856.	0.			PATHFINDERS YOUTH SHELTER
PATHFINDERS 4200 NORTH HOLTON STREET, SUITE 400 MILWAUKEE, WI 53212	39-1185304	501 (C)(3)	160,591.	0.			CLINICAL SERVICES
PENFIELD MONTESSORI ACADEMY 1441 N 24TH ST MILWAUKEE, WI 53205	47-3685752	501 (C)(3)	5,475.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PARENTING NETWORK, INC., THE 7516 WEST BURLEIGH STREET MILWAUKEE, WI 53210-1030	39-1312225	501 (C)(3)	25,000.	0.			HEALTHY YOUTH INITIATIVE

Schedule I (Form 990)

UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.

Schedule I (Form 990)

39-0806190

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PATHFINDERS 4200 NORTH HOLTON STREET, SUITE 400 MILWAUKEE, WI 53212	39-1185304	501 (C)(3)	70,756.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PATHFINDERS 4200 NORTH HOLTON STREET, SUITE 400 MILWAUKEE, WI 53212	39-1185304	501 (C)(3)	45,000.	0.			HEALTHY YOUTH INITIATIVE
PEARLS FOR TEEN GIRLS, INC. 1805 N. MARTIN LUTHER KING DRIVE MILWAUKEE, WI 53212	39-1997970	501 (C)(3)	130,042.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SALVATION ARMY, THE 11315 WEST WATERTOWN PLANK ROAD WAUWATOSA, WI 53226-0019	13-2923701	501 (C)(3)	25,000.	0.			SAFE & STABLE HOMES
PEARLS FOR TEEN GIRLS, INC. 1805 N. MARTIN LUTHER KING DRIVE MILWAUKEE, WI 53212	39-1997970	501 (C)(3)	80,000.	0.			HEALTHY YOUTH INITIATIVE
PENFIELD CHILDREN'S CENTER 833 NORTH 26TH STREET MILWAUKEE, WI 53233-1507	39-1093701	501 (C)(3)	393,301.	0.			EARLY INTERVENTION/PARENT PROGRAM
PENFIELD CHILDREN'S CENTER 833 NORTH 26TH STREET MILWAUKEE, WI 53233-1507	39-1093701	501 (C)(3)	145,482.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SAINT THOMAS MORE HIGH SCHOOL 2601 EAST MORGAN AVENUE BAY VIEW, WI 53207	39-1163083	501 (C)(3)	12,275.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
PARENTING NETWORK, INC., THE 7516 WEST BURLEIGH STREET MILWAUKEE, WI 53210-1030	39-1312225	501 (C)(3)	83,593.	0.			PARENTING EDUCATION AND SUPPORT SERVICES

Schedule I (Form 990)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule I (Form 990)

39-0806190

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Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
PLAYWORKS WISCONSIN 3600 W. PIERCE STREET MILWAUKEE, WI 53215	94-3251867	501 (C)(3)	35,000.	0.			HELPING KIDS SUCCEED INITIATIVE
PLANNED PARENTHOOD OF WISCONSIN ATTN: DEVELOPMENT DEPARTMENT, 302 NORTH JACKSON STREET - MILWAUKEE, WI 53202	39-0863391	501 (C)(3)	278,234.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SOJOURNER FAMILY PEACE CENTER, INC. - 619 WEST WALNUT STREET - MILWAUKEE, WI 53212	39-1276210	501 (C)(3)	95,118.	0.			COURTHOUSE ADVOCACY
ST. ELIZABETH ANN SETON DENTAL CLINIC - 1730 SOUTH 13 STREET - MILWAUKEE, WI 53204	39-1494981	501 (C)(3)	22,743.	0.			HEALTHY TEETH FOR CHILDREN
SPECIAL OLYMPICS WISCONSIN-GREATER MILWAUKEE AREA - 10224 N PORT WASHINGTON RD - MEQUON, WI 53092	39-1176591	501 (C)(3)	8,336.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SALVATION ARMY, THE 11315 WEST WATERTOWN PLANK ROAD WAUWATOSA, WI 53226-0019	13-2923701	501 (C)(3)	10,788.	0.			MILWAUKEE OUTREACH HOUSING PROJECT
SOJOURNER FAMILY PEACE CENTER, INC. - 619 WEST WALNUT STREET - MILWAUKEE, WI 53212	39-1276210	501 (C)(3)	30,860.	0.			EMERGENCY SHELTER
SOJOURNER FAMILY PEACE CENTER, INC. - 619 WEST WALNUT STREET - MILWAUKEE, WI 53212	39-1276210	501 (C)(3)	19,089.	0.			BEYOND ABUSE
SOJOURNER FAMILY PEACE CENTER, INC. - 619 WEST WALNUT STREET - MILWAUKEE, WI 53212	39-1276210	501 (C)(3)	13,270.	0.			DOMESTIC ABUSE VICTIM ADVOCATES

Schedule I (Form 990)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule I (Form 990)

39-0806190

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
SOCIAL DEVELOPMENT FOUNDATION 1730 WEST NORTH AVENUE MILWAUKEE, WI 53205	47-0923289	501 (C)(3)	93,000.	0.			VITA TAX PROGRAM
SIXTEENTH STREET COMMUNITY HEALTH CENTERS INC. - 1032 S CESAR E CHAVEZ DR - MILWAUKEE, WI 53204	39-1180475	501 (C)(3)	49,145.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SOUTHEASTERN WISCONSIN YOUTH FOR CHRIST - 3001 CARPENTER AVE - MT PLEASANT, WI 53403	39-0977052	501 (C)(3)	6,718.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SPECIAL SPACES 10936 NORTH PORT WASHINGTON ROAD #1 MEQUON, WI 53092	42-1641574	501 (C)(3)	5,705.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER CHIPPEWA VALLEY, INC. - 3603 NORTH HASTINGS WAY, SUITE 200 - EAU CLAIRE, WI 54703	39-1077901	501 (C)(3)	33,330.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. ANN CENTER FOR INTERGENERATIONAL CARE - 2801 EAST MORGAN AVENUE - MILWAUKEE, WI 53207	39-1757756	501 (C)(3)	91,716.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. AUGUSTINE PREPARATORY ACADEMY 2607 S 5TH ST MILWAUKEE, WI 53207	47-1800734	501 (C)(3)	378,212.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. BENEDICT COMMUNITY MEAL PROGRAM CAPUCHIN COMMUNITY SERVICES - 1015 NORTH NINTH STREET - MILWAUKEE, WI 53233	39-0806264	501 (C)(3)	7,430.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. COLETTA OF WISCONSIN, INC. N4637 COUNTY ROAD Y JEFFERSON, WI 53549	39-0816855	501 (C)(3)	604,269.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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SOJOURNER FAMILY PEACE CENTER, INC. - 619 WEST WALNUT STREET - MILWAUKEE, WI 53212	39-1276210	501 (C)(3)	146,276.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SALVATION ARMY, THE 11315 WEST WATERTOWN PLANK ROAD WAUWATOSA, WI 53226-0019	13-2923701	501 (C)(3)	134,495.	0.			EMERGENCY LODGE
SHERMAN PARK COMMUNITY ASSOCIATION 3526 W. FOND DU LAC AVE MILWAUKEE, WI 53216	23-7281891	501 (C)(3)	5,000.	0.			COVID 19 FUNDING
SALVATION ARMY - WAUKESHA 445 MADISON STREET WAUKESHA, WI 53188	13-2923701	501 (C)(3)	50,000.	0.			COVID 19 FUNDING
SALVATION ARMY - WAUKESHA 445 MADISON STREET WAUKESHA, WI 53188	13-2923701	501 (C)(3)	54,959.	0.			EMERGENCY LODGE
SIXTEENTH STREET COMMUNITY HEALTH CENTERS INC. - 1032 S CESAR E CHAVEZ DR - MILWAUKEE, WI 53204	39-1180475	501 (C)(3)	605,803.	0.			SHARED COMMUNITY INVESTMENT FUND
SALVATION ARMY, THE 11315 WEST WATERTOWN PLANK ROAD WAUWATOSA, WI 53226-0019	13-2923701	501 (C)(3)	17,824.	0.			EMPLOYMENT ASSISTANCE
SOCIAL DEVELOPMENT COMISSION 1730 WEST NORTH AVENUE MILWAUKEE, WI 53205	47-0923289	501 (C)(3)	133,991.	0.			COVID 19 FUNDING
SILVER SPRING NEIGHBORHOOD CENTER INC. - 5460 NORTH 64TH STREET - MILWAUKEE, WI 53218	39-0966281	501 (C)(3)	259,658.	0.			YOUTH SOCIAL DEVELOPMENT

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PARENTING NETWORK, INC., THE 7516 WEST BURLEIGH STREET MILWAUKEE, WI 53210-1030	39-1312225	501 (C)(3)	69,544.	0.			PARENT HELPLINE
SALVATION ARMY - WAUKESHA 445 MADISON STREET WAUKESHA, WI 53188	13-2923701	501 (C)(3)	15,759.	0.			FAMILY SERVICES
SCHLITZ AUDUBON NATURE CENTER 1111 EAST BROWN DEER ROAD BAYSIDE, WI 53217	39-1231819	501 (C)(3)	5,144.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SECUREFUTURES 710 PLANKINTON AVENUE MILWAUKEE, WI 53203	20-5203533	501 (C)(3)	17,126.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SALVATION ARMY, THE 11315 WEST WATERTOWN PLANK ROAD WAUWATOSA, WI 53226-0019	13-2923701	501 (C)(3)	54,049.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SERENITY INNS, INC. 2825 WEST BROWN STREET MILWAUKEE, WI 53208	41-2034019	501 (C)(3)	14,213.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SHOREWOOD SEED FOUNDATION POST OFFICE BOX 71235 GLENDALE, WI 53211	04-3750042	501 (C)(3)	17,174.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SILVER SPRING NEIGHBORHOOD CENTER INC. - 5460 NORTH 64TH STREET - MILWAUKEE, WI 53218	39-0966281	501 (C)(3)	143,422.	0.			ELAINE SCHREIBER CHILD DEVELOPMENT CENTER
SIXTEENTH STREET COMMUNITY HEALTH CENTERS INC. - 1032 S CESAR E CHAVEZ DR - MILWAUKEE, WI 53204	39-1180475	501 (C)(3)	25,000.	0.			COVID 19 FUNDING

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SILVER SPRING NEIGHBORHOOD CENTER INC. - 5460 NORTH 64TH STREET - MILWAUKEE, WI 53218	39-0966281	501 (C)(3)	19,709.	0.			COMMUNITY FOOD BANK
SILVER SPRING NEIGHBORHOOD CENTER INC. - 5460 NORTH 64TH STREET - MILWAUKEE, WI 53218	39-0966281	501 (C)(3)	44,938.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SILVER SPRING NEIGHBORHOOD CENTER INC. - 5460 NORTH 64TH STREET - MILWAUKEE, WI 53218	39-0966281	501 (C)(3)	16,700.	0.			COVID 19 FUNDING
PARENTING NETWORK, INC., THE 7516 WEST BURLEIGH STREET MILWAUKEE, WI 53210-1030	39-1312225	501 (C)(3)	12,681.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SOJOURNER FAMILY PEACE CENTER, INC. - 619 WEST WALNUT STREET - MILWAUKEE, WI 53212	39-1276210	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
OZAUKEE FAMILY SERVICES 885 BADGER CIRCLE GRAFTON, WI 53024-9436	39-1208203	501 (C)(3)	21,635.	0.			COUNSELING SERVICES
OZAUKEE FAMILY SERVICES 885 BADGER CIRCLE GRAFTON, WI 53024-9436	39-1208203	501 (C)(3)	36,257.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE HABITAT FOR HUMANITY 3726 NORTH BOOTH STREET MILWAUKEE, WI 53212	39-1496741	501 (C)(3)	37,323.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE SYMPHONY ORCHESTRA 1101 N. MARKET STREET, SUITE 100 MILWAUKEE, WI 53202-3148	39-6023436	501 (C)(3)	102,420.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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MILWAUKEE JEWISH FEDERATION 1360 NORTH PROSPECT AVENUE MILWAUKEE, WI 53202-3094	39-0806312	501 (C)(3)	399,121.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED COMMUNITY CENTER, INC. 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204-1395	39-1146191	501 (C)(3)	82,204.	0.			AFTER SCHOOL ACHIEVEMENT
MILWAUKEE HABITAT FOR HUMANITY 3726 NORTH BOOTH STREET MILWAUKEE, WI 53212	39-1496741	501 (C)(3)	10,000.	0.			SAFE & STABLE HOMES
MILWAUKEE HEALTH CARE PARTNERSHIP 2320 N LAKE DRIVE MILWAUKEE, WI 53211	39-1931089	501 (C)(3)	190,000.	0.			SHARED COMMUNITY INVESTMENT FUND
MILWAUKEE HEALTH CARE PARTNERSHIP 2320 N LAKE DRIVE MILWAUKEE, WI 53211	39-1931089	501 (C)(3)	64,020.	0.			SHARED COMMUNITY INVESTMENT FUND
MILWAUKEE FIRE BELL FUND 300 S 84TH ST MILWAUKEE, WI 53214-1468	39-0289860	501 (C)(3)	6,924.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE DEVELOPMENT CORPORATION 756 N MILWAUKEE ST STE 400 MILWAUKEE, WI 53202	93-0828687	501 (C)(3)	10,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE HEALTH CARE PARTNERSHIP 2320 N LAKE DRIVE MILWAUKEE, WI 53211	39-1931089	501 (C)(3)	50,000.	0.			HEALTH IMPROVEMENT FUND AWARD
MILWAUKEE LGBT COMMUNITY CENTER 1110 NORTH MARKET STREET #2 MILWAUKEE, WI 53202-3139	39-1893808	501 (C)(3)	32,864.	0.			PROJECT Q HEALTH AND WELLNESS

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MILWAUKEE RIVERWALK DISTRICT 101 WEST PLEASANT STREET, SUITE 204 MILWAUKEE, WI 53212	39-1749659	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE LGBT COMMUNITY CENTER 1110 NORTH MARKET STREET #2 MILWAUKEE, WI 53202-3139	39-1893808	501 (C)(3)	20,265.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE PBS 1036 NORTH 8TH STREET MILWAUKEE, WI 53233	39-1341603	501 (C)(3)	16,780.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE PUBLIC LIBRARY FOUNDATION - 814 WEST WISCONSIN AVENUE - MILWAUKEE, WI 53233	39-1610233	501 (C)(3)	22,062.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE PUBLIC SCHOOLS FOUNDATION - 234 W. GALENA STREET - MILWAUKEE, WI 53212	39-1929112	501 (C)(3)	29,183.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE COMMUNITY BUSINESS COLLABORATIVE - 2821 N. 4TH STREET SUITE 322 - MILWAUKEE, WI 53212	46-3689224	501 (C)(3)	14,935.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE REPERTORY THEATER 108 EAST WELLS STREET MILWAUKEE, WI 53202-3525	39-0946025	501 (C)(3)	32,437.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE BALLET COMPANY LTD 128 N JACKSON ST MILWAUKEE, WI 53202	39-1134735	501 (C)(3)	200,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE CHRISTIAN CENTER, INC. 807 SOUTH 14 STREET MILWAUKEE, WI 53204-2619	39-0807066	501 (C)(3)	9,751.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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DR HOWARD FULLER COLLEGIATE ACADEMY - 4030 N 29TH ST - MILWAUKEE, WI 53216	30-0322248	501 (C)(3)	27,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	28,125.	0.			HEALTHY YOUTH INITIATIVE
MILWAUKEE URBAN LEAGUE 435 WEST NORTH AVENUE MILWAUKEE, WI 53212-3146	39-0826861	501 (C)(3)	112,857.	0.			CAMPAIGN FOR ACADEMIC ACHIEVEMENT
MILWAUKEE FILM INC 1037 W MCKINLEY AVE #700 MILWAUKEE, WI 53205-2530	26-3049630	501 (C)(3)	39,327.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE CENTER FOR INDEPENDENCE 2020 WEST WELLS STREET MILWAUKEE, WI 53233-2720	39-0806257	501 (C)(3)	5,628.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
METRO UNITED WAY, INC. POST OFFICE BOX 950148, DEPT 52860 LOUISVILLE, KY 40295-0148	61-0444680	501 (C)(3)	24,130.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILE HIGH UNITED WAY, INC. 711 PARK AVE W DENVER, CO 80205-2891	84-0404235	501 (C)(3)	100,846.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILESTONES PROGRAMS FOR CHILDREN 2214 EAST CAPITOL DRIVE SHOREWOOD, WI 53211-2105	39-1326721	501 (C)(3)	7,966.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILW AREA TECH COLL/ FOUNDATION AREA OF GREATEST NEED - 700 WEST STATE STREET - MILWAUKEE, WI 53233	39-1341603	501 (C)(3)	38,349.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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MESSMER CATHOLIC SCHOOLS 742 WEST CAPITOL DRIVE MILWAUKEE, WI 53206	39-1482053	501 (C)(3)	7,027.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE ART MUSEUM 700 N ART MUSEUM DR MILWAUKEE, WI 53202	39-0806316	501 (C)(3)	23,600.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE CENTER FOR INDEPENDENCE 2020 WEST WELLS STREET MILWAUKEE, WI 53233-2720	39-0806257	501 (C)(3)	250,000.	0.			SHARED COMMUNITY INVESTMENT FUND
MILWAUKEE CHRISTIAN CENTER, INC. 807 SOUTH 14 STREET MILWAUKEE, WI 53204-2619	39-0807066	501 (C)(3)	72,690.	0.			YOUTH DEVELOPMENT PROGRAM
MILWAUKEE DANCERS FUND ATTN: RANDALL D CROCKER 411 E. WISCONSIN AVENUE, SUITE 1000 - MILWAUKEE, WI	45-4194709	501 (C)(3)	6,413.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE CHRISTIAN CENTER, INC. 807 SOUTH 14 STREET MILWAUKEE, WI 53204-2619	39-0807066	501 (C)(3)	63,002.	0.			ELDERLY ADULT SUPPORT SERVICES
MILWAUKEE CHRISTIAN CENTER, INC. 807 SOUTH 14 STREET MILWAUKEE, WI 53204-2619	39-0807066	501 (C)(3)	58,439.	0.			EMERGENCY FOOD PANTRY
MILWAUKEE CHRISTIAN CENTER, INC. 807 SOUTH 14 STREET MILWAUKEE, WI 53204-2619	39-0807066	501 (C)(3)	28,300.	0.			COVID 19 FUNDING
MILWAUKEE HEALTH SERVICES 2555 NORTH MARTIN LUTHER KING DRIVE MILWAUKEE, WI 53212	39-1664109	501 (C)(3)	64,120.	0.			SHARED COMMUNITY INVESTMENT FUND

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MILWAUKEE EXCELLENCE CHARTER SCHOOL - 4950 NORTH 24 STREET - MILWAUKEE, WI 53209	47-4978181	501 (C)(3)	32,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE INSTITUTE OF ART & DESIGN - 273 EAST ERIE STREET - MILWAUKEE, WI 53202-6003	39-1201561	501 (C)(3)	11,750.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE COLLEGE PREPARATORY - 36TH ST OF WI - 2449 NORTH 36TH STREET - MILWAUKEE, WI 53210	39-1881295	501 (C)(3)	412,945.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEW CONCEPT SELF DEVELOPMENT CENTER, INC. - 1531 WEST VLIET STREET - MILWAUKEE, WI 53205	39-1220236	501 (C)(3)	25,000.	0.			HEALTHY YOUTH INITIATIVE
NEXT DOOR FOUNDATION, INC. 2545 NORTH 29TH STREET MILWAUKEE, WI 53210	39-1162969	501 (C)(3)	53,060.	0.			SKILLS BUILDING & GED FAST-TRACK PROGRAM
OPERATION DREAM 1555 NORTH RIVERCENTER DRIVE, SUITE MILWAUKEE, WI 53212	26-1455938	501 (C)(3)	9,601.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ORANGE COUNTY UNITED WAY 18012 MITCHELL AVENUE IRVINE, CA 92614-6008	33-0047994	501 (C)(3)	7,424.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEXT DOOR FOUNDATION, INC. 2545 NORTH 29TH STREET MILWAUKEE, WI 53210	39-1162969	501 (C)(3)	262,455.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEXT DOOR FOUNDATION, INC. 2545 NORTH 29TH STREET MILWAUKEE, WI 53210	39-1162969	501 (C)(3)	10,000.	0.			SUMMER READING

