Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

AF	or the	e 2022 calendar year, or tax year beginning and	enaing		
3 C	heck if pplicabl	C Name of organization		D Employer identifie	cation number
	Addre]	
	Name chang	Doing business as		23-16553	75
]Initial _return	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	E Telephone numbe	r
	Final return	25 N. 2ND STREET, SUITE 101		(610) 68	5-4550
	termin ated	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	15,704,536.
	Amen	READING, PA 19601		H(a) Is this a group re	eturn
	Application	F Name and address of principal officer: TAMMY L. WHITE		for subordinates	
	pendir	SAME AS C ABOVE		H(b) Are all subordinates in	—
ΙT	ax-ex	empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) $4947(a)(1) = 4947(a)(1)$	or 527	1	list. See instructions
	Vebsi			H(c) Group exemptio	
		organization: X Corporation Trust Association Other	L Year		N State of legal domicile; PA
Pa	rt I	Summary	1		
	1	Briefly describe the organization's mission or most significant activities: INSP	IRING	COLLABORATIO	ON ,
Se		VOLUNTEERISM AND FINANCIAL SUPPORT TO BUI			
nan		Check this box if the organization discontinued its operations or dispos			
veri				3	38
Ĝ		Number of independent voting members of the governing body (Part VI, line 1b)			38
∞ 4		Total number of individuals employed in calendar year 2022 (Part V, line 18)			36
ties					1963
Activities & Governance				_	0.
Ac		Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
		Net unrelated business taxable income norm offin 990-1, 1 art i, line 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		12,544,374.	10,296,839.
ine		(5.1)(11.1)		29,978.	79,472.
Revenue				1,677,117.	67,398.
Re		Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		20,187.	21,729.
				14,271,656.	10,465,438.
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		9,802,563.	9,731,595.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
		Benefits paid to or for members (Part IX, column (A), line 4)		2,301,353.	2,356,331.
ses		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		0.	0.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
Ϋ́		Total fundraising expenses (Part IX, column (D), line 25) 1,579,13		1,099,681.	1,664,032.
_		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		13,203,597.	13,751,958.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,068,059.	-3,286,520.
_ v	19	Revenue less expenses. Subtract line 18 from line 12		ginning of Current Year	End of Year
et Assets or nd Balances		T (D		37,493,734.	32,073,316.
SSe Bala	20	Total assets (Part X, line 16)		2,457,808.	4,446,069.
et A Ind	21	Total liabilities (Part X, line 26)		35,035,926.	27,627,247.
Z⊡ Da	rt II	Net assets or fund balances. Subtract line 21 from line 20		33,033,340.	21,021,241.
			and statem	anta and to the heat of my	Linguiladae and balief it is
		Ities of perjury, I declare that I have examined this return, including accompanying schedules			Knowledge and belief, it is
rue,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	licii preparer	las any knowledge.	
		Signature of officer		I Date	
Sigr				Date	
Here	е	TAMMY L. WHITE, PRESIDENT Type or print name and title			
				Date Check	PTIN
		Print/Type preparer's name Preparer's signature T TNDA C HITMEDACK CDA T TNDA C HITMEDACK			
Paid		LINDA S HIMEBACK, CPA LINDA S HIMEBACK	L, CP		
	arer	Firm's name HERBEIN+COMPANY, INC.		Firm's EIN 2	3-2415973
Jse	Only	Firm's address 2763 CENTURY BOULEVARD		a. C1	0 270 1175
_		READING, PA 19610		Phone no. 6 1	0-378-1175
Иay	the IF	RS discuss this return with the preparer shown above? See instructions			X Yes No

Pa	rt III Statement of Program Service Accomplishments
· u	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
•	UNITED WAY OF BERKS COUNTY IMPROVES LIVES BY INSPIRING COLLABORATION,
	VOLUNTEERISM AND FINANCIAL SUPPORT TO BUILD A STRONGER COMMUNITY.
	VOZGITZENI IND I INIMIGINE BOILONI TO BOILD II BINGNOLIN GOLINGINI
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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 X 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 \$11,417,006. including grants of \$9,731,595.) (Revenue \$\$
	MORE THAN 190,000 CHILDREN, FAMILIES AND SENIORS BENEFITTED FROM VITAL
	HEALTH AND HUMAN SERVICES PROGRAMS FUNDED BY UNITED WAY OF BERKS COUNTY
	(UWBC) THROUGHOUT 2022. UWBC'S WORK AND INVESTMENTS FOCUS ON FOUR
	AREAS: EDUCATION, FINANCIAL STABILITY, HEALTH AND SAFETY NET SERVICES.
	SEE ADDITIONAL INFORMATION ON SCH O.
4b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses 11,417,006.
<u> </u>	

11460619 757874 63018.001

Part IV | Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Х
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		x
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
0	, ,	8		x
•	Schedule D, Part III	-		
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?			x
40	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		v	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			T -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	"		
13	·	19		x
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
20a	• •	20a 20b		 ^
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		\vdash
21		04	Х	
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	Λ	<u> </u>

Form 990 (2022) UNITED WAY OF BERKS COUNTY, INC.