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NONPROFIT MANAGEMENT FUND 101 W. PLEASANT STREET, 201 MILWAUKEE, WI 53207	39-6036407	501 (C)(3)	30,000.	0.			NONPROFITS SUPPORT-CAPACITY BUILDING
MILWAUKEE URBAN LEAGUE 435 WEST NORTH AVENUE MILWAUKEE, WI 53212-3146	39-0826861	501 (C)(3)	6,737.	0.			AFRICAN AMERICAN ACHVMENT
NORTHWOODS ASSEMBLY OF GOD 926 US HIGHWAY 45 S EAGLE RIVER, WI 54521	39-1343171	501 (C)(3)	30,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NOTRE DAME SCHOOLS OF MILWAUKEE 1418 S LAYTON BLVD MILWAUKEE, WI 53215	39-1850760	501 (C)(3)	50,245.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
OSHKOSH AREA UNITED WAY, INC. 21 W NEW YORK AVE OSHKOSH, WI 54901-3757	39-1017908	501 (C)(3)	8,540.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
OZAUKEE FAMILY SERVICES 885 BADGER CIRCLE GRAFTON, WI 53024-9436	39-1208203	501 (C)(3)	6,616.	0.			PREVENTION
NEW CONCEPT SELF DEVELOPMENT CENTER, INC. - 1531 WEST VLIET STREET - MILWAUKEE, WI 53205	39-1220236	501 (C)(3)	5,449.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
OTSEGO COUNTY UNITED WAY, INC. 116 E 5TH ST GAYLORD, MI 49735	23-7156104	501 (C)(3)	5,700.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
OUR NEXT GENERATION INC. 3421 W. LISBON AVENUE MILWAUKEE, WI 53208	39-1761838	501 (C)(3)	11,273.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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OUTREACH COMMUNITY HEALTH CENTERS, INC. - 711 W. CAPITOL DR. - MILWAUKEE, WI 53206	39-1353282	501 (C)(3)	52,533.	0.			SHARED COMMUNITY INVESTMENT FUND
NORTHWOODS UNITED WAY, INC SEVEN A NORTH BROWN STREET RHINELANDER, WI 54501-0177	39-1247457	501 (C)(3)	5,141.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEW CONCEPT SELF DEVELOPMENT CENTER, INC. - 1531 WEST VLIET STREET - MILWAUKEE, WI 53205	39-1220236	501 (C)(3)	54,555.	0.			EACH ONE REACH ONE
ST. ELIZABETH ANN SETON DENTAL CLINIC - 1730 SOUTH 13 STREET - MILWAUKEE, WI 53204	39-1494981	501 (C)(3)	41,153.	0.			RESTORATIVE CARE PROGRAM
NEW COMMUNITY SHELTER 301 MATHER STREET GREEN BAY, WI 54303	39-1787059	501 (C)(3)	5,299.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE URBAN LEAGUE 435 WEST NORTH AVENUE MILWAUKEE, WI 53212-3146	39-0826861	501 (C)(3)	107,781.	0.			MUL EMPLOYMENT ASSISTANCE
PARENTING NETWORK, INC., THE 7516 WEST BURLEIGH STREET MILWAUKEE, WI 53210-1030	39-1312225	501 (C)(3)	20,000.	0.			HEALTHY BIRTH OUTCOMES AWARD
MILWAUKEE URBAN LEAGUE 435 WEST NORTH AVENUE MILWAUKEE, WI 53212-3146	39-0826861	501 (C)(3)	44,275.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NAMI WAUKESHA, INC. 217 WISCONSIN AVENUE, SUITE 300 WAUKESHA, WI 53186-4946	39-1485627	501 (C)(3)	6,774.	0.			COURT SUPPORT & ADVOCACY

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MILWAUKEE WOMEN'S CENTER, INC., THE - 728 N JAMES LOVELL ST - MILWAUKEE, WI 53233	32-0211087	501 (C)(3)	8,868.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MINNEAPOLIS CITY OF LAKES ROTARY FDN - PO BOX 52069 - MINNEAPOLIS, MN 55402	41-1577900	501 (C)(3)	7,363.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MINNEAPOLIS FOUNDATION SCPC FAMILY FUND - 800 IDS CENTER 80TH ST 8TH FL - MINNEAPOLIS, MN 55402	41-6029402	501 (C)(3)	9,628.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEIGHBORHOOD HOUSE OF MILWAUKEE, INC. - 2819 W. RICHARDSON PLACE - MILWAUKEE, WI 53208-3546	39-0806269	501 (C)(3)	45,566.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MKE URBAN STABLES 3038A N CAMBRIDGE AVE MILWAUKEE, WI 53211	83-2573223	501 (C)(3)	100,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MUSEUM OF WISCONSIN ART 205 VETERANS AVENUE WEST BEND, WI 53095	39-1017647	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MUSLIM COMMUNITY AND HEALTH CENTER 803 WEST LAYTON AVENUE MILWAUKEE, WI 53221	45-2385629	501 (C)(3)	8,966.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NAMI WAUKESHA, INC. 217 WISCONSIN AVENUE, SUITE 300 WAUKESHA, WI 53186-4946	39-1485627	501 (C)(3)	14,158.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEW CONCEPT SELF DEVELOPMENT CENTER, INC. - 1531 WEST VLIET STREET - MILWAUKEE, WI 53205	39-1220236	501 (C)(3)	35,472.	0.			MLK SOCIAL SERVICE

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NATIVITY JESUIT ACADEMY 1515 SOUTH 29 STREET MILWAUKEE, WI 53215	39-1741141	501 (C)(3)	43,286.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEHEMIAH PROJECT, INC. 2506 WEST VLIET STREET MILWAUKEE, WI 53205	39-1841047	501 (C)(3)	20,943.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEIGHBORHOOD HOUSE OF MILWAUKEE, INC. - 2819 W. RICHARDSON PLACE - MILWAUKEE, WI 53208-3546	39-0806269	501 (C)(3)	175,299.	0.			YOUTH DEVELOPMENT PROGRAM
MOUNT MARY UNIVERSITY 2900 NORTH MENOMONEE RIVER PARKWAY MILWAUKEE, WI 53222-4597	39-0806154	501 (C)(3)	17,150.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MILWAUKEE RESCUE MISSION 830 NORTH 19 STREET MILWAUKEE, WI 53233	39-0816851	501 (C)(3)	165,550.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF MASSACHUSETTS BAY AND MERRIMACK VALLEY - 51 SLEEPER STREET - BOSTON, MA 02210-1208	04-2382233	501 (C)(3)	12,437.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SIXTEENTH STREET COMMUNITY HEALTH CENTERS INC. - 1032 S CESAR E CHAVEZ DR - MILWAUKEE, WI 53204	39-1180475	501 (C)(3)	112,572.	0.			THE GREAT START PROGRAM
ST. FRANCIS CHILDREN'S CENTER 6700 NORTH PORT WASHINGTON ROAD MILWAUKEE, WI 53217	39-6092761	501 (C)(3)	38,796.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WALKER'S POINT YOUTH & FAMILY CENTER INC. - 1123 N WATER ST STE 400 - MILWAUKEE, WI 53202-3184	39-1247541	501 (C)(3)	153,823.	0.			RUNAWAY SERVICES

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WALLIN EDUCATION PARTNERS 5200 WILLSON ROAD, SUITE 209 MINNEAPOLIS, MN 55424	20-8505156	501 (C)(3)	6,250.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WHEATON FRANCISCAN ST. JOSEPH 5000 W CHAMBERS STREET MILWAUKEE, WI 53210	39-1636804	501 (C)(3)	40,000.	0.			HEALTHY BIRTH OUTCOMES AWARD
WALTER SCHROEDER AQUATIC CENTER 9240 NORTH GREEN BAY ROAD BROWN DEER, WI 53209	33-1195220	501 (C)(3)	137,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WAUKESHA COUNTY COMMUNITY DENTAL CLINIC - 210 NW BARSTOW ST STE 305 - WAUKESHA, WI 53188	30-0436162	501 (C)(3)	40,000.	0.			COVID 19 FUNDING
WAUKESHA COUNTY COMMUNITY DENTAL CLINIC - 210 NW BARSTOW ST STE 305 - WAUKESHA, WI 53188	30-0436162	501 (C)(3)	22,801.	0.			ADULT DENTAL CARE PROGRAM
WAUKESHA COUNTY COMMUNITY DENTAL CLINIC - 210 NW BARSTOW ST STE 305 - WAUKESHA, WI 53188	30-0436162	501 (C)(3)	25,000.	0.			HEALTH IMPROVEMENT FUND AWARD
MEQUON-THIENSVILLE EDUCATION FOUNDATION - 5000 WEST MEQUON ROAD - MEQUON, WI 53092	31-1625167	501 (C)(3)	12,573.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WAUKESHA COUNTY COMMUNITY DENTAL CLINIC - 210 NW BARSTOW ST STE 305 - WAUKESHA, WI 53188	30-0436162	501 (C)(3)	9,952.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WAUKESHA COUNTY COMMUNITY FOUNDATION - 2727 NORTH GRANDVIEW BOULEVARD, STE. 301 - WAUKESHA, WI 53188	39-1969122	501 (C)(3)	7,505.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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WILLIAMS SYNDROME ASSOCIATION INC. 570 KIRTS BOULEVARD, SUITE 223 TROY, MI 48084	22-3305007	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	25,624.	0.			DRIVER'S LICENSE RECOVERY
WIREGRASS UNITED WAY, INC. POST OFFICE BOX 405 DOTHAN, AL 36302-0405	63-6000270	501 (C)(3)	9,906.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	208,193.	0.			CRIMINAL JUSTICE RECOVERY SERVICES
WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	114,756.	0.			COMMUNITY REINTEGRATION SERVICES
WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	50,076.	0.			MEDIATION & RESTORATIVE JUSTICE CENTER
WALKER'S POINT YOUTH & FAMILY CENTER INC. - 1123 N WATER ST STE 400 - MILWAUKEE, WI 53202-3184	39-1247541	501 (C)(3)	23,228.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WALKER'S POINT YOUTH & FAMILY CENTER INC. - 1123 N WATER ST STE 400 - MILWAUKEE, WI 53202-3184	39-1247541	501 (C)(3)	15,000.	0.			COVID 19 FUNDING
VISION FORWARD ASSOCIATION, INC. 912 NORTH HAWLEY ROAD MILWAUKEE, WI 53213	39-0808506	501 (C)(3)	34,053.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITY IN MOTION, INC. POST OFFICE BOX 511131 MILWAUKEE, WI 53203	26-3696451	501 (C)(3)	34,288.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
META HOUSE, INC. 2625 NORTH WEIL STREET MILWAUKEE, WI 53212	39-1017822	501 (C)(3)	82,467.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF YORK COUNTY 800 EAST KING STREET YORK, PA 17403	23-1352588	501 (C)(3)	111,925.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY SERVICES OF GEAUGA COUNTY - 209 CENTER STREET - CHARDON, OH 44024-1189	20-5575556	501 (C)(3)	14,725.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNIVERSITY OF WISCONSIN - FOUNDATION - 1848 UNIVERSITY AVENUE - MADISON, WI 53726-4090	39-0743975	501 (C)(3)	2,439,531.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY SUNCOAST (SARASOTA COUNTY) - 1800 2ND STREET, SUITE 102 - SARASOTA, FL 34236	59-3725701	501 (C)(3)	8,096.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY SUNCOAST (TAMPA BAY AREA) - 5201 WEST KENNEDY BLVD - TAMPA, FL 33609	59-3725701	501 (C)(3)	17,266.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY WORLDWIDE 701 NORTH FAIRFAX STREET ALEXANDRIA, VA 22314-2045	13-1635294	501 (C)(3)	74,750.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITEMKE 2474 N 37TH STREET MILWAUKEE, WI 53210	81-4652827	501 (C)(3)	5,000.	0.			COVID 19 FUNDING

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VISION FORWARD ASSOCIATION, INC. 912 NORTH HAWLEY ROAD MILWAUKEE, WI 53213	39-0808506	501 (C)(3)	34,053.	0.			CHILDREN'S SERVICES
UNITING GARDEN HOMES INC 4201 N 27TH STREET MILWAUKEE, WI 53216	39-1971202	501 (C)(3)	10,000.	0.			COVID 19 FUNDING
UNIVERSITY OF MICHIGAN-ELBEL CLUB (MI) - ATTN: K. BAUMGARTNER - REVELLI HALL 350 EAST HOOVER - ANN ARBOR, MI 48104-3707	38-6006309	501 (C)(3)	9,476.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNIVERSITY SCHOOL OF MILWAUKEE 2100 WEST FAIRY CHASM ROAD MILWAUKEE, WI 53217	39-6076442	501 (C)(3)	84,553.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WEST ALLIS-WEST MKE EDUCATION FOUNDATION - 1205 SOUTH 70 STREET - WEST ALLIS, WI 53214	20-8209763	501 (C)(3)	6,432.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
URBAN ECOLOGY CENTER 1500 EAST PARK PLACE MILWAUKEE, WI 53211-3587	39-1712663	501 (C)(3)	47,206.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
USHERS NEW LOOK 500 BISHOP ST NW STE B5 ATLANTA, GA 30318-4369	58-2480934	501 (C)(3)	7,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UWM FOUNDATION, THE 1440 E NORTH AVE MILWAUKEE, WI 53202	23-7337744	501 (C)(3)	1,015,238.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
VALLEY OF THE SUN UNITED WAY 3200 E CAMELBACK RD STE 375 PHOENIX, AZ 85018	86-0104419	501 (C)(3)	42,501.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	31,195.	0.			YOUTH ENHANCED SUPPORT
WOMEN'S CENTER, THE 505 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1269698	501 (C)(3)	42,964.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
VERSITI 8733 W. WATERTOWN PLANK RD. WAUWATOSA, WI 53226	39-0807235	501 (C)(3)	7,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
WISCONSIN CONSERVATION VOICES 133 SOUTH BUTLER STREET, SUITE 320 MADISON, WI 53703	73-1628891	501 (C)(3)	5,061.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YMCA AT PABST FARMS 1750 VALLEY ROAD OCONOMOWOC, WI 53066	39-0806378	501 (C)(3)	28,833.	0.			DAY CARE
YMCA GLACIAL COMMUNITY INC. 1750 VALLEY ROAD OCONOMOWOC, WI 53066	39-0806378	501 (C)(3)	7,818.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YMCA OF GREATER WAUKESHA COUNTY 3610 MICHELLE WITMER MEMORIAL DRIVE NEW BERLIN, WI 53151	45-5119441	501 (C)(3)	57,882.	0.			DAY CAMP
YMCA OF GREATER WAUKESHA COUNTY 3610 MICHELLE WITMER MEMORIAL DRIVE NEW BERLIN, WI 53151	45-5119441	501 (C)(3)	14,764.	0.			OLDER ADULTS

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YMCA OF GREATER WAUKESHA COUNTY 3610 MICHELLE WITMER MEMORIAL DRIVE NEW BERLIN, WI 53151	45-5119441	501 (C)(3)	10,817.	0.			EARLY CHILDHOOD EDUCATION
YMCA OF GREATER WAUKESHA COUNTY 3610 MICHELLE WITMER MEMORIAL DRIVE NEW BERLIN, WI 53151	45-5119441	501 (C)(3)	6,005.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN LUTHERAN CHILD & FAMILY SERVICE - W175 N11120 STONEWOOD DR STE 101 - GERMANTOWN, WI 53022	39-1047224	501 (C)(3)	27,123.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WUWM-MILWAUKEE PUBLIC RADIO POST OFFICE BOX 413 MILWAUKEE, WI 53201-0413	23-7337744	501 (C)(3)	6,812.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YMCA OF METROPOLITAN MILWAUKEE, INC. - 161 WEST WISCONSIN AVENUE, SUITE 4000 - MILWAUKEE, WI 53203-2601	39-0806314	501 (C)(3)	58,109.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YESHIVA ELEMENTARY SCHOOL 5115 W. KEEFE AVE MILWAUKEE, WI 53216	39-1631932	501 (C)(3)	20,055.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YMCA OF METROPOLITAN MILWAUKEE, INC. - 161 WEST WISCONSIN AVENUE, SUITE 4000 - MILWAUKEE, WI 53203-2601	39-0806314	501 (C)(3)	43,000.	0.			COVID 19 FUNDING
YOU CAN MISSIONS N8492 BANCROFT ROAD THERESA, WI 53091	81-4323200	501 (C)(3)	11,550.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YWCA OF GREATER MILWAUKEE 1915 NORTH MARTIN LUTHER KING JR. D MILWAUKEE, WI 53212-3675	39-0806258	501 (C)(3)	204,785.	0.			PERSONAL FINANCIAL MGMT

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YWCA OF GREATER MILWAUKEE 1915 NORTH MARTIN LUTHER KING JR. D MILWAUKEE, WI 53212-3675	39-0806258	501 (C)(3)	183,483.	0.			COMMUNITY ADULT LEARNING LAB
YWCA SOUTHEAST WISCONSIN 1915 NORTH MARTIN LUTHER KING JR. D MILWAUKEE, WI 53212-3675	39-0806258	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
YMCA OF METROPOLITAN CHICAGO 1030 WEST VAN BUREN STREET CHICAGO, IL 60607	36-2179782	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN VETERANS NETWORK 6317 EW GREENFIELD AVE WEST ALLIS, WI 53214	82-1043745	501 (C)(3)	12,500.	0.			SAFE & STABLE HOMES
WRTP/BIG STEP 3841 WEST WISCONSIN AVE MILWAUKEE, WI 53208	39-1838210	501 (C)(3)	11,373.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WOMEN'S FUND OF GREATER MILWAUKEE INC. - 316 NORTH MILWAUKEE STREET, SUITE 215 - MILWAUKEE, WI 53202	20-3514894	501 (C)(3)	15,084.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN EQUAL JUSTICE FUND POST OFFICE BOX 475 WAUSAU, WI 54402-0475	39-1904737	501 (C)(3)	14,905.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN HUMANE SOCIETY 4500 WEST WISCONSIN AVENUE MILWAUKEE, WI 53208-3156	39-0810533	501 (C)(3)	23,331.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WOMEN'S CARE CENTER 1441 NORTH FARWELL AVENUE MILWAUKEE, WI 53202	81-4537878	501 (C)(3)	17,978.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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WISCONSIN LUTHERAN COLLEGE 8800 W BLUEMOUND RD MILWAUKEE, WI 53226	23-7179639	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN LUTHERAN HIGH SCHOOL 330 N GLENVIEW AVE MILWAUKEE, WI 53213	39-0888758	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN PHARMACY FOUNDATION 701 HEARTLAND TRAIL MADISON, WI 53717	39-1817686	501 (C)(3)	5,558.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN POLICY FORUM 633 WEST WISCONSIN AVENUE, SUITE 40 MILWAUKEE, WI 53203	39-0806182	501 (C)(3)	5,561.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WOMEN'S CENTER, THE 505 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1269698	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
WISCONSIN PRESERVATION FUND 1000 N WATER ST 17TH FL MILWAUKEE, WI 53202	39-1657657	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN RIGHT TO LIFE EDUCATION FUND - 5317 N 118TH CT - MILWAUKEE, WI 53217	39-1548867	501 (C)(3)	5,570.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
YMCA OF METROPOLITAN MILWAUKEE, INC. - 161 WEST WISCONSIN AVENUE, SUITE 4000 - MILWAUKEE, WI 53203-2601	39-0806314	501 (C)(3)	187,195.	0.			DAY CAMP
YMCA OF METROPOLITAN MILWAUKEE, INC. - 161 WEST WISCONSIN AVENUE, SUITE 4000 - MILWAUKEE, WI 53203-2601	39-0806314	501 (C)(3)	153,027.	0.			EARLY CHILDHOOD EDUCATION

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WOMEN'S CENTER, THE 505 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1269698	501 (C)(3)	107,986.	0.			TRANSITIONAL LIVING & DOMESTIC VIOLENCE PROGRAM
WOMEN'S CENTER, THE 505 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1269698	501 (C)(3)	30,083.	0.			EMPLOYMENT
WOMEN'S CENTER, THE 505 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1269698	501 (C)(3)	22,567.	0.			SEXUAL ABUSE & ASSAULT COUNSELING
WOMEN'S CENTER, THE 505 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1269698	501 (C)(3)	18,909.	0.			CHILD ABUSE PREVENTION
WISCONSIN PRIMARY HEALTH CARE ASSOCIATION - 5202 EASTPARK BLVD., SUITE 109 - MADISON, WI 53718-2151	39-1407034	501 (C)(3)	67,000.	0.			SHARED COMMUNITY INVESTMENT FUND
UNITED WAY OF MARATHON COUNTY, INC (WI) - 705 S 24TH ST STE 400B - WAUSAU, WI 54401	39-0935496	501 (C)(3)	21,936.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
IMPACT, INC. 6737 WEST WASHINGTON STREET, SUITE MILWAUKEE, WI 53214-2619	39-0988784	501 (C)(3)	14,796.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
WISCONSIN COMMUNITY SERVICES 3732 WEST WISCONSIN AVENUE, SUITE 3 MILWAUKEE, WI 53208-3166	39-0808464	501 (C)(3)	25,000.	0.			HEALTHY YOUTH INITIATIVE
UNITED WAY OF WASHINGTON COUNTY POST OFFICE BOX 304 WEST BEND, WI 53095	23-7281696	501 (C)(3)	102,107.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITED PERFORMING ARTS FUND INC. 301 W. WISCONSIN AVE. SUITE 600 MILWAUKEE, WI 53203	39-6100399	501 (C)(3)	158,212.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY BAY AREA 550 KEARNY ST STE 1000 SAN FRANCISCO, CA 94108	94-1312348	501 (C)(3)	5,684.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF CENTRAL ALABAMA, INC. - 3600 EIGHTH AVENUE, SOUTH - BIRMINGHAM, AL 35222	63-0288846	501 (C)(3)	9,818.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY BLACKHAWK REGION 205 NORTH MAIN STREET, SUITE 101 JANESVILLE, WI 53545	39-6006734	501 (C)(3)	16,156.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY CALIFORNIA CAPITAL REGION - 10389 OLD PLACERVILLE ROAD - SACRAMENTO, CA 95827	94-1225382	501 (C)(3)	11,510.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY FOR GREATER AUSTIN 2000 EAST MLK JR BOULEVARD AUSTIN, TX 78702-1340	74-1193439	501 (C)(3)	7,181.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY FOR SOUTHEASTERN MICHIGAN - 3011 W GRAND BLVD, SUITE 500 - DETROIT, MI 48202-3012	20-3099071	501 (C)(3)	31,671.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF THE PLAINS 245 NORTH WATER STREET WICHITA, KS 67202-2090	48-0547688	501 (C)(3)	69,996.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF BROWARD COUNTY 1300 SOUTH ANDREWS AVENUE FORT LAUDERDALE, FL 33316-1838	59-0624402	501 (C)(3)	6,529.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITED WAY OF BREVARD COUNTY 937 DIXON BOULEVARD COCOA, FL 32922-6806	59-0836384	501 (C)(3)	36,410.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF CENTRAL CAROLINAS, INC. - 301 SOUTH BREVARD STREET - CHARLOTTE, NC 28202-2317	56-0529948	501 (C)(3)	10,014.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF WALWORTH COUNTY N6359 HIGHWAY 12/67 ELKHORN, WI 53121	39-6108550	501 (C)(3)	14,628.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF CENTRAL INDIANA 2955 N MERIDIAN ST., STE 300 INDIANAPOLIS, IN 46208	35-1007590	501 (C)(3)	13,768.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF DANE COUNTY, INC. 2059 ATWOOD AVENUE MADISON, WI 53704	39-0817532	501 (C)(3)	122,450.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF DELAWARE COUNTY, INC. (OH) - PO BOX 319 - DELAWARE, OH 43015	31-4423899	501 (C)(3)	8,208.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF DODGE COUNTY 122 W. WATER STREET BEAVER DAM, WI 53916	39-6030786	501 (C)(3)	6,038.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY FOX CITIES, INC. 1455 MIDWAY ROAD MENASHA, WI 54952	39-0912895	501 (C)(3)	66,079.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED COMMUNITY CENTER, INC. 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204-1395	39-1146191	501 (C)(3)	25,000.	0.			COVID 19 FUNDING

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UNITED COMMUNITY CENTER, INC. 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204-1395	39-1146191	501 (C)(3)	162,487.	0.			YOUTH EMPOWERED TO SUCCEED
STARTING POINT, INC. 885 BADGER CIRCLE, SUITE 5 GRAFTON, WI 53024	39-1246685	501 (C)(3)	5,717.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. JOSEPH'S MEDICAL CLINIC, INC. 237 WISCONSIN AVENUE, SUITE 200 WAUKESHA, WI 53186	39-1273248	501 (C)(3)	84,263.	0.			ST. JOSEPH'S MEDICAL CLINIC
ST. JOSEPH ACADEMY 1600 WEST OKLAHOMA AVENUE MILWAUKEE, WI 53215-4518	39-0806262	501 (C)(3)	7,159.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER CLEVELAND 1331 EUCLID AVE CLEVELAND, OH 44115	34-6516654	501 (C)(3)	126,487.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
TEEN CHALLENGE INTERNATIONAL WISCONSIN - 9236 WEST APPLETON AVENUE - MILWAUKEE, WI 53225	39-1447329	501 (C)(3)	15,983.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. JOSEPH'S MEDICAL CLINIC, INC. 237 WISCONSIN AVENUE, SUITE 200 WAUKESHA, WI 53186	39-1273248	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
ST. JOSEPH'S MEDICAL CLINIC, INC. 237 WISCONSIN AVENUE, SUITE 200 WAUKESHA, WI 53186	39-1273248	501 (C)(3)	6,025.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. MARCUS LUTHERAN SCHOOL 2215 NORTH PALMER STREET MILWAUKEE, WI 53212	39-0850377	501 (C)(3)	402,665.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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ST. MARY VISITATION SCHOOL 1260 CHURCH ST ELM GROVE, WI 53122	39-0808492	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED COMMUNITY CENTER, INC. 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204-1395	39-1146191	501 (C)(3)	339,020.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
STARTING POINT, INC. 885 BADGER CIRCLE, SUITE 5 GRAFTON, WI 53024	39-1246685	501 (C)(3)	18,009.	0.			LEAD
TEACH FOR AMERICA MILWAUKEE 700 W VIRGINIA STREET SUITE 610 MILWAUKEE, WI 53204	13-3541913	501 (C)(3)	81,089.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
TEENS GROW GREENS 322 E MICHIGAN ST STE 204 MILWAUKEE, WI 53202	36-4770419	501 (C)(3)	7,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF DOOR COUNTY 57 NORTH THIRD AVENUE STURGEON BAY, WI 54235	39-1799879	501 (C)(3)	5,557.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
THREE HARBORS COUNCIL, BOY SCOUTS OF AMERICA - 330 SOUTH 84 STREET - MILWAUKEE, WI 53214-1468	45-3321626	501 (C)(3)	70,133.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
TRI-CITY AREA UNITED WAY 1812 HALL AVENUE MARINETTE, WI 54143	38-6034023	501 (C)(3)	19,698.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED MIGRANT OPPORTUNITY SERVICES UMOs - 2701 SOUTH CHASE AVENUE - MILWAUKEE, WI 53207-1450	39-1047172	501 (C)(3)	38,000.	0.			HEALTHY YOUTH INITIATIVE

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UNITED COMMUNITY CENTER, INC. 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204-1395	39-1146191	501 (C)(3)	251,280.	0.			BEFORE AND AFTER SCHOOL
UNITED NEGRO COLLEGE FUND-MILWAUKEE - POST OFFICE BOX 240933 - MILWAUKEE, WI 53224-9024	13-1624241	501 (C)(3)	13,436.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ST. JOSEPH ACADEMY 1600 WEST OKLAHOMA AVENUE MILWAUKEE, WI 53215-4518	39-0806262	501 (C)(3)	47,089.	0.			EARLY CHILDHOOD EDUCATION CENTER
UNITED COMMUNITY CENTER, INC. 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204-1395	39-1146191	501 (C)(3)	97,339.	0.			ELDERLY PROGRAM
UNITED WAY OF METROPOLITAN CHICAGO 1750 GRANDSTAND PLACE, SUITE 5 ELGIN, IL 60123-4900	30-0200478	501 (C)(3)	361,634.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER LOS ANGELES 1150 SOUTH OLIVE STREET LOS ANGELES, CA 90015-2211	95-2274801	501 (C)(3)	28,659.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER CINCINNATI 2400 READING ROAD CINCINNATI, OH 45202	31-0537502	501 (C)(3)	33,625.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF SUMMIT COUNTY, INC. 37 N. HIGH ST AKRON, OH 44308	34-1169257	501 (C)(3)	33,038.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF PORTAGE COUNTY (OH) 999 E. MAIN STREET (2ND FLOOR) RAVENNA, OH 44266	34-1024769	501 (C)(3)	7,725.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITED WAY OF PORTAGE COUNTY (WI) 1100 CENTERPOINT DRIVE, # 302 STEVENS POINT, WI 54481	39-0831152	501 (C)(3)	48,051.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF RACINE COUNTY 2000 DOMANIK DRIVE RACINE, WI 53404	39-0806349	501 (C)(3)	133,056.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF ROCK RIVER VALLEY 612 NORTH MAIN STREET, SUITE 300 ROCKFORD, IL 61103	36-2167843	501 (C)(3)	19,131.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF KENOSHA COUNTY 5500 6TH AVENUE, SUITE 210 KENOSHA, WI 53140-3710	39-0806285	501 (C)(3)	30,949.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF SHEBOYGAN COUNTY 2020 ERIE AVENUE SHEBOYGAN, WI 53081-3711	39-0808471	501 (C)(3)	12,207.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF SOUTH WOOD & ADAMS COUNTIES - 351 OAK STREET - WISCONSIN RAPIDS, WI 54494	39-1212595	501 (C)(3)	7,638.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF NORTHERN OZAUKEE COUNTY - POST OFFICE BOX 39 - PORT WASHINGTON, WI 53074	23-7084522	501 (C)(3)	22,337.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF OF GREATER PHILADELPHIA AND SOUTHERN NEW JERSEY - 1709 BENJAMIN FRANKLIN PARKWAY - PHILADELPHIA, PA	23-1556045	501 (C)(3)	11,335.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF TARRANT COUNTY 210 E. NINTH STREET FORT WORTH, TX 76102-6494	75-0858360	501 (C)(3)	25,801.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITED WAY OF THE BLUEGRASS 100 MIDLAND AVE STE 300 LEXINGTON, KY 40508	61-0444679	501 (C)(3)	5,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF THE COLUMBIA-WILLAMETTE - 619 SW 11 AVENUE SUITE 300 - PORTLAND, OR 97205-2646	93-0582124	501 (C)(3)	10,708.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF THE GREATER TRIANGLE, INC. - 800 PARK OFFICES DRIVE, SUITE 204 - DURHAM, NC 27709	56-1949103	501 (C)(3)	9,104.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF NORTH CENTRAL MASS., INC. - 649 JOHN FITCH HWY - FITCHBURG, MA 01420	04-2233021	501 (C)(3)	10,738.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
META HOUSE, INC. 2625 NORTH WEIL STREET MILWAUKEE, WI 53212	39-1017822	501 (C)(3)	17,600.	0.			COVID 19 FUNDING
UNITED WAY OF THE NATIONAL CAPITAL AREA - 1577 SPRING HILL RD STE 420 - VIENNA, VA 22182	53-0234290	501 (C)(3)	7,085.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF SOUTHEAST MISSISSIPPI, INC - 210 WEST FRONT STREET - HATTIESBURG, MS 39401	64-0410475	501 (C)(3)	5,861.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER HOUSTON 50 WAUGH DR HOUSTON, TX 77007	74-1167964	501 (C)(3)	22,249.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF YUMA COUNTY 180 WEST 1ST STREET, SUITE B YUMA, AZ 85364	86-0211326	501 (C)(3)	20,567.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITED WAY OF SOUTHWEST GEORGIA 112 WESTOVER BLVD ALBANY, GA 31707	58-0655156	501 (C)(3)	29,921.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY, INC. - 225 WEST VINE STREET - MILWAUKEE, WI 53212	39-0806190	501 (C)(3)	47,721.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER ROCHESTER, INC. - 75 COLLEGE AVE - ROCHESTER, NY 14607	16-1015782	501 (C)(3)	13,863.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER ST. JOSEPH 118 SOUTH FIFTH STREET, FIRST FLOOR SAINT JOSEPH, MO 64501	44-0547802	501 (C)(3)	78,806.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF METROPOLITAN DALLAS, INC. - 1800 NORTH LAMAR STREET - DALLAS, TX 75080	75-6005352	501 (C)(3)	19,789.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER ST. LOUIS, INC. - 910 NORTH ELEVENTH STREET - SAINT LOUIS, MO 63101	43-0714167	501 (C)(3)	26,162.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF HARRISONBURG AND ROCKINGHAM CO., INC. - POST OFFICE BOX 326 - HARRISONBURG, VA 22803-0326	54-0632716	501 (C)(3)	45,782.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF JEFFERSON & N. WALWORTH COUNTIES - 734 MADISON AVENUE - FORT ATKINSON, WI 53538	39-6046361	501 (C)(3)	5,753.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF KING COUNTY 720 SECOND AVENUE SEATTLE, WA 98104	91-0565555	501 (C)(3)	27,657.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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UNITED WAY OF GREATER ATLANTA 100 EDGEWOOD AVE NE ATLANTA, GA 30303	58-0566194	501 (C)(3)	11,884.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF LAKE COUNTY, INC (OH) - 9285 PROGRESS PARKWAY - MENTOR, OH 44060-1854	34-1105038	501 (C)(3)	22,981.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF LAKE COUNTY, INC. (IL) - 330 SOUTH GREENLEAF STREET - GURNEE, IL 60031	36-2167949	501 (C)(3)	11,847.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF LEE COUNTY, INC. 2133 EXECUTIVE PARK DRIVE OPELIKA, AL 36801	23-7107722	501 (C)(3)	8,053.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF GREATER TOLEDO 424 JACKSON ST TOLEDO, OH 43604	34-4427947	501 (C)(3)	18,800.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF NORMAN INC. (OK) 2424 SPRINGER DR SUITE 304 NORMAN, OK 73069	73-0668684	501 (C)(3)	69,144.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
UNITED WAY OF FLORENCE COUNTY 1621 WEST PALMETTO STREET FLORENCE, SC 29501-4133	57-0368721	501 (C)(3)	10,841.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
SALVATION ARMY - WAUKESHA 445 MADISON STREET WAUKESHA, WI 53188	13-2923701	501 (C)(3)	22,146.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LUMEN CHRISTI PARISH 11300 ST JAMES LANE MEQUON, WI 53092	30-0664758	501 (C)(3)	22,744.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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YWCA SOUTHEAST WISCONSIN 1915 NORTH MARTIN LUTHER KING JR. D MILWAUKEE, WI 53212-3675	39-0806258	501 (C)(3)	8,723.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CARMEN HIGH SCHOOL OF SCIENCE AND TECHNOLOGY - 1712 SOUTH 32 STREET - MILWAUKEE, WI 53215	56-2569203	501 (C)(3)	29,051.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CARING PLACE, INC., THE 810 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1615978	501 (C)(3)	14,558.	0.			MEALS ON WHEELS
CATHOLIC CHARITIES COMMUNITY SERVICE - 6240 SMITH ROAD - DENVER, CO 80216	84-0686679	501 (C)(3)	7,049.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CHRIST THE KING BAPTIST CHURCH 7750 N 60TH ST MILWAUKEE, WI 53223	39-1528628	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CHILDREN'S HEALTH ALLIANCE 6737 W WASHINGTON STREEET, SUITE 11 WEST ALLIS, WI 53214	39-0812532	501 (C)(3)	25,000.	0.			SHARED COMMUNITY INVESTMENT FUND
CATHOLIC MEMORIAL HIGH SCHOOL 601 EAST COLLEGE AVENUE WAUKESHA, WI 53186-5598	39-0964819	501 (C)(3)	57,268.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CHILDREN'S HOSPITAL & HEALTH SYSTEM FDN. - 9000 W WISCONSIN AVE - MILWAUKEE, WI 53226	39-1500075	501 (C)(3)	65,027.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CARING PLACE, INC., THE 810 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1615978	501 (C)(3)	7,163.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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CHILDREN'S WISCONSIN - COMMUNITY SERVICES - 620 SOUTH 76TH STREET, SUITE 120 - MILWAUKEE, WI 53214-1549	39-0806380	501 (C)(3)	108,492.	0.			COUNSELING FOR CHILDREN AND FAMILIES
CHILDREN'S WISCONSIN - COMMUNITY SERVICES - 620 SOUTH 76TH STREET, SUITE 120 - MILWAUKEE, WI 53214-1549	39-0806380	501 (C)(3)	48,521.	0.			VOLUNTEER RESPITE CARE
CHILDREN'S HOSPITAL OF WISCONSIN 999 N. 92ND ST. WAUWATOSA, WI 53226	39-1500074	501 (C)(3)	512,328.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CITY FORWARD COLLECTIVE 111 W PLEASANT ST # 101 MILWAUKEE, WI 53212-3939	27-2818891	501 (C)(3)	314,599.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CENTRO LEGAL POR DERECHOS HUMANOS INC. - 611 WEST NATIONAL AVENUE #103 - MILWAUKEE, WI 53204-1768	39-1710549	501 (C)(3)	70,340.	0.			DOMESTIC ABUSE & FAMILY LAW PROGRAM
CITY OF LIGHT CHURCH 6725 W BURLEIGH ST MILWAUKEE, WI 53210	47-1963626	501 (C)(3)	8,496.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CHILDREN'S HOSPITAL OF WISCONSIN 999 N. 92ND ST. WAUWATOSA, WI 53226	39-1500074	501 (C)(3)	25,000.	0.			SHARED COMMUNITY INVESTMENT FUND
CITY YEAR MILWAUKEE, INC. 648 NORTH PLANKINTON AVENUE, SUITE MILWAUKEE, WI 53203	22-2882549	501 (C)(3)	100,000.	0.			WHOLE SCHOOL, WHOLE CHILD
CHILDREN'S WISCONSIN - COMMUNITY SERVICES - 620 SOUTH 76TH STREET, SUITE 120 - MILWAUKEE, WI 53214-1549	39-0806380	501 (C)(3)	81,110.	0.			MILWAUKEE START RIGHT

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BIG BROTHERS BIG SISTERS OF METROPOLITAN CHICAGO - 560 WEST LAKE STREET, FLOOR 5 - CHICAGO, IL 60661	36-2681212	501 (C)(3)	16,875.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	276,574.	0.			YOUTH AND FAMILY/CAMPING
CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	227,005.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ANGELA HOSPICE HOME CARE INC. (MI) 14100 NEWBURGH RD LIVONIA, MI 48154-5010	38-2755767	501 (C)(3)	6,846.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ADAPTIVE COMMUNITY APPROACH PROGRAM, INC. (ACAP) - 121 WISCONSIN AVENUE - WAUKESHA, WI 53186-4924	39-1867400	501 (C)(3)	9,738.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
NEU-LIFE COMMUNITY DEVELOPMENT 2014 W NORTH AVENUE MILWAUKEE, WI 53205	39-1805861	501 (C)(3)	50,000.	0.			HEALTHY YOUTH INITIATIVE
CARROLL UNIVERSITY 100 NORTH EAST AVENUE WAUKESHA, WI 53186-3103	39-0806325	501 (C)(3)	191,082.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CATHEDRAL CENTER, INC. 845 NORTH VAN BUREN STREET MILWAUKEE, WI 53202	74-3038890	501 (C)(3)	63,899.	0.			EMERGENCY SHELTER
BUILD INC 1223 NORTH MILWAUKEE AVENUE CHICAGO, IL 60622	23-7022085	501 (C)(3)	17,260.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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CATHEDRAL CENTER, INC. 845 NORTH VAN BUREN STREET MILWAUKEE, WI 53202	74-3038890	501 (C)(3)	29,167.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	30,000.	0.			COVID 19 FUNDING
CATHOLIC CHARITIES - YORK (PA) 253 E MARKET ST YORK, PA 17403	23-1494791	501 (C)(3)	5,193.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CATHOLIC CHARITIES OF THE DIOCESE OF GREEN BAY - 1825 RIVERSIDE DRIVE - GREEN BAY, WI 54301	39-0808438	501 (C)(3)	5,319.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	118,974.	0.			IN HOME SUPPORT & HOARDING INTERVENTION
CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	47,259.	0.			PREGNANCY AND PARENTING SUPPORT SERVICES
CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	43,885.	0.			OUTREACH & CASH MANAGEMENT
CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	34,390.	0.			SUPPORTED PARENTING PROGRAM - WAUK. COUNTY
CATHEDRAL CENTER, INC. 845 NORTH VAN BUREN STREET MILWAUKEE, WI 53202	74-3038890	501 (C)(3)	6,650.	0.			FAMILY WARMING ROOM

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CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	19,264.	0.			OUTREACH AND CASE MANAGEMENT - WAUK. CTY
CATHOLIC CHARITIES OF MILWAUKEE 3501 SOUTH LAKE DRIVE MILWAUKEE, WI 53207	39-0806321	501 (C)(3)	200,262.	0.			BEHAVIORAL HEALTH SERVICES
BRUCE GUADALUPE SCHOOL 1028 SOUTH NINTH STREET MILWAUKEE, WI 53204	39-1146191	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CHABAD OF DOWNTOWN 1301 N ASTOR ST MILWAUKEE, WI 53202	39-1672482	501 (C)(3)	18,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CENTRO LEGAL POR DERECHOS HUMANOS INC. - 611 WEST NATIONAL AVENUE #103 - MILWAUKEE, WI 53204-1768	39-1710549	501 (C)(3)	50,148.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	62,347.	0.			EMERGENCY SUPPORT/ADVOCACY CONTINUUM
CONGREGATION SHALOM 7630 N SANTA MONICA BLVD FOX POINT, WI 53217	39-0991742	501 (C)(3)	7,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CURATIVE CARE NETWORK, INC. 1000 NORTH 92ND STREET WAUWATOSA, WI 53226-3533	39-0806286	501 (C)(3)	23,080.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COPE SERVICES INC. 885 BADGER CIRCLE GRAFTON, WI 53024-9436	39-1335672	501 (C)(3)	13,248.	0.			COPE HOTLINE

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COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	16,071.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COPE SERVICES INC. 885 BADGER CIRCLE GRAFTON, WI 53024-9436	39-1335672	501 (C)(3)	7,626.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CROHN'S & COLITIS FOUNDATION, WISCONSIN CHAPTER - 17100 W BLUEMOUND RD STE 101 - BROOKFIELD, WI 53005-5950	13-6193105	501 (C)(3)	6,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COALITION FOR CHILDREN, YOUTH AND FAMILIES - 6682 WEST GREENFIELD, SUITE 310 - MILWAUKEE, WI 53214	39-1496074	501 (C)(3)	14,806.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CURATIVE CARE NETWORK, INC. 1000 NORTH 92ND STREET WAUWATOSA, WI 53226-3533	39-0806286	501 (C)(3)	453,193.	0.			ADULT DAY SERVICES
CURATIVE CARE NETWORK, INC. 1000 NORTH 92ND STREET WAUWATOSA, WI 53226-3533	39-0806286	501 (C)(3)	17,982.	0.			SENIOR SERVICES
DEPAUL UNIVERSITY 1 JACKSON BOULEVARD CHICAGO, IL 60604	36-2167048	501 (C)(3)	5,875.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	6,650.	0.			FAMILY WARMING ROOM
DICKINSON COLLEGE PO BOX 1773 CARLISLE, PA 17013	23-1365954	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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CRISTO REY JESUIT MILWAUKEE HIGH SCHOOL - 1215 SOUTH 45 STREET - WEST MILWAUKEE, WI 53214	53-0196617	501 (C)(3)	73,122.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CITY YEAR MILWAUKEE, INC. 648 NORTH PLANKINTON AVENUE, SUITE MILWAUKEE, WI 53203	22-2882549	501 (C)(3)	79,030.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AURORA FOUNDATION-AURORA 950 NORTH 12 STREET, SUITE A511 MILWAUKEE, WI 53233	39-6044569	501 (C)(3)	19,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CURATIVE CARE NETWORK, INC. 1000 NORTH 92ND STREET WAUWATOSA, WI 53226-3533	39-0806286	501 (C)(3)	316,705.	0.			CHILDREN'S SERVICES
CARE NET PREGNANCY CENTER OF MILWAUKEE - 4957 W. FOND DU LAC AVE - MILWAUKEE, WI 53216	39-1496868	501 (C)(3)	10,139.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CARING PLACE, INC., THE 810 NORTH EAST AVENUE WAUKESHA, WI 53186	39-1615978	501 (C)(3)	27,034.	0.			ADULT DAY CARE
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	50,000.	0.			SHARED COMMUNITY INVESTMENT FUND
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	181,913.	0.			HIPPY (HOME INSTRUCTION FOR PARENTS OF PRESCHOOL YOUTH)
COMMUNITY OUTPATIENT HEALTH SERVICE - W180 N8085 TOWN HALL ROAD - MENOMONEE FALLS, WI 53051	39-1743056	501 (C)(3)	25,624.	0.			COMMUNITY OUTREACH HEALTH CLINIC

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COMMUNITY SHARES OF GREATER MILWAUKEE - 5027 W. NORTH AVENUE - MILWAUKEE, WI 53208	39-1362120	501 (C)(3)	112,023.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	49,992.	0.			NEVERMORE BATTERER'S TREATMENT
COLLEGE POSSIBLE (WI) 1515 N. RIVERCENTER DRIVE, SUITE 10 MILWAUKEE, WI 53212	41-1968798	501 (C)(3)	32,370.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COLUMBIA ST. MARY'S - OZAUKEE 13111 NORTH PORT WASHINGTON ROAD MEQUON, WI 53097	39-0806315	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	28,125.	0.			HEALTHY YOUTH INITIATIVE
COLUMBIA ST. MARY'S FOUNDATION INC. - 2320 NORTH LAKE DRIVE - MILWAUKEE, WI 53211	39-1494981	501 (C)(3)	80,000.	0.			HEALTH IMPROVEMENT FUND AWARD
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	131,430.	0.			FAMILY SUPPORT CENTER
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	59,906.	0.			HOMELESS OUTREACH NURSING CENTER
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	100,000.	0.			SIEMER GRANT

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COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	35,945.	0.			EMERGENCY SHELTER
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	77,476.	0.			EARLY CHILDHOOD EDUCATION
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	150,000.	0.			SHARED COMMUNITY INVESTMENT FUND
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	70,000.	0.			SAFE & STABLE HOMES
COLUMBIA ST. MARY'S FOUNDATION INC. - 2320 NORTH LAKE DRIVE - MILWAUKEE, WI 53211	39-1494981	501 (C)(3)	39,488.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COMMUNITY ADVOCATES INC. 728 N JAMES LOVELL ST MILWAUKEE, WI 53233-2408	39-1249426	501 (C)(3)	50,000.	0.			COVID 19 FUNDING
ARTHRITIS FOUNDATION, UPPER MIDWEST REGION, WEST ALLIS - 10427 WEST LINCOLN AVENUE, #1400 - WEST ALLIS, WI 53227	58-1341679	501 (C)(3)	5,825.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MENTAL HEALTH AMERICA OF WISCONSIN, INC. - 600 WEST VIRGINIA STREET, SUITE 502 - MILWAUKEE, WI 53204	39-0827843	501 (C)(3)	18,635.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
THREE HARBORS COUNCIL, BOY SCOUTS OF AMERICA - 330 SOUTH 84 STREET - MILWAUKEE, WI 53214-1468	45-3321626	501 (C)(3)	428,734.	0.			LEARNING FOR LIFE

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BROWN COUNTY UNITED WAY 112 NORTH ADAMS STREET GREEN BAY, WI 54301-5010	39-0806299	501 (C)(3)	101,943.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AIDS RESOURCE CENTER OF WISCONSIN 820 NORTH PLANKINTON AVENUE MILWAUKEE, WI 53203-1802	39-1534049	501 (C)(3)	86,962.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AURORA AT HOME 11333 WEST NATIONAL AVENUE WEST ALLIS, WI 53227	39-0806180	501 (C)(3)	411,540.	0.			AURORA AT HOME HEALTH
AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	305,919.	0.			SYSTEMIC FAMILY COUNSELING
ASCENSION - COLUMBIA ST. MARY'S HOSPITAL - 2301 N. LAKE DRIVE - MILWAUKEE, WI 53211	39-0806315	501 (C)(3)	8,805.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ASCENSION SETON DENTAL CLINIC 1730 SOUTH 13 STREET MILWAUKEE, WI 53204	39-1494981	501 (C)(3)	20,000.	0.			COVID 19 FUNDING
ASCENSION SETON DENTAL CLINIC 1730 SOUTH 13 STREET MILWAUKEE, WI 53204	39-1494981	501 (C)(3)	7,970.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ALZHEIMER'S ASSOCIATION SOUTHEASTERN WISCONSIN CHAPTER - 620 SOUTH 76 STREET, #160 - MILWAUKEE, WI 53214-1549	39-1350965	501 (C)(3)	19,330.	0.			AWARENESS, EDUCATION & SUPPORT
ADVOCATES OF OZAUKEE, INC. PO BOX 80166 SAUKVILLE, WI 53080	39-1378449	501 (C)(3)	46,418.	0.			DOMESTIC VIOLENCE

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AMERICAN RED CROSS IN SOUTHEASTERN WISCONSIN - 2600 WEST WISCONSIN AVENUE - MILWAUKEE, WI 53233-2923	53-0196605	501 (C)(3)	42,673.	0.			HOME FIRE PREPAREDNESS
AURORA AT HOME 11333 WEST NATIONAL AVENUE WEST ALLIS, WI 53227	39-0806180	501 (C)(3)	15,761.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	256,353.	0.			CENTER FOR FINANCIAL WELLNESS
AMERICAN RED CROSS IN SOUTHEASTERN WISCONSIN - 2600 WEST WISCONSIN AVENUE - MILWAUKEE, WI 53233-2923	53-0196605	501 (C)(3)	76,148.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	225,597.	0.			FAMILY ENRICHMENT
AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	79,052.	0.			MILW. MENTAL HEALTH CONSULTANTS
AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	12,533.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ASSOCIATION OF GRADUATES OF THE US MILITARY ACADEMY - 698 MILLS RD HERBERT ALUMNI CENTER - WEST POINT, NY 10996	14-1260763	501 (C)(3)	50,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AURORA AT HOME 11333 WEST NATIONAL AVENUE WEST ALLIS, WI 53227	39-0806180	501 (C)(3)	40,087.	0.			AURORA ZILBER FAMILY HOSPICE

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AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	12,500.	0.			HEALTHY BIRTH OUTCOMES AWARD
AURORA HEALING CENTER 130 WEST BRUCE STREET, SUITE 400 MILWAUKEE, WI 53204	39-1442285	501 (C)(3)	41,669.	0.			COUNSELING PROGR. FOR UNDER-SERVED SURVIVORS
AMERICAN DIABETES ASSOCIATION INC. MICHIGAN AFFILIATE INC (MI) - 20700 CIVIC CENTER DR STE 100 - SOUTHFIELD, MI 48076	13-1623888	501 (C)(3)	7,168.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
CHILDREN'S WISCONSIN - COMMUNITY SERVICES - 620 SOUTH 76TH STREET, SUITE 120 - MILWAUKEE, WI 53214-1549	39-0806380	501 (C)(3)	5,000.	0.			COVID 19 FUNDING
AURORA HEALING CENTER 130 WEST BRUCE STREET, SUITE 400 MILWAUKEE, WI 53204	39-1442285	501 (C)(3)	15,382.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ADVOCATES OF OZAUKEE, INC. PO BOX 80166 SAUKVILLE, WI 53080	39-1378449	501 (C)(3)	21,088.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ADVOCATES OF OZAUKEE, INC. PO BOX 80166 SAUKVILLE, WI 53080	39-1378449	501 (C)(3)	17,500.	0.			SAFE & STABLE HOMES
ADVOCATES OF OZAUKEE, INC. PO BOX 80166 SAUKVILLE, WI 53080	39-1378449	501 (C)(3)	5,000.	0.			COVID 19 FUNDING
AIDS RESOURCE CENTER OF WISCONSIN 820 NORTH PLANKINTON AVENUE MILWAUKEE, WI 53203-1802	39-1534049	501 (C)(3)	76,397.	0.			DENTAL CLINIC

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AIDS RESOURCE CENTER OF WISCONSIN 820 NORTH PLANKINTON AVENUE MILWAUKEE, WI 53203-1802	39-1534049	501 (C)(3)	71,464.	0.			FOOD PANTRY
AURORA FAMILY SERVICE 3200 WEST HIGHLAND BOULEVARD MILWAUKEE, WI 53208	39-0806174	501 (C)(3)	12,500.	0.			HEALTHY BIRTH OUTCOMES AWARD
AIDS RESOURCE CENTER OF WISCONSIN 820 NORTH PLANKINTON AVENUE MILWAUKEE, WI 53203-1802	39-1534049	501 (C)(3)	46,240.	0.			LIFEPOINT
AMERICAN RED CROSS IN SOUTHEASTERN WISCONSIN - 2600 WEST WISCONSIN AVENUE - MILWAUKEE, WI 53233-2923	53-0196605	501 (C)(3)	677,599.	0.			LOCAL DISASTER RESPONSE
ALL IN MILWAUKEE 135 W WELLS ST, STE 100 MILWAUKEE, WI 53203	83-2541054	501 (C)(3)	49,031.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ALLIANCE FOR STRONG FAMILIES AND COMMUNITIES - 648 N. PLANKINTON AVE. STE 425 - MILWAUKEE, WI 53203-2926	39-1709925	501 (C)(3)	9,093.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ALMA CENTER 2821 N VEL R PHILLIPS AVE 3RD FL MILWAUKEE, WI 53212	36-4530524	501 (C)(3)	8,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ALOHA UNITED WAY 200 NORTH VINEYARD BOULEVARD, #700 HONOLULU, HI 96817	99-0073494	501 (C)(3)	19,209.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ALVERNO COLLEGE 3401 SOUTH 39 STREET MILWAUKEE, WI 53215-4093	39-0806263	501 (C)(3)	46,503.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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ALZHEIMER'S ASSOCIATION SOUTHEASTERN WISCONSIN CHAPTER - 620 SOUTH 76 STREET, #160 - MILWAUKEE, WI 53214-1549	39-1350965	501 (C)(3)	87,530.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AIDS RESOURCE CENTER OF WISCONSIN 820 NORTH PLANKINTON AVENUE MILWAUKEE, WI 53203-1802	39-1534049	501 (C)(3)	10,000.	0.			COVID 19 FUNDING
BREAD OF HEALING, INC. 1821 NORTH 16 STREET MILWAUKEE, WI 53205	81-0669867	501 (C)(3)	9,007.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AMERICA'S BEST CHARITIES 1100 LARKSPUR LANDING CIRCLE, SUITE LARKSPUR, CA 94939	94-3067804	501 (C)(3)	6,263.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
COA YOUTH & FAMILY CENTERS 909 EAST NORTH AVENUE MILWAUKEE, WI 53212-3447	39-0806339	501 (C)(3)	150,869.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BELIEVE IN STUDENTS FAST FUND - LOCAL 212 - 846 INDEPENDENCE CT - PHILADELPHIA, PA 19147	81-3612875	501 (C)(3)	8,398.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
AURORA FOUNDATION-AURORA 950 NORTH 12 STREET, SUITE A511 MILWAUKEE, WI 53233	39-6044569	501 (C)(3)	30,000.	0.			HEALTH IMPROVEMENT FUND AWARD
BOYS AND GIRLS CLUB OF NORTHEAST OHIO - 4111 PEARL AVENUE - LORAIN, OH 44055	34-1856214	501 (C)(3)	12,851.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BOYS & GIRLS CLUB FOND DU LAC AREA 76 W 2ND STREET FOND DU LAC, WI 54935	39-1896496	501 (C)(3)	5,510.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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BOYS & GIRLS CLUBS OF AMERICA, NATIONAL HEADQUARTERS - 1275 PEACHTREE STREET, NE - ATLANTA, GA 30309-3447	13-5562976	501 (C)(3)	18,266.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE - 1558 NORTH SIXTH STREET - MILWAUKEE, WI 53212-0486	39-0806292	501 (C)(3)	1,033,568.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BIZSTARTS MILWAUKEE INC 1555 NORTH RIVERCENTER DRIVE, SUITE MILWAUKEE, WI 53212	26-1766033	501 (C)(3)	10,425.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BADGER ADVOCATES PO BOX 554 SUN PRAIRIE, WI 53590	27-5033472	501 (C)(3)	10,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE - 1558 NORTH SIXTH STREET - MILWAUKEE, WI 53212-0486	39-0806292	501 (C)(3)	978,458.	0.			SCHOOL ACHIEVEMENT
BOYS & GIRLS CLUBS OF SOUTHEASTERN MICHIGAN (MI) - 26777 HALSTED RD STE 100 - FARMINGTON HILLS, MI 48331	38-1387123	501 (C)(3)	8,533.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BRADLEY IMPACT FUND 1400 NORTH WATER STREET, SUITE 300 MILWAUKEE, WI 53202	45-4678325	501 (C)(3)	200,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BLACK ARTS MKE 929 NORTH WATER STREET MILWAUKEE, WI 53202	47-1889202	501 (C)(3)	9,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BREAD OF HEALING, INC. 1821 NORTH 16 STREET MILWAUKEE, WI 53205	81-0669867	501 (C)(3)	38,735.	0.			COMMUNITY MED SHARE

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BREAD OF HEALING, INC. 1821 NORTH 16 STREET MILWAUKEE, WI 53205	81-0669867	501 (C)(3)	207,200.	0.			SHARED COMMUNITY INVESTMENT FUND
BREAD OF HEALING, INC. 1821 NORTH 16 STREET MILWAUKEE, WI 53205	81-0669867	501 (C)(3)	33,800.	0.			COVID 19 FUNDING
BREAD OF HEALING, INC. 1821 NORTH 16 STREET MILWAUKEE, WI 53205	81-0669867	501 (C)(3)	50,000.	0.			HEALTH IMPROVEMENT FUND AWARD
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE - 1558 NORTH SIXTH STREET - MILWAUKEE, WI 53212-0486	39-0806292	501 (C)(3)	89,478.	0.			SPARK
DR JAMES CAMERON LEGACY FOUNDATION INC. - 11933 WEST BURLEIGH STREET - WAUWATOSA, WI 53222	46-1046265	501 (C)(3)	31,617.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
DISCOVERY WORLD 500 HARBOR DRIVE MILWAUKEE, WI 53202-5601	39-1691578	501 (C)(3)	58,808.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BIG BROTHERS BIG SISTERS OF OZAUKEE COUNTY INC. - 885 BADGER CIRCLE - GRAFTON, WI 53024	39-1229374	501 (C)(3)	18,914.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BOY SCOUTS OF AMERICA, POTAWATOMI AREA COUNCIL - 804 BLUEMOUND RD - WAUKESHA, WI 53188	39-0806342	501 (C)(3)	98,896.	0.			CUB SCOUTS
CHILDREN'S WISCONSIN - COMMUNITY SERVICES - 620 SOUTH 76TH STREET, SUITE 120 - MILWAUKEE, WI 53214-1549	39-0806380	501 (C)(3)	83,548.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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BOY SCOUTS OF AMERICA, POTAWATOMI AREA COUNCIL - 804 BLUEMOUND RD - WAUKESHA, WI 53188	39-0806342	501 (C)(3)	30,997.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BARRINGTON AREA UNITED WAY 200 SOUTH HOUGH ST BARRINGTON, IL 60010	23-7123024	501 (C)(3)	6,997.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BASICS IN MILWAUKEE, INC. 2224 WEST KILBOURN AVENUE, SUITE 21 MILWAUKEE, WI 53233	39-1880148	501 (C)(3)	6,854.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BAY VIEW COMMUNITY CENTER 1320 E OKLAHOMA AVE MILWAUKEE, WI 53207-2457	39-1343561	501 (C)(3)	73,738.	0.			FAMILY AND CHILDREN
BIG BROTHERS BIG SISTERS OF METROPOLITAN MILWAUKEE, INC. - 788 NORTH JEFFERSON STREET, SUITE 600 - MILWAUKEE, WI 53202-3739	39-1239687	501 (C)(3)	168,233.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BAY VIEW COMMUNITY CENTER 1320 E OKLAHOMA AVE MILWAUKEE, WI 53207-2457	39-1343561	501 (C)(3)	24,326.	0.			FOOD PANTRY
BAY VIEW COMMUNITY CENTER 1320 E OKLAHOMA AVE MILWAUKEE, WI 53207-2457	39-1343561	501 (C)(3)	15,000.	0.			COVID 19 FUNDING
BENEDICT CENTER, THE 1849 N. DR. MARTIN LUTHER KING DRIV MILWAUKEE, WI 53212	39-1226475	501 (C)(3)	30,000.	0.			HEALTH IMPROVEMENT FUND AWARD
BOYS & GIRLS CLUBS OF GREATER MILWAUKEE - 1558 NORTH SIXTH STREET - MILWAUKEE, WI 53212-0486	39-0806292	501 (C)(3)	95,803.	0.			SPONSOR-A-SCHOLAR

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BENEDICT CENTER, THE 1849 N. DR. MARTIN LUTHER KING DRIV MILWAUKEE, WI 53212	39-1226475	501 (C)(3)	8,480.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BEST BUDDIES WISCONSIN 10425 W NORTH AVE STE 340 WAUWATOSA, WI 53226	52-1614576	501 (C)(3)	18,809.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BETHEL HORIZONS FOUNDATION 312 WISCONSIN AVE MADISON, WI 53703	23-7017755	501 (C)(3)	25,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BIG BROTHERS BIG SISTERS OF METROPOLITAN MILWAUKEE, INC. - 788 NORTH JEFFERSON STREET, SUITE 600 - MILWAUKEE, WI 53202-3739	39-1239687	501 (C)(3)	160,689.	0.			ONE TO ONE MENTORING
BAY VIEW COMMUNITY CENTER 1320 E OKLAHOMA AVE MILWAUKEE, WI 53207-2457	39-1343561	501 (C)(3)	19,235.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
BIG BROTHERS BIG SISTERS OF OZAUKEE COUNTY INC. - 885 BADGER CIRCLE - GRAFTON, WI 53024	39-1229374	501 (C)(3)	22,460.	0.			MATCH ME
MENTAL HEALTH AMERICA OF WISCONSIN, INC. - 600 WEST VIRGINIA STREET, SUITE 502 - MILWAUKEE, WI 53204	39-0827843	501 (C)(3)	55,267.	0.			MENTAL HEALTH ADVANCEMENT
COMMUNITY OUTPATIENT HEALTH SERVICE - W180 N8085 TOWN HALL ROAD - MENOMONEE FALLS, WI 53051	39-1743056	501 (C)(3)	66,718.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
DIVERSE AND RESILIENT INC. 2439 NORTH HOLTON STREET MILWAUKEE, WI 53212	30-0084616	501 (C)(3)	170,000.	0.			TEEN PREGNANCY PREVENTION COLLABORATIVE FUND

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AURORA FOUNDATION-AURORA 950 NORTH 12 STREET, SUITE A511 MILWAUKEE, WI 53233	39-6044569	501 (C)(3)	25,000.	0.			HEALTHY BIRTH OUTCOMES AWARD
HEBRON HOUSE OF HOSPITALITY, INC. 111 EAST MAIN STREET WAUKESHA, WI 53186	39-1414365	501 (C)(3)	15,500.	0.			COVID 19 FUNDING
HOPE STREET MINISTRY 2522 WEST CAPITOL DRIVE MILWAUKEE, WI 53206	05-0627081	501 (C)(3)	6,102.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
DIVERSE AND RESILIENT INC. 2439 NORTH HOLTON STREET MILWAUKEE, WI 53212	30-0084616	501 (C)(3)	42,000.	0.			HEALTHY YOUTH INITIATIVE
JDRF INTERNATIONAL, SOUTHEASTERN WISCONSIN CHAPTER - 3333 NORTH MAYFAIR ROAD, SUITE 107 - WAUWATOSA, WI 53222	13-3272289	501 (C)(3)	10,600.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
INDEPENDENCEFIRST, INC. 540 SOUTH FIRST STREET MILWAUKEE, WI 53204	39-1343425	501 (C)(3)	45,000.	0.			HEALTHY YOUTH INITIATIVE
INDEPENDENCEFIRST, INC. 540 SOUTH FIRST STREET MILWAUKEE, WI 53204	39-1343425	501 (C)(3)	20,000.	0.			COVID 19 FUNDING
INDEPENDENCEFIRST, INC. 540 SOUTH FIRST STREET MILWAUKEE, WI 53204	39-1343425	501 (C)(3)	18,088.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LA CASA DE ESPERANZA, INC. 410 ARCADIAN AVENUE WAUKESHA, WI 53186-5086	39-1144446	501 (C)(3)	43,032.	0.			EARLY CHILDHOOD EDUCATION

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IGNITE THE SPIRIT MILWAUKEE 2704 E LOCUST ST MILWAUKEE, WI 53211	82-4847818	501 (C)(3)	8,954.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JA WORLDWIDE INC. 745 ATLANTIC AVENUE, #723 BOSTON, MA 02111	27-3666259	501 (C)(3)	15,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JAMES ALBRECHT FREE CLINIC 1110 OAK STREET, SUITE 1200 WEST BEND, WI 53095	39-1839654	501 (C)(3)	9,374.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JEWISH FAMILY SERVICES INC. 1300 NORTH JACKSON STREET MILWAUKEE, WI 53202	39-0806291	501 (C)(3)	174,983.	0.			INDIVIDUAL AND FAMILY COUNSELING
IMPACT, INC. 6737 WEST WASHINGTON STREET, SUITE MILWAUKEE, WI 53214-2619	39-0988784	501 (C)(3)	817,698.	0.			IMPACT 2-1-1
JEWISH FAMILY SERVICES INC. 1300 NORTH JACKSON STREET MILWAUKEE, WI 53202	39-0806291	501 (C)(3)	79,080.	0.			CARE MANAGEMENT
JEWISH FAMILY SERVICES INC. 1300 NORTH JACKSON STREET MILWAUKEE, WI 53202	39-0806291	501 (C)(3)	67,938.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JEWISH FEDERATION OF METRO CHICAGO 30 SOUTH WELLS STREET CHICAGO, IL 60606	36-2167761	501 (C)(3)	14,896.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
INNER BEAUTY CENTER 1300 SOUTH LAYTON BOULEVARD MILWAUKEE, WI 53215	47-1261667	501 (C)(3)	9,853.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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HOPE HOUSE RESCUE MISSION 34 S MAIN ST MIDDLETOWN, OH 45044	31-1254976	501 (C)(3)	6,034.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
KATHY'S HOUSE INC. 600 NORTH 103 STREET MILWAUKEE, WI 53226	39-2022115	501 (C)(3)	6,140.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
IGNACE INDIAN HEALTH CENTER 930 HISTORIC MITCHELL STREET MILWAUKEE, WI 53204	39-1958089	501 (C)(3)	20,719.	0.			SHARED COMMUNITY INVESTMENT FUND
FRIEDENS COMMUNITY MINISTRIES, INC. - 1220 WEST VLIET STREET - MILWAUKEE, WI 53205-0411	39-1587037	501 (C)(3)	10,000.	0.			COVID 19 FUNDING
EARTHSHARE WISCONSIN 7735 OLD GEORGETOWN RD STE 510 BETHESDA, MD 20814	52-1601960	501 (C)(3)	32,181.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
DIVERSE AND RESILIENT INC. 2439 NORTH HOLTON STREET MILWAUKEE, WI 53212	30-0084616	501 (C)(3)	60,840.	0.			END HIV
HEBRON HOUSE OF HOSPITALITY, INC. 111 EAST MAIN STREET WAUKESHA, WI 53186	39-1414365	501 (C)(3)	7,000.	0.			EMERGENCY FUNDING
HOLY FAMILY PARISH SCHOOL 4849 NORTH WILDWOOD AVENUE MILWAUKEE, WI 53217	39-0813412	501 (C)(3)	14,225.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HOPE CENTER INC. 502 N EAST AVE WAUKESHA, WI 53186	39-1585261	501 (C)(3)	11,123.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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HUNGER TASK FORCE, INC. 201 SOUTH HAWLEY COURT MILWAUKEE, WI 53214	39-1345847	501 (C)(3)	241,029.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JOURNEY HOUSE, INC. 2110 W SCOTT ST MILWAUKEE, WI 53204-2077	39-1203539	501 (C)(3)	47,335.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HUNT FOR LIFE FOUNDATION PO BOX 180382 DELAFIELD, WI 53018	81-3238206	501 (C)(3)	7,994.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HOUSING ACTION COALITION OF WAUKESHA COUNTY - 111 EAST MAIN STREET - WAUKESHA, WI 53186	26-4291024	501 (C)(3)	15,000.	0.			2019 HAC PROGRAM COORDINATOR SUPPORT
INTERNATIONAL INSTITUTE OF WISCONSIN - 1110 N OLD WORLD THIRD ST., SUITE 420 - MILWAUKEE, WI 53203-1102	39-0806350	501 (C)(3)	162,837.	0.			IMMIGRATION AND CITIZENSHIP SERVICES
HOUSING RESOURCES, INC. 7830 WEST BURLEIGH STREET MILWAUKEE, WI 53222	39-1706658	501 (C)(3)	25,693.	0.			POST-PURCHASE COUNSELING
HOUSING RESOURCES, INC. 7830 WEST BURLEIGH STREET MILWAUKEE, WI 53222	39-1706658	501 (C)(3)	5,364.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HOUSING RESOURCES, INC. 7830 WEST BURLEIGH STREET MILWAUKEE, WI 53222	39-1706658	501 (C)(3)	5,000.	0.			COVID 19 FUNDING
HUNGER RELIEF FUND OF WISCONSIN HUNGER TASK FORCE, INC. 201 SOUTH H MILWAUKEE, WI 53214	39-1345847	501 (C)(3)	76,973.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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HOPE HOUSE OF MILWAUKEE, INC. 209 W ORCHARD ST. MILWAUKEE, WI 53204	39-1592900	501 (C)(3)	6,650.	0.			FAMILY WARMING ROOM
HOPE NETWORK FOR SINGLE MOTHERS N88 W17658 CHRISTMAN ROAD MENOMONEE FALLS, WI 53051	39-1475304	501 (C)(3)	7,700.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HEBRON HOUSE OF HOSPITALITY, INC. 111 EAST MAIN STREET WAUKESHA, WI 53186	39-1414365	501 (C)(3)	159,303.	0.			EMERGENCY SHELTER
HEART OF WEST MICHIGAN UNITED WAY 118 COMMERCE AVENUE SUITE 100 GRAND RAPIDS, MI 49503-4106	38-1360923	501 (C)(3)	5,674.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
IMPACT, INC. 6737 WEST WASHINGTON STREET, SUITE MILWAUKEE, WI 53214-2619	39-0988784	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
LITERACY SERVICES OF WISCONSIN, INC. - 555 NORTH PLANKINTON AVENUE - MILWAUKEE, WI 53203-2910	39-1091203	501 (C)(3)	50,000.	0.			WAUKESHA COUNTY EXPANSION
LUTHERAN SOCIAL SERVICES OF WISCONSIN & UPPER MICHIGAN - 6737 W WASHINGTON ST STE 2275 - WEST ALLIS, WI 53214-5666	39-0816846	501 (C)(3)	51,820.	0.			SPRING CITY CORNER CLUBHOUSE
MAUI UNITED WAY 95 MAHALANI ST ROOM 24 WAILUKU, HI 96793-2521	99-0086524	501 (C)(3)	5,417.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MACC FUND (MIDWEST ATHLETES AGAINST CHILDHOOD CANCER) - 10000 WEST INNOVATION DRIVE, #135 - MILWAUKEE, WI 53226	39-1270290	501 (C)(3)	8,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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MAKE-A-WISH FOUNDATION OF WISCONSIN - 11020 W. PLANK COURT SUITE 200 - WAUWATOSA, WI 53226	39-1543541	501 (C)(3)	17,750.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LITERACY SERVICES OF WISCONSIN, INC. - 555 NORTH PLANKINTON AVENUE - MILWAUKEE, WI 53203-2910	39-1091203	501 (C)(3)	50,047.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MALAIKA EARLY LEARNING CENTER 125 WEST AUER AVE MILWAUKEE, WI 53212	39-2021628	501 (C)(3)	10,151.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LA CASA DE ESPERANZA, INC. 410 ARCADIAN AVENUE WAUKESHA, WI 53186-5086	39-1144446	501 (C)(3)	9,954.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MARQUETTE UNIVERSITY 1250 W. WISCONSIN AVE. MILWAUKEE, WI 53233	39-0806251	501 (C)(3)	324,214.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MATC FOUNDATION 700 WEST STATE STREET MILWAUKEE, WI 53233	39-1341603	501 (C)(3)	5,662.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MEDICAL COLLEGE OF WISCONSIN RESEARCH PARK CENTER, 10000 W. INNOVATION DRIVE - WAUWATOSA, WI 53226	39-0806261	501 (C)(3)	397,336.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LOCAL INITIATIVES SUPPORT CORPORATION - 234 WEST FLORIDA ST STE 204 - MILWAUKEE, WI 53204	13-3030229	501 (C)(3)	11,339.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MEDICAL COLLEGE OF WISCONSIN RESEARCH PARK CENTER, 10000 W. INNOVATION DRIVE - WAUWATOSA, WI 53226	39-0806261	501 (C)(3)	25,000.	0.			HEALTH IMPROVEMENT FUND AWARD

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MEDICAL COLLEGE OF WISCONSIN RESEARCH PARK CENTER, 10000 W. INNOVATION DRIVE - WAUWATOSA, WI 53226	39-0806261	501 (C)(3)	25,000.	0.			PERISCOPE PROJECT
MARCUS CENTER FOR THE PERFORMING ARTS - 929 NORTH WATER STREET - MILWAUKEE, WI 53202	51-0532407	501 (C)(3)	35,038.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JUNIOR ACHIEVEMENT OF WISCONSIN, INC. - 11111 WEST LIBERTY DRIVE - MILWAUKEE, WI 53224	39-0826295	501 (C)(3)	126,909.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MARQUETTE UNIVERSITY HIGH SCHOOL 3401 WEST WISCONSIN AVENUE MILWAUKEE, WI 53208	39-0806826	501 (C)(3)	21,241.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HEBRON HOUSE OF HOSPITALITY, INC. 111 EAST MAIN STREET WAUKESHA, WI 53186	39-1414365	501 (C)(3)	13,694.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LITERACY SERVICES OF WISCONSIN, INC. - 555 NORTH PLANKINTON AVENUE - MILWAUKEE, WI 53203-2910	39-1091203	501 (C)(3)	38,329.	0.			ADULT EDUCATION PROGRAM
LIFE REMODELED A NONPROFIT CORPORATION - POST OFFICE BOX 28508 - DETROIT, MI 48228	27-5020487	501 (C)(3)	8,100.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HEBRON HOUSE OF HOSPITALITY, INC. 111 EAST MAIN STREET WAUKESHA, WI 53186	39-1414365	501 (C)(3)	51,973.	0.			JEREMY HOUSE
LA CASA DE ESPERANZA, INC. 410 ARCADIAN AVENUE WAUKESHA, WI 53186-5086	39-1144446	501 (C)(3)	20,948.	0.			WORKFORCE DEVELOPMENT

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LUTHERAN SOCIAL SERVICES OF WISCONSIN & UPPER MICHIGAN - 6737 W WASHINGTON ST STE 2275 - WEST ALLIS, WI 53214-5666	39-0816846	501 (C)(3)	25,266.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
JUNIOR ACHIEVEMENT USA ONE EDUCATION WAY COLORADO SPRINGS, CO 80906-4477	84-1267604	501 (C)(3)	10,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LA CAUSA, INC. 136 WEST GREENFIELD AVENUE MILWAUKEE, WI 53204	39-1247667	501 (C)(3)	41,213.	0.			EARLY EDUCATION & CARE CENTER
LA CAUSA, INC. 136 WEST GREENFIELD AVENUE MILWAUKEE, WI 53204	39-1247667	501 (C)(3)	32,097.	0.			CRISIS NURSERY & RESPITE CENTER
LIFESTRIDERS, INC. S11 W29667 SUMMIT AVE. WAUKESHA, WI 53188	47-0955137	501 (C)(3)	29,198.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LA CASA DE ESPERANZA, INC. 410 ARCADIAN AVENUE WAUKESHA, WI 53186-5086	39-1144446	501 (C)(3)	202,902.	0.			FINANCIAL STABILITY
LA CAUSA, INC. 136 WEST GREENFIELD AVENUE MILWAUKEE, WI 53204	39-1247667	501 (C)(3)	19,802.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LEGAL AID SOCIETY OF MILWAUKEE 728 N JAMES LOVELL ST, 3RD FLOOR NO MILWAUKEE, WI 53233	39-0806284	501 (C)(3)	33,727.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LEUKEMIA & LYMPHOMA SOCIETY, WISCONSIN CHAPTER, BROOKFIELD - 6737 W WASHINGTON STREET, SUITE 2100 - WEST ALLIS, WI 53214	13-5644916	501 (C)(3)	14,200.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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LEUKEMIA AND LYMPHOMA SOCIETY (MI) 1471 EAST TWELVE MILE ROAD MADISON HEIGHTS, MI 48071	13-5644916	501 (C)(3)	5,538.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LEGAL AID SOCIETY OF MILWAUKEE 728 N JAMES LOVELL ST, 3RD FLOOR NO MILWAUKEE, WI 53233	39-0806284	501 (C)(3)	31,875.	0.			SAFE & STABLE HOMES
LEUKEMIA AND LYMPHOMA SOCIETY-(NY) NATIONAL HDQTRS - 3 INTERNATIONAL DR, STE 200 - RYE BROOK, NY 10573-7501	13-5644916	501 (C)(3)	8,940.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LIFE NAVIGATORS 7203 WEST CENTER STREET WAUWATOSA, WI 53210-1126	39-0978146	501 (C)(3)	23,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LAKE AREA UNITED WAY 221 WEST RIDGE ROAD GRIFFITH, IN 46319-1097	23-7170019	501 (C)(3)	5,659.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LEGAL AID SOCIETY OF MILWAUKEE 728 N JAMES LOVELL ST, 3RD FLOOR NO MILWAUKEE, WI 53233	39-0806284	501 (C)(3)	122,675.	0.			CIVIL DIVISION
COMMUNITY HEALTH CHARITIES, LOCAL 1199 N FAIRFAX ST STE 600 ALEXANDRIA, VA 22314	85-0258784	501 (C)(3)	474,406.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HEAR WISCONSIN, INC. 10243 WEST NATIONAL AVENUE WEST ALLIS, WI 53227-2028	39-0826101	501 (C)(3)	172,377.	0.			LANGUAGE ACCESS SERVICES
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	203,304.	0.			MENTAL HEALTH COUNSELING

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FOX POINT LUTHERAN CHURCH 7510 NORTH SANTA MONICA BLVD. FOX POINT, WI 53217	39-0907255	501 (C)(3)	5,372.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	15,000.	0.			COVID 19 FUNDING
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	13,289.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FIRST STEP-WESTERN WAYNE COUNTY PROJECT ON DOMESTIC ASSAULT - 44567 PINETREE DRIVE - PLYMOUTH, MI 48170	38-2208980	501 (C)(3)	8,411.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	34,696.	0.			THE C.A.R.E. CENTER
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	21,693.	0.			CENTER FOR THE PREVENTION OF FAMILY VIOLENCE
FAMILY PROMISE OF WESTERN WAUKESHA CO. - 543 A.J. ALLEN CIRCLE UNIT D - WALES, WI 53183	45-5502675	501 (C)(3)	7,500.	0.			SAFE & STABLE HOMES
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	11,043.	0.			COOPERATIVE PARENTING CENTER
ERAS SENIOR NETWORK, INC. 2607 NORTH GRANDVIEW BOULEVARD, STE WAUKESHA, WI 53188-1690	39-1393171	501 (C)(3)	73,046.	0.			FAITH IN ACTION

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FELLOWSHIP OPEN 411 EAST WISCONSIN AVENUE, SUITE 23 MILWAUKEE, WI 53202	75-3070195	501 (C)(3)	26,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FIRST STAGE 325 W. WALNUT MILWAUKEE, WI 53212	39-1634828	501 (C)(3)	6,283.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FISHER HOUSE WISCONSIN 5000 W NATIONAL AVE MILWAUKEE, WI 53295	27-5461119	501 (C)(3)	8,925.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FAMILY SERVICES OF NE WI - GREEN BAY - 300 CROOKS STREET - GREEN BAY, WI 54301	39-0827320	501 (C)(3)	5,743.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FONDY FOOD CENTER, INC. 1617 WEST NORTH AVENUE, SUITE 4 MILWAUKEE, WI 53205-1253	31-1751969	501 (C)(3)	24,000.	0.			SNAP MARKET MATCH
FONDY FOOD CENTER, INC. 1617 WEST NORTH AVENUE, SUITE 4 MILWAUKEE, WI 53205-1253	31-1751969	501 (C)(3)	6,722.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FEEDING AMERICA EASTERN WISCONSIN 1700 WEST FOND DU LAC AVENUE MILWAUKEE, WI 53205-1299	39-1384593	501 (C)(3)	26,704.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
MENTAL HEALTH AMERICA OF WISCONSIN, INC. - 600 WEST VIRGINIA STREET, SUITE 502 - MILWAUKEE, WI 53204	39-0827843	501 (C)(3)	60,329.	0.			MENTAL HEALTH ACCESS
FIRST CHRISTIAN AND MISSIONARY ALLIANCE CHURCH - W156 N10041 PILGRIM ROAD - GERMANTOWN, WI 53022	39-1430204	501 (C)(3)	18,729.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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GREATER MILWAUKEE FOUNDATION 101 WEST PLEASANT STREET, SUITE 210 MILWAUKEE, WI 53212	39-6036407	501 (C)(3)	250,000.	0.			MILWAUKEE SUCCEEDS COLLABORATIVE FUND
EVANGELICAL COVENANT CHURCH HINDSDALE IL - 412 SOUTH GARFIELD STREET - HINDSDALE, IL 60521	36-2480776	501 (C)(3)	24,010.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
DIVERSE AND RESILIENT INC. 2439 NORTH HOLTON STREET MILWAUKEE, WI 53212	30-0084616	501 (C)(3)	12,966.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
LA CASA DE ESPERANZA, INC. 410 ARCADIAN AVENUE WAUKESHA, WI 53186-5086	39-1144446	501 (C)(3)	64,547.	0.			SCHOOL AGE EDUCATION PROGRAM
CHARLES E. KUBLY FOUNDATION 1341 W MEQUON RD #220 MEQUON, WI 53092-3241	20-0375310	501 (C)(3)	5,685.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HEAR WISCONSIN, INC. 10243 WEST NATIONAL AVENUE WEST ALLIS, WI 53227-2028	39-0826101	501 (C)(3)	21,883.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
EASTERSEALS SOUTHEAST WISCONSIN 2222 S. 114 STREET MILWAUKEE, WI 53227-1031	39-0816849	501 (C)(3)	24,914.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
EASTERSEALS SOUTHEAST WISCONSIN 2222 S. 114 STREET MILWAUKEE, WI 53227-1031	39-0816849	501 (C)(3)	100,911.	0.			SUPPORTED EMPLOYMENT
EASTERSEALS SOUTHEAST WISCONSIN 2222 S. 114 STREET MILWAUKEE, WI 53227-1031	39-0816849	501 (C)(3)	93,472.	0.			CASE MANAGEMENT (SBHF)

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EASTERSEALS SOUTHEAST WISCONSIN 2222 S. 114 STREET MILWAUKEE, WI 53227-1031	39-0816849	501 (C)(3)	21,259.	0.			CHILDBIRTH AND INFANT PREPARATION SERVICES
DIVINE SAVIOR HOLY ANGELS HIGH SCHOOL - 4257 NORTH 100 STREET - MILWAUKEE, WI 53222-1391	39-6054869	501 (C)(3)	16,187.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ELEVATE N169 W21005 MEADOW LANE JACKSON, WI 53037	39-1256286	501 (C)(3)	28,479.	0.			GERMANTOWN PREVENTION
ERAS SENIOR NETWORK, INC. 2607 NORTH GRANDVIEW BOULEVARD, STE WAUKESHA, WI 53188-1690	39-1393171	501 (C)(3)	179,625.	0.			NEIGHBORHOOD OUTREACH PROJECT
ERAS SENIOR NETWORK, INC. 2607 NORTH GRANDVIEW BOULEVARD, STE WAUKESHA, WI 53188-1690	39-1393171	501 (C)(3)	10,000.	0.			COVID 19 FUNDING
EVANS SCHOLARS FOUNDATION 1 BRIAR RD GOLF, IL 60029	36-2518129	501 (C)(3)	16,250.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ERAS SENIOR NETWORK, INC. 2607 NORTH GRANDVIEW BOULEVARD, STE WAUKESHA, WI 53188-1690	39-1393171	501 (C)(3)	5,504.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ERAS SENIOR NETWORK, INC. 2607 NORTH GRANDVIEW BOULEVARD, STE WAUKESHA, WI 53188-1690	39-1393171	501 (C)(3)	5,000.	0.			HELPING KIDS SUCCEED INITIATIVE
EVANGELICAL CHILD & FAMILY AGENCY 1617 SOUTH 124 STREET NEW BERLIN, WI 53151	36-2229573	501 (C)(3)	12,136.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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HEAR WISCONSIN, INC. 10243 WEST NATIONAL AVENUE WEST ALLIS, WI 53227-2028	39-0826101	501 (C)(3)	25,000.	0.			COVID 19 FUNDING
EMPLOY MILWAUKEE 2342 NORTH 27TH STREET MILWAUKEE, WI 53210	39-1636835	501 (C)(3)	25,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FORGOTTEN HARVEST INC. (MI) 21800 GREENFIELD RD OAK PARK, MI 48237-2507	38-2926476	501 (C)(3)	6,518.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FAMILY SERVICE OF WAUKESHA 101 WEST BROADWAY, FLOOR 2 WAUKESHA, WI 53186	39-1038707	501 (C)(3)	35,000.	0.			HELPING KIDS SUCCEED INITIATIVE
FAMILY PROMISE OF OZAUKEE COUNTY 136 W GRAND AVE PORT WASHINGTON, WI 53074	46-4227704	501 (C)(3)	10,000.	0.			COVID 19 FUNDING
FRIEDENS COMMUNITY MINISTRIES, INC. - 1220 WEST VLIET STREET - MILWAUKEE, WI 53205-0411	39-1587037	501 (C)(3)	7,434.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GREATER MILWAUKEE FOUNDATION 101 WEST PLEASANT STREET, SUITE 210 MILWAUKEE, WI 53212	39-6036407	501 (C)(3)	100,000.	0.			TEEN PREGNANCY PREVENTION COLLABORATIVE FUND
GREATER MILWAUKEE FOUNDATION 101 WEST PLEASANT STREET, SUITE 210 MILWAUKEE, WI 53212	39-6036407	501 (C)(3)	93,432.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HARRY & ROSE SAMSON FAMILY JEWISH COMMUNITY CENTER - 6255 NORTH SANTA MONICA BOULEVARD - WHITEFISH BAY, WI 53217	39-0806234	501 (C)(3)	149,520.	0.			OLDER ADULT SENIORS

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GUEST HOUSE OF MILWAUKEE INC. 1216 NORTH 13TH STREET MILWAUKEE, WI 53205	39-1539301	501 (C)(3)	59,093.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GUEST HOUSE OF MILWAUKEE INC. 1216 NORTH 13TH STREET MILWAUKEE, WI 53205	39-1539301	501 (C)(3)	25,000.	0.			MILWAUKEE OUTREACH & HOUSING PROJECT
FOUNDATION OF THE LEGACY GUILD 823 BURLINGTON AVENUE WESTERN SPRINGS, IL 60558	46-0888441	501 (C)(3)	9,250.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GUEST HOUSE OF MILWAUKEE INC. 1216 NORTH 13TH STREET MILWAUKEE, WI 53205	39-1539301	501 (C)(3)	25,000.	0.			MILWAUKEE OUTREACH & HOUSING PROJECT
FOOD PANTRY OF WAUKESHA COUNTY, INC. - 1301 SENTRY DR. - WAUKESHA, WI 53186	39-1502732	501 (C)(3)	5,000.	0.			COVID 19 FUNDING
HABITAT FOR HUMANITY HURON VALLEY (MI) - 2805 S INDUSTRIAL HWY, STE 100 - ANN ARBOR, MI 48104	38-2874694	501 (C)(3)	7,831.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HARRY & ROSE SAMSON FAMILY JEWISH COMMUNITY CENTER - 6255 NORTH SANTA MONICA BOULEVARD - WHITEFISH BAY, WI 53217	39-0806234	501 (C)(3)	20,000.	0.			COVID 19 FUNDING
HARRY & ROSE SAMSON FAMILY JEWISH COMMUNITY CENTER - 6255 NORTH SANTA MONICA BOULEVARD - WHITEFISH BAY, WI 53217	39-0806234	501 (C)(3)	37,191.	0.			SPECIAL NEEDS-CHAVERIM
GREATER TWIN CITIES UNITED WAY 404 SOUTH EIGHTH STREET MINNEAPOLIS, MN 55404	41-1973442	501 (C)(3)	48,354.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HARRY & ROSE SAMSON FAMILY JEWISH COMMUNITY CENTER - 6255 NORTH SANTA MONICA BOULEVARD - WHITEFISH BAY, WI 53217	39-0806234	501 (C)(3)	22,867.	0.			SCHOOL AGED SPECIAL NEEDS-SHILUV
HARRY & ROSE SAMSON FAMILY JEWISH COMMUNITY CENTER - 6255 NORTH SANTA MONICA BOULEVARD - WHITEFISH BAY, WI 53217	39-0806234	501 (C)(3)	31,757.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GUEST HOUSE OF MILWAUKEE INC. 1216 NORTH 13TH STREET MILWAUKEE, WI 53205	39-1539301	501 (C)(3)	30,000.	0.			COVID 19 FUNDING
GRAND AVENUE CLUB INC. 210 EAST MICHIGAN STREET MILWAUKEE, WI 53202-4901	39-1708177	501 (C)(3)	39,490.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HABITAT FOR HUMANITY OF WISCONSIN 420 S 1ST ST #6 MILWAUKEE, WI 53204	27-0819276	501 (C)(3)	20,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
ADAPTIVE COMMUNITY APPROACH PROGRAM, INC. (ACAP) - 121 WISCONSIN AVENUE - WAUKESHA, WI 53186-4924	39-1867400	501 (C)(3)	8,491.	0.			COMMUNITY ORIENTERING
GIRL SCOUTS OF WISCONSIN SOUTHEAST, INC. - 131 SOUTH 69TH STREET - MILWAUKEE, WI 53214-1663	39-0892833	501 (C)(3)	525,108.	0.			LEADERSHIP & CRITICAL LIFE SKILLS DEV. FOR GIRLS
FRANKLY MUSIC 622 N. WATER STREET, STE 200 MILWAUKEE, WI 53202	20-0359705	501 (C)(3)	5,500.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FRIENDS, INC. POST OFFICE BOX 117 WEST BEND, WI 53095	39-1308555	501 (C)(3)	6,316.	0.			OPENING DOORS

Schedule I (Form 990)

UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.

Schedule I (Form 990)

39-0806190

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
INDEPENDENCEFIRST, INC. 540 SOUTH FIRST STREET MILWAUKEE, WI 53204	39-1343425	501 (C)(3)	14,986.	0.			ATTENDANT REFERRAL PROGRAM
GUEST HOUSE OF MILWAUKEE INC. 1216 NORTH 13TH STREET MILWAUKEE, WI 53205	39-1539301	501 (C)(3)	51,354.	0.			EMERGENCY SHELTER
FRIENDS, INC. POST OFFICE BOX 117 WEST BEND, WI 53095	39-1308555	501 (C)(3)	6,316.	0.			COVID 19 FUNDING
FRIENDS, INC. POST OFFICE BOX 117 WEST BEND, WI 53095	39-1308555	501 (C)(3)	6,316.	0.			SAFE & STABLE HOMES
FRIENDS, INC. POST OFFICE BOX 117 WEST BEND, WI 53095	39-1308555	501 (C)(3)	6,316.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GESU PARISH 1210 WEST MICHIGAN STREET MILWAUKEE, WI 53233	39-1799799	501 (C)(3)	5,000.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
FRIEDENS COMMUNITY MINISTRIES, INC. - 1220 WEST VLIET STREET - MILWAUKEE, WI 53205-0411	39-1587037	501 (C)(3)	46,961.	0.			EMERGENCY FOOD PANTRY
FROEDTERT HOSPITAL FOUNDATION, INC. - 9200 WEST WISCONSIN AVENUE - MILWAUKEE, WI 53226	39-1431192	501 (C)(3)	135,734.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GIRL SCOUTS OF WISCONSIN SOUTHEAST, INC. - 131 SOUTH 69TH STREET - MILWAUKEE, WI 53214-1663	39-0892833	501 (C)(3)	51,716.	0.			DONOR DESIGNATION PLEDGE PAYMENTS

Schedule I (Form 990)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule I (Form 990)

39-0806190

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
GLEANERS COMMUNITY FOOD BANK OF SOUTHEASTERN MICHIGAN - 2131 BEAUFAIT - DETROIT, MI 48207-3410	38-2156255	501 (C)(3)	5,980.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GREAT RIVERS UNITED WAY, INC 1855 EAST MAIN STREET ONALASKA, WI 54650-6727	39-0848188	501 (C)(3)	10,076.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GLOBAL IMPACT 1199 NORTH FAIRFAX STREET, SUITE 30 ALEXANDRIA, VA 22314	52-1273585	501 (C)(3)	10,846.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GOODWILL INDUSTRIES OF SE WI 5400 S. 60TH STREET GREENDALE, WI 53129-0509	39-0808491	501 (C)(3)	44,643.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GPS EDUCATION PARTNER 20633 WATERTOWN CT. WAUKESHA, WI 53186	39-0808491	501 (C)(3)	63,355.	0.			PATHWAYS TO EMPLOYABILITY
GRAND AVENUE CLUB INC. 210 EAST MICHIGAN STREET MILWAUKEE, WI 53202-4901	39-1708177	501 (C)(3)	37,061.	0.			GRAND AVENUE CLUB
ZOOLOGICAL SOCIETY OF MILWAUKEE COUNTY - 10005 W BLUEMOUND RD - MILWAUKEE, WI 53226	39-6077242	501 (C)(3)	24,414.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
GATHERING OF SOUTHEAST WI, INC., THE - 804 EAST JUNEAU AVENUE - MILWAUKEE, WI 53202	39-1891030	501 (C)(3)	21,787.	0.			DONOR DESIGNATION PLEDGE PAYMENTS
HOUSING ACTION COALITION OF WAUKESHA CTY - 111 EAST MAIN STREET - WAUKESHA, WI 53187	26-4291024	502 (C)(3)	50,000.	0.			COVID 19 FUNDING

Schedule I (Form 990)

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule I (Form 990)

39-0806190

Page 1

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (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
YMCA AT PABST FARMS 1750 VALLEY ROAD OCONOMOWOC, WI 53067	39-0806378	502 (C)(3)	25,288.	0.			SPECIAL PROGRAMS
YMCA AT PABST FARMS 1750 VALLEY ROAD OCONOMOWOC, WI 53068	39-0806378	503 (C)(3)	11,423.	0.			YOUTH & COMMUNITY
HOUSING ACTION COALITION OF WAUKESHA CTY - 111 EAST MAIN STREET - WAUKESHA, WI 53188	26-4291024	503 (C)(3)	10,000.	0.			WINTER OVERFLOW SHELTER
MILWAUKEE COUNTY HOUSING DIVISION 600 WALNUT STREET, SUITE 100 MILWAUKEE, WI 53212		GOVT	83,200.	0.			SHARED COMMUNITY INVESTMENT FUND

Schedule I (Form 990)

UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.

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:

FOR THOSE DISTRIBUTIONS LABELED "DONOR DESIGNATED PLEDGES," NO MONITORING OF THE USE OF THESE FUNDS IS PERFORMED SINCE THE DOLLARS ARE SENT TO THE AGENCIES AT THE REQUEST OF THE DONOR AND, THEREFORE, ARE NOT DISTRIBUTED AT THE DISCRETION OF UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY. FOR ALL THE OTHER DISTRIBUTIONS, USE OF THE FUNDS IS CLOSELY MONITORED BY UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY'S COMMUNITY IMPACT DIVISION. THE AGENCIES COMPLY WITH OUR "AGENCY OUTCOMES POLICY," THE IMPACT OF WHICH IS TO ENABLE UWGMWC TO MEASURE, IN A STANDARD FASHION, THE

Part IV Supplemental Information

RESULTS OF THE PROGRAMS THAT IT FUNDS.

Multiple horizontal lines for supplemental information.

**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

2019

Open to Public Inspection

Name of the organization **UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.** Employer identification number **39-0806190**

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (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

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?

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.

- | | |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee | <input type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input checked="" type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- 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?
- b** Any related organization?
- 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?
- b** Any related organization?
- 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

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

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b		
2		
4a		X
4b		X
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

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

Schedule J (Form 990) 2019

**UNITED WAY OF GREATER MILWAUKEE &
WAUKESHA COUNTY INC.**

Schedule J (Form 990) 2019

39-0806190

Page 2

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) AMY LINDNER PRESIDENT & CEO	(i)	241,560.	0.	0.	21,708.	855.	264,123.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) FILIPPO CARINI CHIEF OPERATING OFFICER	(i)	219,627.	0.	0.	27,269.	20,091.	266,987.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) NICOLE ANGRESANO VP - COMMUNITY IMPACT	(i)	157,743.	0.	0.	20,476.	1,092.	179,311.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) CRAIG NUECHTERLEIN VP - IT & PLEDGE PROCESSIN	(i)	138,482.	0.	0.	14,951.	7,884.	161,317.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) GINA SANTIGATI VP - RESOURCE DEVELOPMENT	(i)	123,287.	0.	0.	13,974.	19,457.	156,718.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ 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.

Name of the organization **UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.** Employer identification number **39-0806190**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		162,161.	FMV
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	93	4,317,497.	STOCK QUOTE
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 (BACKPACKS)	X	15,000	264,996.	FMV
26 Other ()				
27 Other ()				
28 Other ()				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

- 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? **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? **X**
- 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? **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.

	Yes	No
30a		X
31	X	
32a		X

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

Schedule M (Form 990) 2019

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public
Inspection

Name of the organization	UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number	39-0806190
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FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

STRATEGIC IMPACT IN HEALTH, EDUCATION AND FINANCIAL STABILITY.

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

OUR VISION: UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY ASPIRES

TO ACCOMPLISH THE FOLLOWING:

* PRODUCE SIGNIFICANT AND MEASURABLE RESULTS IN THE AREAS OF HEALTH,
EDUCATION, AND FINANCIAL STABILITY.

* CONVENE DIVERSE TEAMS OF COMMUNITY MEMBERS TO TAKE COLLABORATIVE
ACTION ON PRIORITY ISSUES.

* RECRUIT AND RETAIN TALENT TO DRIVE CROSS-SECTOR INITIATIVES AND
INTEGRATED, COMMUNITY-FOCUSED WORK.

* SUSTAIN ITS FINANCIAL STABILITY AND EFFICIENT OPERATIONS.

* BE RECOGNIZED AS A LEADER IN EFFECTING LONG-TERM SOCIETAL CHANGE.

* ATTAIN ROBUST REVENUE GROWTH AS DONORS' CHARITY OF CHOICE.

DIVERSITY & INCLUSION VALUE STATEMENT:

WE BELIEVE DIVERSITY GOES BEYOND VISIBLE DIFFERENCES AND AFFIRMS THE
ESSENCE OF ALL INDIVIDUALS INCLUDING THE REALITIES, BACKGROUND,
EXPERIENCES, SKILLS AND PERSPECTIVES THAT MAKE EACH PERSON WHO THEY
ARE. DIVERSITY AND INCLUSION ARE AT THE HEART OF WHAT IT MEANS TO LIVE
UNITED.

OUR VALUES:

*WE BELIEVE WE ALL HAVE AN OBLIGATION FOR THE CARE AND WELL-BEING OF
THE GREATER MILWAUKEE & WAUKESHA COUNTY COMMUNITY.

*WE BELIEVE IN MAXIMIZING COMMUNITY IMPACT BY POOLING INDIVIDUAL
CONTRIBUTIONS. WE BELIEVE IN WORKING IN CONCERT WITH LOCAL AGENCY

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2019)

932211 09-06-19

Name of the organization UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number 39-0806190
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PARTNERS TO MAKE A CRITICAL DIFFERENCE IN OUR COMMUNITY.

***WE BELIEVE MAXIMIZING THE SATISFACTION OF OUR CUSTOMERS (DONORS) IS OUR MOST IMPORTANT CONCERN AS A MEANS OF WARRANTING THEIR CONTINUED LOYALTY.**

***WE BELIEVE WE ARE ACCOUNTABLE TO OUR COMMUNITY AND MUST MAINTAIN STELLAR FINANCIALS AND SECURE SYSTEMS THAT ENSURE THE CONFIDENTIALITY OF DONOR INFORMATION.**

***WE BELIEVE EXCELLENCE IS THE STANDARD FOR ALL WE DO (INTERNALLY AND EXTERNALLY), ACHIEVED BY ENCOURAGING AND NOURISHING:**

O RESPECT FOR EACH OTHER AND THE INDIVIDUALS WE SERVE

O INTEGRITY IN EVERY ACTION WE TAKE

O ETHICAL BEHAVIOR IN ALL WE DO

O HONEST, OPEN COMMUNICATIONS

O PRUDENT RISK-TAKING

O COOPERATION AND TEAMWORK

O CREATIVITY AND INNOVATION

O OWNERSHIP OF OUR ACTIONS

***WE BELIEVE THE ULTIMATE MEASURE OF OUR SUCCESS IS OUR ABILITY TO PROVIDE SUPERIOR VALUE TO OUR PARTNERS AND CUSTOMERS, BALANCING NEAR-TERM AND LONG-TERM OBJECTIVES, AND GROWTH TO ACHIEVE MEASURED IMPACT AND OVERALL COMMUNITY IMPROVEMENT.**

FORM 990, PART III, LINE 4A

COMMUNITY INVESTMENT:

PHILOSOPHY: EVERYONE DESERVES OPPORTUNITIES TO BUILD A GOOD LIFE A QUALITY EDUCATION THAT LEADS TO A STABLE JOB, ENOUGH INCOME TO SUPPORT A FAMILY THROUGH ALL OF LIFE'S STAGES, GOOD HEALTH AND A SAFE HOME.

Name of the organization	UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number	39-0806190
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GOAL: TO CREATE LONG-LASTING CHANGE BY ADDRESSING OUR COMMUNITY'S MOST SERIOUS PROBLEMS BY INVESTING IN SOLUTIONS RIGHT HERE IN OUR COMMUNITY.

STRATEGY: FOCUS ON THREE CRITICAL ISSUE AREAS, HEALTH, EDUCATION AND FINANCIAL STABILITY THE BUILDING BLOCKS TO A GOOD LIFE.

HEALTH

HEALTH OF INDIVIDUALS IS A STRONG INDICATOR OF THE HEALTH OF A COMMUNITY. ACHIEVING AND MAINTAINING GOOD HEALTH IS IMPORTANT DURING ALL STAGES OF LIFE, FROM CONCEPTION THROUGH CHILDHOOD, INTO ADULTHOOD AND THROUGH OLDER AGE. TO IMPROVE THE HEALTH OF OUR COMMUNITY WE MUST ALL BECOME MORE AWARE OF HEALTH RISKS, STARTING FROM BEFORE BIRTH. WHETHER IT IS A TEEN STRUGGLING TO MAKE THE RIGHT DECISION, A SENIOR IN NEED OF HOME HEALTH CARE, OR A SURVIVOR OF ABUSE SEEKING A SAFER ENVIRONMENT; UNITED WAY IS WORKING TO IMPROVE THE QUALITY OF LIFE FOR ALL.

UNITED WAY PARTNERS WITH AGENCIES TO PROVIDE HELP TO THOSE WITHOUT HEALTH INSURANCE, SENIORS IN NEED OF HOME HEALTH CARE, SURVIVORS OF ABUSE AND INDIVIDUALS STRUGGLING WITH MENTAL ILLNESS OR ADDICTION. IN 2020-21, UNITED WAY WILL INVEST APPROXIMATELY \$9,822,000 IN HEALTH PROGRAMS.

GOALS IN HEALTH: PROVIDE FUNDING TO INCREASE THE NUMBER OF YOUTH AND ADULTS WHO:

- * ARE ABLE TO LIVE INDEPENDENTLY AND WITH DIGNITY.
- * HAVE ACCESS TO HIGH QUALITY AND AFFORDABLE MENTAL, BEHAVIORAL, DENTAL, AND GENERAL HEALTH CARE SERVICES.

Name of the organization	UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number	39-0806190
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* HAVE A NETWORK OF SUPPORT FOR CHILDREN WITH DISABILITIES, THEIR FAMILIES, AND CAREGIVERS.

* HAVE ACCESS TO HIGH QUALITY, AFFORDABLE PRENATAL CARE AND PREGNANCY SUPPORT SERVICES.

UNITED WAY'S INVESTMENT AREAS IN HEALTH:

* ACCESS TO HEALTHCARE: UNITED WAY IS REMOVING BARRIERS TO ENSURE ALL YOUTH AND ADULTS HAVE ACCESS TO QUALITY AND AFFORDABLE HEALTH CARE. TO DO THIS, WE INVEST IN PROGRAMS THAT PROVIDE ACCESS TO GENERAL, DENTAL, PRENATAL AND PERINATAL, AND BEHAVIORAL AND MENTAL HEALTH CARE.

* HEALTH & WELLNESS: UNITED WAY IS SUPPORTING YOUTH AND ADULTS OF ALL AGES AND ABILITIES TO ENSURE EVERYONE HAS THE OPPORTUNITY TO LIVE WITH INDEPENDENCE AND DIGNITY. WE DO THIS BY INVESTING IN PROGRAMS THAT PROVIDE OLDER ADULTS WITH SUPPORT AND INDEPENDENCE, SERVICES FOR CHILDREN AND ADULTS WITH DISABILITIES, THEIR FAMILIES AND CAREGIVERS, AND CONNECT OUR ENTIRE COMMUNITY WITH ASSESSMENT, REFERRAL AND SUPPORT PROGRAMS.

* SAFE & HEALTHY COMMUNITIES: UNITED WAY TRANSFORMS COMMUNITIES THROUGH EDUCATION AND ACCESS TO SUPPORT, MAKING HEALTHY CHOICES EASY, SAFE, AND AFFORDABLE. WE DO THIS BY INVESTING IN PROGRAMS THAT SUPPORT SURVIVORS OF INTIMATE PARTNER VIOLENCE, HOUSE YOUTH WHO ARE HOMELESS, AND ENCOURAGE MEDIATION AND HEALTHY CONFLICT RESOLUTION.

UNITED WAY'S IMPACT IN HEALTH

OF ADULTS WHO PARTICIPATED IN UNITED WAY-FUNDED BEHAVIORAL AND MENTAL HEALTH PROGRAMS:

Name of the organization UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Employer identification number 39-0806190
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95% WERE BETTER ABLE TO IDENTIFY STRESSORS IN THEIR LIVES

94% WERE ABLE TO CREATE A PLAN TO MANAGE THEIR STRESS

94% LEARNED SKILLS TO COPE WITH THEIR STRESS

93% WERE BETTER ABLE TO COMMUNICATE WITH OTHERS

92% FELT THEIR RELATIONSHIPS WERE BETTER

93% WERE BETTER ABLE TO FUNCTION AT SCHOOL OR WORK

OF CHILDREN WHO PARTICIPATED IN UNITED WAY-FUNDED BEHAVIORAL AND MENTAL HEALTH PROGRAMS:

92% FELT THEIR SOCIAL/EMOTIONAL WELL-BEING WAS SUPPORTED WITHIN THE CONTEXT OF THE FAMILY

89% MAINTAINED OR IMPROVED BEHAVIOR AT SCHOOL

90% MAINTAINED OR IMPROVED BEHAVIOR WITH THEIR PEERS

91% MAINTAINED OR IMPROVED THEIR BEHAVIOR AT HOME

87% DISPLAYED SIGNS OF IMPROVEMENT IN SOCIAL SKILLS

OF THE ADULTS WHO PARTICIPATED IN UNITED WAY-FUNDED CHEMICAL ABUSE AND DEPENDENCY PROGRAMS:

100% REDUCED THEIR ALCOHOL/DRUG USE

99% FELT THEIR MENTAL HEALTH HAS IMPROVED

99% FELT THEIR LEVEL OF HAPPINESS HAS IMPROVED

95% FELT THEIR RELATIONSHIP WITH THEIR CHILDREN HAS IMPROVED

98% FELT THAT OTHER RELATIONSHIPS IN THEIR LIFE HAVE IMPROVED

OF THE ADULTS WHO PARTICIPATED IN UNITED WAY-FUNDED DISABILITIES PROGRAMS:

91% FELT THEIR FINANCIAL CONCERNS WERE ADDRESSED

90% FELT THEIR HOUSING CONCERNS WERE ADDRESSED

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93% FELT THEIR EMPLOYMENT CONCERNS WERE ADDRESSED

97% ATTENDED SOCIAL ACTIVITIES

94% WERE CONNECTED TO SUPPORT NETWORKS

96% ENGAGED IN SOCIALIZATION AND FRIENDSHIP OPPORTUNITIES

OF THE CHILDREN WHO PARTICIPATED IN UNITED WAY-FUNDED DISABILITIES PROGRAMS :

93% COOPERATED WITH OTHER CHILDREN

95% MAINTAINED APPROPRIATE BEHAVIOR OR IMPROVED BEHAVIOR

94% DISPLAYED SIGNS OF DEVELOPMENTAL IMPROVEMENT IN SELF-HELP/ADAPTING

94% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN COGNITIVE SKILLS

97% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN MOTOR SKILLS

94% DISPLAYED SIGNS OF DEVELOPMENTAL IMPROVEMENT IN COMMUNICATION SKILLS

91% DISPLAYED SIGNS OF DEVELOPMENTAL IMPROVEMENT IN PRE-LITERACY/LITERACY SKILLS

OF THE CAREGIVERS WHO PARTICIPATED IN UNITED WAY-FUNDED DISABILITIES PROGRAMS :

99% FELT THAT THE PROGRAM HELPED THEM TO MAKE PLANS FOR THE INDIVIDUAL'S FUTURE

97% FELT THAT THE PROGRAM USED THEM TO UNDERSTAND RIGHTS AND ADVOCATE FOR THE INDIVIDUAL

OF THE YOUTH WHO STAYED AT A UNITED WAY-FUNDED EMERGENCY SHELTER :

90% RETURNED TO THEIR HOME OR A SAFE, ACCEPTABLE ALTERNATIVE

91% FELT THEIR RELATIONSHIP WITH THEIR PARENT/GUARDIAN REMAINED THE

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SAME OR IMPROVED

86% WERE BETTER ABLE TO COPE WITH THE PROBLEMS THAT CAUSED THEM TO
SEEK SERVICES

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED HEALTH CARE ACCESS
PROGRAMS:

- 98% FELT THEY WERE ABLE TO MAKE THEIR OWN DECISIONS
- 96% FELT THEY WERE INCLUDED IN SETTING A PLAN FOR THEIR OWN HEALTH
- 91% FELT THEIR PAIN WAS RELIEVED OR MANAGED
- 97% FELT THEIR NEEDS WERE MET

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED HEALTH EDUCATION
PREVENTION (HEALTH) PROGRAMS:

- 100% WERE GIVEN THE NECESSARY RESOURCES AROUND TREATMENT OPTIONS
- 100% WERE GIVEN OTHER RESOURCES THEY NEEDED
- 98% DEMONSTRATED AN INCREASED KNOWLEDGE OF HIV AND/OR STIS
- 100% WERE AWARE OF THEIR HIV AND/OR STI STATUS

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED INTIMATE PARTNER
VIOLENCE (BATTERERS INTERVENTION) PROGRAMS:

- 98% DISPLAYED INTENT TO REMAIN VIOLENCE FREE IN THE FUTURE
- 98% HAD A BETTER UNDERSTANDING THAT THE ABUSE WAS THEIR FAULT
- 98% FELT THEY HAD A BETTER UNDERSTANDING OF THE EFFECTS OF DOMESTIC
VIOLENCE

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED INTIMATE PARTNER
VIOLENCE (VICTIM SAFETY) PROGRAMS:

- 97% FELT MORE CONFIDENT IN THEIR DECISION-MAKING SKILLS

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97% FELT THEY COULD ACHIEVE THE GOALS THEY SET FOR THEMSELVES

96% HAD MORE KNOWLEDGE ABOUT SAFETY PLANNING

OF THE ADULTS THAT PARTICIPATED IN UNITED WAY-FUNDED OLDER ADULT
SUPPORT AND INDEPENDENCE PROGRAMS:

92% UNDERSTOOD THEIR RIGHTS

95% FELT THEIR CULTURE WAS RESPECTED

96% FELT THEIR SPIRITUAL BELIEFS WERE RESPECTED

99% FELT THAT THEY WERE TREATED WITH RESPECT AND DIGNITY

84% HAD THEIR FINANCIAL CONCERNS ADDRESSED

81% HAD THEIR HOUSING CONCERNS ADDRESSED

93% HAD THEIR PHYSICAL HEALTH CONCERNS ADDRESSED

OF THE CAREGIVERS THAT PARTICIPATED IN UNITED WAY-FUNDED OLDER ADULT
SUPPORT AND INDEPENDENCE PROGRAMS:

100% FELT SUPPORTED, WHICH HELPED THEM AS CAREGIVERS

100% WERE ABLE TO CONTINUE TO WORK/SEEK EMPLOYMENT

100% RECEIVED HELP IN ACCESSING THE SERVICES THEY NEEDED TO BETTER

CARE FOR THE INDIVIDUAL

98% WERE ABLE TO MAKE PLANS FOR THE INDIVIDUAL'S FUTURE

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED PREGNANCY PARENTING AND
SUPPORT SERVICES PROGRAMS:

93% CONNECTED TO A MEDICAL HOME

81% BROUGHT BABY IN FOR A SIX-WEEK CHECKUP

100% WERE EDUCATED ON SAFE SLEEP ENVIRONMENTS

95% WERE OBSERVED USING A SAFE SLEEP ENVIRONMENT

100% WERE EDUCATED ABOUT THE EFFECTS OF SMOKING AND SECOND-HAND SMOKE

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100% HAD A HEALTHY PREGNANCY OUTCOME

91% CARRIED THE BABY TO TERM

91% DELIVERED A BABY WITH A HEALTHY BIRTH WEIGHT

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COVID-19 URGENT NEEDS FUND

IN RESPONSE TO THE COVID-19 PANDEMIC, UNITED WAY SET UP A SPECIAL FUND TO ADDRESS THE URGENT AND CRITICAL NEEDS OF THE NONPROFITS IN OUR COMMUNITY AND INVESTED \$1,491,000. BETWEEN MARCH 14, 2020 AND JUNE 30, 2020, THE UNITED WAY COVID URGENT NEEDS FUND HAS PROVIDED 500+ GALLONS OF HAND SANITIZER, 13,500 FOOD ITEMS, 43,000 FOOD PANTRY SUPPLIES, 97,000+ MASKS, GLOVES, AND FACE SHIELDS, 1,100 DIGITAL NO-TOUCH THERMOMETERS, 19,200 PERSONAL HYGIENE PRODUCTS, 3,600 CLEANING SUPPLY PRODUCTS, AND 75,000 DIAPERS. THE FUND ALSO PROVIDED MEALS TO NATIONAL GUARD WORKERS AT MILWAUKEE AREA COVID TESTING SITES AND FOR THOSE EXPERIENCING HOMELESSNESS WHO HAD COVID SYMPTOMS AND POSITIVE DIAGNOSIS STAYING AT CLARE HALL OR LOCAL HOTELS FOR THE DURATION OF THEIR ILLNESS. ADDITIONALLY, GRANTS WERE MADE DIRECTLY TO NONPROFITS TO ENSURE THEY COULD CONTINUE SERVING CLIENTS IN NEW AND INNOVATIVE WAYS AND HANDLE THE INCREASE IN BASIC-NEEDS SERVICES NEEDED DURING THIS TIME. THE PANDEMIC ALSO BROUGHT TO LIGHT SEVERAL TECHNOLOGIES NEEDS IN OUR COMMUNITY. UNITED WAY PROVIDED 50 HOTSPOTS WITH 6 MONTHS OF SERVICE AND 46 LAPTOPS TO MILWAUKEE COMMUNITY SCHOOLS PARTNERSHIP STUDENTS.

EDUCATION

EDUCATION IS THE CORNERSTONE OF INDIVIDUAL AND COMMUNITY SUCCESS.

STRONG, PRODUCTIVE COMMUNITIES ARE DEPENDENT UPON A SKILLED WORKFORCE

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THAT CAN COMPETE IN A GLOBAL ECONOMY. IT'S NOT ENOUGH TO INTERVENE IN HIGH SCHOOL. IT IS CRITICAL TO REACH CHILDREN EARLY EVEN BEFORE THEY START SCHOOL. ONCE A YOUNG PERSON FALLS BEHIND, IT CAN BE VERY DIFFICULT TO CATCH UP. IF A CHILD ISN'T READING AT GRADE LEVEL BY 3RD GRADE THEY MAY NEVER CATCH UP. UNITED WAY IS WORKING WITH SCHOOLS AND ORGANIZATIONS TO CHANGE THAT, AND HELPING TO ENSURE THAT EVERY CHILD HAS A CHANCE FOR SUCCESS IN SCHOOL, WORK, AND LIFE BY INVESTING IN PROGRAMS THAT PRODUCE RESULTS. IN 2020-21, UNITED WAY WILL INVEST APPROXIMATELY \$7,198,000 IN EDUCATION PROGRAMS.

GOALS IN EDUCATION: PROVIDE FUNDING TO INCREASE THE NUMBER OF CHILDREN WHO:

- * ENTER SCHOOL READY TO SUCCEED.
- * READ PROFICIENTLY BY THIRD GRADE.
- * ARE ON TRACK TO BE PROMOTED TO THE NEXT GRADE LEVEL.
- * HAVE GOALS FOR THEIR FUTURES.
- * DISPLAY IMPROVED COGNITIVE, SOCIAL, AND/OR PHYSICAL SKILLS.
- * GRADUATE FROM HIGH SCHOOL ON TIME.
- * ARE PREPARED FOR SUCCESS IN COLLEGE, WORK, AND LIFE.

UNITED WAY'S INVESTMENT AREAS IN EDUCATION:

- * EARLY CHILDHOOD EDUCATION: AIMS TO INCREASE THE NUMBER OF CHILDREN WHO ENTER SCHOOL READY TO SUCCEED.
- * STRENGTHENING FAMILIES: SUPPORTS SUCCESS WITHIN THE FAMILY UNIT AND IMPROVED COGNITIVE, SOCIAL, AND/OR PHYSICAL SKILLS AMONG CHILDREN.
- * YOUTH DEVELOPMENT: FOCUSES ON INCREASING THE NUMBER OF CHILDREN WHO READ PROFICIENTLY BY THIRD GRADE, ARE ON TRACK TO BE PROMOTED TO THE NEXT GRADE LEVEL, DEVELOP RESISTANCE SKILLS, INCREASE SCHOOL

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ENGAGEMENT, HAVE GOALS AND ASPIRATION, GRADUATE HIGH SCHOOL ON TIME,
AND ARE PREPARED FOR SUCCESS IN COLLEGE, WORK, AND LIFE.

UNITED WAY'S IMPACT IN EDUCATION:
OF THE CHILDREN WHO PARTICIPATED IN UNITED WAY-FUNDED EARLY CHILDHOOD
EDUCATION PROGRAMS:

- 86% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN COMMUNICATION SKILLS
- 87% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN SOCIAL/EMOTIONAL SKILLS
- 90% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN COGNITIVE SKILLS
- 93% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN MOTOR SKILLS
- 86% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN LITERACY SKILLS
- 86% COOPERATED WITH OTHER CHILDREN

OF THE PARENTS/CAREGIVERS WHO PARTICIPATED IN UNITED WAY-FUNDED EARLY
CHILDHOOD EDUCATION PROGRAMS:

- 88% LEARNED POSITIVE WAYS TO DEAL WITH STRESS
- 92% HAD IMPROVED OVERALL HEALTH
- 90% HAD DECREASED STRESS LEVELS
- 95% LEARNED MORE POSITIVE CAREGIVING/PARENTING SKILLS
- 97% IMPROVED THEIR EMOTIONAL/BONDING RELATIONSHIP WITH THEIR
CHILD(REN)

- 97% IMPROVED COMMUNICATION WITH THEIR CHILD(REN)
- 98% IMPROVED THEIR PHYSICAL RELATIONSHIP WITH THEIR CHILD(REN)

OF THE CHILDREN WHO PARTICIPATED IN UNITED WAY-FUNDED SUPPORT FOR
CHILDREN AND FAMILIES PROGRAMS:

- 82% COOPERATED WITH OTHER CHILDREN
- 85% MAINTAINED APPROPRIATE BEHAVIOR OR IMPROVED THEIR BEHAVIOR

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- 85% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN SOCIAL/EMOTIONAL SKILLS
- 88% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN MOTOR SKILLS
- 82% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN LITERACY SKILLS
- 81% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN COMMUNICATION SKILLS
- 92% DISPLAYED DEVELOPMENTAL IMPROVEMENT IN COGNITIVE SKILLS

OF THE PARENTS/CAREGIVERS WHO PARTICIPATED IN UNITED WAY-FUNDED SUPPORT FOR CHILDREN AND FAMILIES PROGRAMS:

- 98% IMPROVED COMMUNICATION WITH THEIR CHILDREN
- 96% IMPROVED THEIR PHYSICAL RELATIONSHIP WITH THEIR CHILDREN
- 97% IMPROVED THEIR EMOTIONAL/BONDING RELATIONSHIP WITH THEIR CHILDREN
- 83% LEARNED POSITIVE WAYS TO DEAL WITH STRESS
- 89% DECREASED THEIR STRESS
- 98% LEARNED MORE POSITIVE CAREGIVING/PARENTING SKILLS
- 98% USED THE SKILLS THEY LEARNED FROM THE PROGRAM
- 96% WERE ABLE TO CONTROL THEIR ANGER

OF THE CHILDREN AGES 6-11 WHO PARTICIPATED IN UNITED WAY-FUNDED YOUTH DEVELOPMENT PROGRAMS:

- 90% HAVE GOALS AND PLANS FOR THE FUTURE
- 85% HAVE PLANS FOR THE NEXT YEAR
- 95% TRIED THEIR BEST IN SCHOOL
- 84% FINISHED THEIR HOMEWORK ON TIME
- 88% WENT TO SCHOOL EACH DAY (UNLESS THEY WERE SICK)
- 94% IMPROVED ON BELIEVING THAT IT MATTERS TO DO WELL IN SCHOOL
- 94% IMPROVED ON BEING ON TRACK TO GO TO THE NEXT GRADE LEVEL
- 89% IMPROVED ON BELIEVING THEY COULD MAKE A DIFFERENCE IN THEIR

COMMUNITY

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OF THE CHILDREN AGES 12 AND OLDER WHO PARTICIPATED IN UNITED WAY-FUNDED
YOUTH DEVELOPMENT PROGRAMS:

- 93% IMPROVED ON TRYING TO DO THEIR BEST IN SCHOOL
- 83% IMPROVED ON COMPLETING THEIR HOMEWORK ON TIME
- 87% IMPROVED ON ATTENDING SCHOOL EACH DAY (UNLESS THEY WERE SICK)
- 94% IMPROVED ON UNDERSTANDING WHY IT IS IMPORTANT TO PERFORM WELL IN SCHOOL
- 92% IMPROVED ON SETTING GOALS AND PLANS FOR THE FUTURE
- 89% IMPROVED ON PLANNING TO GO TO COLLEGE OR SOME OTHER SCHOOL AFTER GRADUATION
- 93% IMPROVED ON BEING ON TRACK TO GRADUATE FROM HIGH SCHOOL
- 87% BELIEVED THEY COULD MAKE A DIFFERENCE IN THEIR COMMUNITY
- 83% VOLUNTEERED IN THEIR COMMUNITY

FINANCIAL STABILITY

OUR COMMUNITY WILL ONLY PROSPER AND GROW IF ALL FAMILIES ARE FINANCIALLY STABLE. FEWER FINANCIAL STRESSES LEAD TO HEALTHIER LIVES, IMPROVED WORK PERFORMANCE, AND BETTER EDUCATION OUTCOMES. UNITED WAY INVESTS IN PROGRAMS THAT HELP ADULTS IMPROVE THEIR EDUCATION LEVEL AND CREATE A MORE FINANCIALLY SECURE FUTURE FOR THEMSELVES AND THEIR FAMILIES.

UNITED WAY'S WORK IN FINANCIAL STABILITY IS FOCUSED ON ENSURING ALL FAMILIES AND INDIVIDUALS ACHIEVE FINANCIAL STABILITY. IN 2020-21, UNITED WAY WILL INVEST APPROXIMATELY \$4,792,000 IN FINANCIAL STABILITY PROGRAMS.

GOALS IN FINANCIAL STABILITY: INCREASE THE NUMBER OF ADULTS & FAMILIES

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WHO:

- * ARE ABLE TO MEET THEIR BASIC NEEDS.
- * HAVE SAFE AND AFFORDABLE HOUSING
- * GAIN EDUCATIONAL AND/OR TRAINING SKILLS TO SECURE AND MAINTAIN EMPLOYMENT THAT OFFERS A FAMILY-SUSTAINING WAGE.
- * HAVE ACCESS TO HIGH QUALITY, FREE, OR LOW-COST LEGAL SERVICES.
- * SAVE FOR A HOME OR POSTSECONDARY EDUCATION.

UNITED WAY'S INVESTMENT AREAS IN FINANCIAL STABILITY:

* FINANCIAL EMPOWERMENT FOR INDIVIDUALS & FAMILIES: UNITED WAY IS PROMOTING FINANCIAL STABILITY AND INDEPENDENCE. TO DO THIS, WE ARE INVESTING IN PROGRAMS THAT HELP PEOPLE UNDERSTAND HOW TO BUILD FINANCIAL ASSETS AND SAVE FOR A HOME OR POSTSECONDARY EDUCATION.

* REDUCING BARRIERS TO EMPLOYMENT: UNITED WAY IS HELPING OTHERS TO BUILD EDUCATION CREDENTIALS AND SKILL CERTIFICATION TO OVERCOME BARRIERS TO EMPLOYMENT. TO DO THIS, WE INVEST IN PROGRAMS THAT HELP INDIVIDUALS NAVIGATE THROUGH THE LEGAL SYSTEM AND GAIN EDUCATIONAL AND/OR TRAINING SKILLS TO SECURE AND MAINTAIN EMPLOYMENT THAT OFFERS A FAMILY SUSTAINING WAGE.

* SAFE & STABLE HOMES: UNITED WAY IS ENSURING INDIVIDUALS AND FAMILIES HAVE SAFE AND AFFORDABLE PERMANENT HOUSING. WE DO THIS, BY INVESTING IN PROGRAMS THAT HELP PEOPLE MEET THEIR BASIC NEEDS OF FOOD AND SHELTER.

UNITED WAY'S IMPACT IN FINANCIAL STABILITY:

OF THOSE WHO UTILIZED UNITED WAY-FUNDED FINANCIAL CAPABILITIES PROGRAMS

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97% UNDERSTOOD HOW CREDIT WORKS

98% UNDERSTOOD THE IMPORTANCE OF SAVING MONEY FOR THE FUTURE

83% UNDERSTOOD THEIR PERSONAL BUDGET

97% MADE PROGRESS TOWARDS THEIR PERSONAL GOALS

97% HAD MORE CONFIDENCE IN MAKING FINANCIAL DECISIONS

97% IMPROVED THEIR PROBLEM-SOLVING SKILLS

OF THOSE WHO UTILIZED UNITED WAY-FUNDED ADULT LEARNING PROGRAMS:

97% KNOW THAT THERE ARE BENEFITS TO USING A BANK

97% LEARNED THE BASICS OF A CHECKING/SAVINGS ACCOUNT

94% OPENED A CHECKING/SAVINGS ACCOUNT

96% PUT MONEY IN A CHECKING/SAVINGS ACCOUNT

99% MADE PROGRESS TOWARDS THEIR ACADEMIC GOALS

98% HAD MORE CONFIDENCE IN THEIR ACADEMIC ABILITY

86% IMPROVED THEIR COMPUTER SKILLS

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OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED REDUCING BARRIERS TO
EMPLOYMENT PROGRAMS:

90% ACHIEVED/GAINED JOB-SPECIFIC CREDENTIALS (CERTIFICATE, LICENSE,
ETC)

86% IMPROVED THEIR COMPUTER SKILLS

93% IMPROVED THEIR JOB INTERVIEWING SKILLS

92% IMPROVED THEIR RESUME WRITING SKILLS

85% IMPROVED THEIR LITERACY SKILLS

93% IMPROVED THEIR JOB SEARCH SKILLS (INTERNET, NEWSPAPER, ETC...)

82% MAINTAINED EMPLOYMENT

72% RETAINED EMPLOYMENT FOR AT LEAST 30 DAYS

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OF THOSE THAT UTILIZED UNITED WAY-FUNDED EMERGENCY SHELTERS:

89% FELT THEIR HOUSING WOULD IMPROVE AFTER LEAVING THE SHELTER

88% SET PERSONAL GOALS TOWARDS SELF-IMPROVEMENT

81% MADE PROGRESS TOWARDS THEIR GOALS

95% FELT THEIR BASIC NEEDS WERE MET

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED EMERGENCY FOOD PANTRIES:

95% HAD A BETTER UNDERSTANDING OF HEALTHY EATING HABITS

95% WERE OFFERED RESOURCES ABOUT HEALTHY EATING HABITS

98% FELT THAT THE PANTRY PROVIDED THEM WITH NUTRITIOUS FOOD

81% WERE ABLE TO USE THEIR MONEY TOWARDS OTHER AREAS OF THEIR BUDGET

89% FELT THEIR 3-5 DAY EMERGENCY FOOD NEEDS WERE MET

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED HOUSING AND HOMEOWNERSHIP PROGRAMS:

100% WILL BE BETTER ABLE TO HANDLE SIMILAR SITUATIONS IT HE FUTURE BECAUSE OF WHAT THEY LEARNED

91% AVOIDED FORECLOSURE, EVICTION OR HOMELESSNESS

88% WERE ABLE TO MAINTAIN OR SECURE SAFE AND AFFORDABLE HOUSING

98% RECEIVED INFORMATION OR SERVICES TO BETTER THEIR HOUSING SITUATION

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED LEGAL AID PROGRAMS:

96% FELT SOME STRESS RELIEF IN KNOWING WHERE TO SEEK THE PROPER ASSISTANCE AND/OR SERVICES

96% FELT SOMEONE WAS ABLE TO HELP THEM

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99% HAD A BETTER UNDERSTANDING OF THEIR LEGAL RIGHTS

95% KNOW MORE ABOUT AVAILABLE COMMUNITY RESOURCES

OF THOSE THAT PARTICIPATED IN UNITED WAY-FUNDED IMMIGRATION AND REFUGEE SERVICES PROGRAMS:

87% RECEIVED ASSISTANCE OR RESOURCES FOR LEGAL HELP

98% UNDERSTOOD THEIR LEGAL STATUS

98% UNDERSTOOD THEIR EMPLOYMENT ELIGIBILITY

96% KNEW WHEN THEY WOULD QUALIFY FOR PERMANENT RESIDENCY OR

CITIZENSHIP

99% FELT STAFF WERE RESPECTFUL OF THEIR CULTURE

SPECIAL INITIATIVES

AS A COMMUNITY, WE MUST INVEST OUR RESOURCES EFFICIENTLY AND IN A WAY THAT WILL LEAD TO LONG-TERM CHANGE. UNITED WAY ENGAGES THE COMMUNITY IN A NUMBER OF SPECIAL INITIATIVES THAT BRING PEOPLE AND RESOURCES FROM ACROSS THE COMMUNITY TOGETHER. WE WORK TOGETHER TO SET PRIORITIES AND BUILD STRATEGIES THAT DRIVE LONG-TERM CHANGE. WE DO THIS THROUGH A NUMBER OF SPECIAL INITIATIVES IN OUR STRATEGIC ISSUE AREAS OF HEALTH, EDUCATION, AND FINANCIAL STABILITY.

HEALTH INITIATIVES

HEALTHY BIRTH OUTCOMES

IMPROVES BIRTH OUTCOMES TO ENSURE BABIES LIVE TO SEE THEIR FIRST BIRTHDAY

HEALTH IMPROVEMENT FUND

INCREASES COVERAGE, ACCESS, CARE COORDINATION, AND COMMUNITY HEALTH IN

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MILWAUKEE

HEALTHY YOUTH

REDUCES TEEN PREGNANCY, SEXUAL VIOLENCE, AND VICTIMIZATION FOR YOUNG PEOPLE OF ALL GENDERS.

TEEN PREGNANCY PREVENTION

IMPROVES THE SEXUAL AND REPRODUCTIVE HEALTH OF YOUNG PEOPLE IN MILWAUKEE

EDUCATION INITIATIVES

BUILD MY BOOKSHELF

WAUKESHA IMPROVES LITERACY BY HELPING CHILDREN IN HIGH-NEED WAUKESHA COUNTY SCHOOLS BUILD THEIR HOME LIBRARIES.

COMMUNITY SCHOOLS

TRANSFORMS SCHOOLS AND COMMUNITIES TO COLLECTIVELY ENSURE STUDENT SUCCESS.

EMERGING READERS

GIVES THE GIFT OF READING TO LOCAL KIDS WHO ARE MATCHED WITH UNITED WAY EMERGING LEADERS FAMILIES WHO PROVIDE AGE APPROPRIATE READING MATERIALS FOUR TIMES A YEAR.

HELPING KIDS SUCCEED

SUPPORTS EDUCATORS, INCREASES STUDENT ACHIEVEMENT, AND ENHANCES FAMILY STABILITY AND EMPOWERMENT IN THE SCHOOL DISTRICT OF WAUKESHA'S HIGHEST-NEED SCHOOLS.

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MILWAUKEE SUCCEEDS-KINDERGARTEN READINESS PARTNERSHIP
HELPS CHILDREN REACH THEIR HIGHEST LEVEL OF SCHOOL READINESS BEFORE
THEY START KINDERGARTEN THROUGH INCREASED QUALITY EARLY CHILDHOOD
EDUCATION, QUALITY CHILD CARE, DEVELOPMENTAL SCREENING AND EARLY
CHILDHOOD IMMUNIZATIONS.

MY VERY OWN LIBRARY
BUILDS STRONG READERS BY PROVIDING FREE BOOKS AND FAMILY ENGAGEMENT
ACTIVITIES AT 14 MILWAUKEE PUBLIC SCHOOLS.

FINANCIAL STABILITY INITIATIVES
FINANCIAL EMPOWERMENT FOR WOMEN
PROVIDES EDUCATIONAL TOOLS AND RESOURCES THAT ASSIST WOMEN IN PLANNING
THEIR FINANCIAL FUTURE.

FUND MY FUTURE MILWAUKEE (CHILDREN'S SAVINGS ACCOUNTS)
RAISES CHILDREN'S EXPECTATIONS FOR THEIR FUTURE BY SEEDING AN
EDUCATIONAL SAVINGS ACCOUNT STARTING IN KINDERGARTEN FOR ALL MILWAUKEE
STUDENTS.

REDUCING BARRIERS TO EMPLOYMENT AND ADVANCEMENT
STRATEGIES FOCUSING ON AFRICAN-AMERICANS IN THE AREAS OF EDUCATION,
TRAINING, CREDENTIALS, TRANSPORTATION, ASSISTANCE FOR INVOLVEMENT IN
THE JUSTICE SYSTEM, AND DIVERSE TALENT RETENTION STRATEGIES.

SAFE & STABLE HOMES: ENDING FAMILY HOMELESSNESS
ENDING FAMILY HOMELESSNESS IN OUR FOUR-COUNTY REGION BY MOVING FAMILIES

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INTO PERMANENT HOMES, ENSURING FAMILIES STAY STABLY HOUSED, AND
PREVENTING FAMILY HOMELESSNESS.

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VOLUNTEER ENGAGEMENT

UNITED WAY PROVIDES MULTIPLE WAYS FOR COMMUNITY MEMBERS TO ENGAGE BY
INVITING INDIVIDUALS, BUSINESSES AND COMMUNITY ORGANIZATIONS TO LIVE
UNITED BY GIVING, ADVOCATING AND VOLUNTEERING. IN 2019, UNITED WAY OF
GREATER MILWAUKEE & WAUKESHA COUNTY MOBILIZED MORE THAN 43,000
VOLUNTEER HOURS VALUED AT MORE THAN \$1,097,000.

VOLUNTEERING THROUGH UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY
IS A GREAT WAY TO GIVE BACK, WHILE GETTING INVOLVED IN HELPING SOME OF
THE MOST IMPORTANT ISSUES FACING OUR COMMUNITY TODAY. WE BELIEVE
STRATEGIC VOLUNTEERISM MULTIPLIES THE POSITIVE IMPACT OF UNITED WAY'S
FINANCIAL INVESTMENTS AND HAS THE POTENTIAL TO IMPROVE RESULTS IN THE
AREAS OF EDUCATION, FINANCIAL STABILITY AND HEALTH. AVAILABLE
OPPORTUNITIES INCLUDE:

*ON-SITE PROJECTS: VOLUNTEERS CAN DO GOOD WITHOUT EVEN LEAVING THEIR
OFFICE BY HOSTING KIT PACKING EVENTS TO PREPARE CARE PACKAGES FOR
INDIVIDUALS AND FAMILIES.

*IN THE COMMUNITY: VOLUNTEERS CAN ROLL UP THEIR SHIRT SLEEVES AT A
UNITED WAY FUNDED PROGRAM BY READING BOOKS TO LOCAL CHILDREN, PLAYING
BOARD GAMES WITH OLDER ADULTS, HELPING TO HARVEST A COMMUNITY GARDEN,

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OR PREPARING AND SERVING MEALS AT A LOCAL SHELTER. UNITED WAY ALSO SUPPORTS SEVERAL COMMUNITY EVENTS WITH THE POWER OF VOLUNTEERISM SUCH AS PROJECT HOMELESS CONNECT, BACKPACK COALITION, AND MY VERY OWN LIBRARY.

*SKILL-BASED: VOLUNTEERS CAN USE THEIR PROFESSIONAL TALENTS TO HELP LOCAL COMMUNITY MEMBERS BY SERVING AS BUDGETING, RESUME, OR INTERVIEW COACHES.

*SUPPLY DRIVES: VOLUNTEERS CAN HOST A COLLECTION DRIVE TO SUPPORT OUR COMMUNITY. REQUESTED ITEMS ROTATE SEASONALLY AND INCLUDE SCHOOL SUPPLIES, WINTER APPAREL, HEALTH AND HYGIENE ITEMS, AND MORE.

TO FOCUS ON THE HEALTH AND SAFETY OF OUR COMMUNITY, UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY HAS ADAPTED VOLUNTEER OFFERINGS IN RESPONSE TO COVID-19 IN 2020. THOSE OPPORTUNITIES INCLUDE:

VIRTUAL & REMOTE: OFFERING A VARIETY OF MEANINGFUL EXPERIENCES VOLUNTEERS CAN DO FROM HOME.

ON-SITE AT THE WORKPLACE: FACILITATING KIT AND RESOURCE PACKING VOLUNTEER PROJECTS FOR SMALL GROUPS AT ESSENTIAL WORKPLACES AND/OR THOSE WANTING ON-SITE EXPERIENCES.

IN THE COMMUNITY: SAFELY CONNECTING INDIVIDUALS AND SMALL GROUPS TO URGENT PROJECT NEEDS AT OUR AGENCY PARTNERS AND COMMUNITY ORGANIZATIONS.

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FAMILY ENGAGEMENT EFFORTS: RALLYING FAMILIES TO MAKE A DIFFERENCE TOGETHER WITH OPTIONS FOR THE WHOLE FAMILY TO GET INVOLVED REMOTELY AND IN THE COMMUNITY.

FORM 990, PART III, LINE 4C

GRANTS

BUILD SHERMAN PARK

MILWAUKEE'S SHERMAN PARK NEIGHBORHOOD, LONG ASSOCIATED WITH THE SYSTEMIC INEQUITIES ITS RESIDENTS EXPERIENCE, IS POISED FOR REBIRTH. BUILD SHERMAN PARK WILL ENGAGE COMMUNITY MEMBERS AROUND THE MILWAUKEE BLUEPRINT FOR PEACE, A COMMUNITY-DRIVEN AGENDA FOR ADDRESSING THE COMPLEX FACTORS THAT DRIVE VIOLENCE IN OUR CITY.

UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY AND PARTNERS ASCENSION WISCONSIN, CITY OF MILWAUKEE HEALTH DEPARTMENT'S OFFICE OF VIOLENCE PREVENTION, AND THE SHERMAN PARK NEIGHBORHOOD ASSOCIATION, INC. HAVE RECEIVED THE BUILD HEALTH CHALLENGE AWARD.

THE AWARD PROVIDES \$250,000 IN FUNDING AND ADDITIONAL RESOURCES TO SUPPORT COMMUNITY-DRIVEN STRATEGIES IN THE SHERMAN PARK NEIGHBORHOOD. THE OVERALL OBJECTIVES OF THE PROJECT ARE TO INCREASE RESIDENT WELL-BEING AND PREVENT VIOLENCE.

IN ADDITION, ASCENSION WISCONSIN HAS COMMITTED TO PROVIDE \$336,000 IN MATCHING SUPPORT TO ENSURE THE PROJECT'S SUCCESS.

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COMMUNITY SCHOOLS

THE MILWAUKEE COMMUNITY SCHOOLS PARTNERSHIP (MCSP) IS A STRATEGY IMPLEMENTED BY MILWAUKEE PUBLIC SCHOOLS AND UNITED WAY TO TRANSFORM THE WAY A SCHOOL INTERACTS WITH ITS STUDENTS, THEIR FAMILIES AND THE SURROUNDING COMMUNITY TO BETTER SUPPORT ALL THE NEEDS OF A CHILD.

THE COMMUNITY SCHOOLS MODEL WORKS TO INCREASE A SCHOOL'S CAPACITY TO GROW STRONG PARTNERSHIPS WITH ITS SURROUNDING COMMUNITY AND BETTER

ENGAGE AND ALIGN RESOURCES CENTERED ON THE SELF-IDENTIFIED, REAL-TIME NEEDS OF COMMUNITIES. OUR STRATEGY PLACES THE FOCUS ON THE WHOLE CHILD, WITH THE UNDERSTANDING THAT A CHILD BELONGS TO A FAMILY, AND THAT FAMILY LIVES AND INTERACTS WITHIN A LARGER COMMUNITY.

CURRENT MCSP SCHOOLS (AUER AVENUE SCHOOL, BRADLEY TECH, HOPKINS-LLOYD COMMUNITY SCHOOL AND JAMES MADISON ACADEMIC CAMPUS) MAY HAVE DIFFERENT FOCUSES AND ACTIVITIES TO IMPROVE THEIR SCHOOLS AND COMMUNITIES, BUT ALL SHARE CORE CHARACTERISTICS:

* A SHARED VISION THAT INTEGRATES INTO THE WORK OF THE SCHOOL AND ALL PARTNERS.

* DEMONSTRATED LONG-TERM COMMITMENT AND SHARED OWNERSHIP AS EVIDENCED BY A PARTNERSHIP AGREEMENT SIGNED BY THE SCHOOL, DISTRICT, AND LEAD PARTNER AGENCY.

* A FULL-TIME COMMUNITY SCHOOL COORDINATOR HIRED BY A NON-PROFIT PARTNER AND PLACED IN THE SCHOOL TO ASSESS, ALIGN, AND SUPPORT PROGRAMS AND RESOURCES TO ACHIEVE THE SHARED VISION.

* LOCAL DECISION-MAKING REGARDING THE SHARED VISION AND PRIORITIES OF THE COMMUNITY SCHOOL.

THIS DECISION-MAKING HAPPENS THROUGH A SCHOOL-LEVEL ADVISORY COMMITTEE,

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FACILITATED BY THE COMMUNITY SCHOOL COORDINATOR AND SCHOOL PRINCIPAL.

* USE OF DIVERSE KNOWLEDGE TO INFORM THE SHARED VISION AND LOCAL DECISIONS. THIS KNOWLEDGE IS OBTAINED THROUGH IMPLEMENTATION OF THE MCSP SCAN, A MULTI-COMPONENT TOOL THAT COMBINES ACADEMIC, HEALTH, AND SAFETY DATA WITH AN ASSET MAP AND LIVED-EXPERIENCE NARRATIVE FROM STUDENTS, SCHOOL STAFF, PARENTS AND COMMUNITY MEMBERS.

* CULTURAL RELEVANCE WITHIN AND OUTSIDE OF THE SCHOOL DAY THAT RESPONDS TO THE SELF-IDENTITIES OF STUDENTS, PARENTS, SCHOOL STAFF, AND COMMUNITY MEMBERS.

* A FOCUS ON EQUITY THAT PERMEATES ALL ACTIVITIES OF THE COMMUNITY SCHOOL TO ENSURE THAT STUDENTS, PARENTS, SCHOOL STAFF, AND COMMUNITY MEMBERS ALL HAVE THE SAME OPPORTUNITIES AND ACCESS TO RESOURCES TO HELP THEM SUCCEED.

SUCCESSFUL IMPLEMENTATION OF A COMMUNITY SCHOOLS MODEL HAS BEEN PROVEN ACROSS THE COUNTRY TO IMPROVE CLIMATE AND CULTURE, ACADEMIC ACHIEVEMENT, AND INVESTMENT IN LOCAL NEIGHBORHOODS. HERE IN MILWAUKEE, WE ARE DIRECTLY WORKING TO IMPROVE:

* STUDENT ATTENDANCE AND ACADEMIC ENGAGEMENT.
* LEVELS OF TRUST BETWEEN SCHOOL, FAMILY AND BROADER COMMUNITY.
* ALIGNED SCHOOL AND COMMUNITY PARTNERSHIPS TO SUPPORT STUDENT SUCCESS.

* THE 2015-2016 SCHOOL YEAR WAS THE FIRST FULL YEAR OF IMPLEMENTATION FOR THE MCSP. BROWNING ELEMENTARY, LINCOLN AVENUE SCHOOL AND SOUTH DIVISION HIGH SCHOOL HAVE BEEN ADDED FOR THE 2016-17 SCHOOL YEAR AND LONGFELLOW SCHOOL WAS ADDED IN 2017-2018 BRINGING THE TOTAL NUMBER OF SCHOOLS IN THE PARTNERSHIP TO EIGHT.

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PROJECT LIFELINE, TEEN PREGNANCY PREVENTION GRANT

THE BOYS AND GIRLS CLUBS OFFICE ON ADOLESCENT HEALTH TEEN PREGNANCY PREVENTION (BGC GM TPP) GRANT SPECIFICALLY REACHES YOUTH IN TARGET ZIP CODES (53204, 53206, 53208, 53210, 53212, AND 53215) THROUGH IN-SCHOOL, AFTERSCHOOL, COMMUNITY-BASED AND HOUSE OF CORRECTIONS OUTREACH USING EVIDENCE-BASED COMPREHENSIVE AND ABSTINENCE-BASED SEXUAL HEALTH CURRICULA, SERVING OVER 3,000 YOUTH PER YEAR.

THE BGC GM TPP GRANT ALSO BRINGS TOGETHER A COMMUNITY ADVISORY COMMITTEE FOR INFORMATION SHARING AND TRAINING, A YOUTH LEADERSHIP COUNCIL MADE UP OF YOUTH FROM THE TARGET ZIP CODES TO ADVISE US ON STRATEGIES FOR THE GRANT, YOUTH FRIENDLY HEALTH & RESOURCE FAIRS ON THE NORTH AND SOUTH SIDES OF MILWAUKEE, A COMMUNITY-WIDE YOUTH SYMPOSIUM, AND WILL UTILIZE THE EXISTING BABYCANWAIT.COM WEBSITE AND SOCIAL MEDIA OUTLETS TO REACH YOUTH WITH MEDICALLY ACCURATE INFORMATION.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

DONOR DIRECTED DESIGNATIONS TO SPECIFIC MEMBER AND NON-MEMBER AGENCIES TO ADDRESS DONOR PERCEIVED COMMUNITY NEEDS.

EXPENSES \$ 24,538,362. INCL GRANTS OF \$ 24,538,362. REVENUE \$ 453,659.

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

THE BYLAWS ALLOW FOR DELEGATION OF AUTHORITY TO THE EXECUTIVE COMMITTEE WHICH ONLY INCLUDES BOARD MEMBERS.

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

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MEMBERS OF UNITED WAY OF GREATER MILWAUKEE & WAUKESHA'S EXECUTIVE AND AUDIT COMMITTEE REVIEWED FORM 990 PRIOR TO FILING.

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

UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY STAFF, BOARD OF DIRECTORS AND COMMITTEE MEMBERS ARE REQUIRED TO ANNUALLY READ AND SIGN THE CODE OF PROFESSIONAL ETHICS DOCUMENT. NEW EMPLOYEES ARE ALSO REQUIRED TO SIGN A CONFIDENTIALITY DOCUMENT.

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

UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY STAFF, BOARD OF DIRECTORS AND COMMITTEE MEMBERS ARE REQUIRED TO ANNUALLY READ AND SIGN THE CODE OF PROFESSIONAL ETHICS DOCUMENT. NEW EMPLOYEES ARE ALSO REQUIRED TO SIGN A CONFIDENTIALITY DOCUMENT.

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

AN EXECUTIVE REVIEW COMMITTEE COMPRISED OF MEMBERS OF THE BOARD EVALUATES THE CEO'S ANNUAL PERFORMANCE AND MAKES RECOMMENDATIONS FOR COMPENSATION ADJUSTMENTS TO THE BOARD.

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

THE GOVERNING DOCUMENTS ARE MADE AVAILABLE ON THE ORGANIZATIONS WEBSITE AND UPON REQUEST.

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

PROVISION FOR UNCOLLECTIBLE PLEDGES -1,849,917.

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OTHER PROGRAM INFORMATION

ACCOUNTABILITY

AT UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY, WE INVEST IN PROGRAMS THAT PRODUCE RESULTS, AT AGENCIES THAT MANAGE THEIR MONEY WISELY. WE HAVE BEEN RECOGNIZED NATIONALLY AND LOCALLY FOR OUR HIGH RATE OF EFFICIENCY. UNITED WAY RECEIVED THE HIGHEST POSSIBLE RATING, 4 STARS, FROM THE LEADING CHARITY WATCHDOG AGENCY, CHARITY NAVIGATOR, AND HAS BEEN A BETTER BUSINESS BUREAU ACCREDITED CHARITY SINCE 2007.

WE INVEST NEARLY 90% OF THE MONEY RAISED IN THE ANNUAL COMMUNITY CAMPAIGN IN THE PROGRAMS WE SUPPORT, FAR EXCEEDING THE 65% MINIMUM CONSIDERED ACCEPTABLE FOR A NONPROFIT TO BE LIVING UP TO ITS MISSION BY CHARITY NAVIGATOR, THE LEADING INDEPENDENT CHARITY EVALUATOR.

IN ADDITION, THOUSANDS OF VOLUNTEERS GIVE GENEROUSLY OF THEIR TIME AND TALENTS TO UNITED WAY EACH YEAR, ALLOWING US TO MINIMIZE COSTS AND KEEP ADMINISTRATIVE AND FUNDRAISING EXPENSES LOW.

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

Department of the Treasury
Internal Revenue Service

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

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. UNITED WAY OF GREATER MILWAUKEE & WAUKESHA COUNTY INC.	Taxpayer identification number (TIN) 39-0806190
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 225 WEST VINE STREET	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. MILWAUKEE, WI 53212	

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

FILIPPO CARINI

- The books are in the care of ▶ **225 W. VINE STREET - MILWAUKEE, WI 53212**
Telephone No. ▶ **414-263-8100** 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 17, 2021**, 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, 2019**, and ending **JUN 30, 2020**.

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.