Part IV | Checklist of Required Schedules (continued)

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part X. column (A), line 29 / 11 / 1955, complete Schedule (P, Part J. Part M). Bedieved Schedule (P, Part M). Bedieved Sc		Continued)		Yes	No
Part X. column (A), line 27 (**I*res*, "complete Schedule*, Parts* Land III 20 Did the organization succent and former officers, directors, trustees, key employees, and highest compensation of the organization succent and former officers, directors, trustees, key employees, and highest compensated employees? **I***Yes*, "complete Schedule*, Part II.** 24a Did the organization have a tax exempt bond issue with an outstanding principal amount of more than \$100,000 as of the list day of the year, that was issued after December 37, 2002? **I***Yes*, "answer lines 26b through 26b and complete Schedule K. If **I**O**," go to live 25a 25b Did the organization meets any proceeds of tax exempt bonds beyond a temporary period exception?** 26c Did the organization meets are an excrow account other than a refunding secrow at any time during the year? **24d	22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		163	110
23 Del 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, trustess, key employees, and highest compensated employees? 24 Press, "complete Schedule I." 25 Del 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 Decomber 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule II. If "Yos," to line 25a 26 Do the the organization minister and escrive account of the than a returning secrow at any time during the year to defease any tax-exempt bonds? 26 Do the organization maintain an escrive account of the than a returning secrow at any time during the year to defease any tax-exempt bonds? 27 Do the organization acts as an 'no hethalf of issuer for bonds outstanding at any time during the year? 28 Section 50(16), 501(16), 4 and 501(12)90 organizations. Did for egiphatic mengage in an excess benefit transaction with a disquilified person during the year? If "Yes," complete Schedule I. Part I 28 Is the organization avaire that it engaged in an excess benefit transaction with a disquilified person during the year? If "Yes," complete Schedule I. Part I 28 Is the organization avaire that it engaged in an excess benefit transaction with a disquilified person in a prior year, and that the transaction has not been reported on any of the organizations prior Forms 900 or 900-E27 If "Yes," complete Schedule I. Part II 28 Is the organization avaire that it engaged in an excess benefit transaction with a disquilided person in a prior year, and that the transaction has not been reported on any of the especial contributor or 50 and yoursent or former officer, director, trustes, key employee, creator or founder, substantial contributor or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule I. Part III 28 Is a contribution of a policy prior transaction with or of t			22		Х
and former officers, directions, fusteens, key employees, and highest compensated employees? If "Yes," complete Schedule II. Part IV. 24a Old 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 yea, in that was subused after December 31, 2002? If "Yes," answer lines 26b through 26d and complete Schedule II. If "No." go to line 25a. 25b Did the organization maintain an excrew account other than a refuturing scrow at any time during the year to defease any tax exempt bonds? 26c Did the organization maintain an excrew account other than a refuturing scrow at any time during the year to defease any tax exempt bonds? 26d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 26d Did the organization accounts as an "on behalf of" issuer for bonds outstanding at any time during the year? 26d Did the organization account of the "issuer for bonds outstanding at any time during the year? 26d Did the organization accounts as an "on behalf of" issuer for bonds outstanding at any time during the year? 26d Did the organization accounts an "on behalf of" issuer for bonds outstanding at any time during the year? 26d Did the organization and the engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction with a disqualified person in a prior year, and that the transaction with an off break Schedule L, Part II. 27d 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 founder, substantial contributor, or 35% controlled entity or founder, substantial contributor? If Yes, complete Schedule L, Part IV. 28d Did the organization expended and a barries are standard to substantial contributor? If Yes, complete Schedule L, Part IV. 28e X. Yes, complete Schedule L, Part I	23				
Schedule / White 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? // "Yes," answer lines 24b through 24d and complete Schedule K. If "No." go to line 25a. b Did the organization mivest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrivo account other than a refunding secret was any time during the year to defease any tax exempt bonds? d Did the organization are at as an "on behalf or" issuer for bonds outstanding at any time during the year? d Did the organization are at as an "on behalf or "issuer for bonds outstanding at any time during the year? d Did the organization are that it engaged in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I is 18b the organization aware that it engaged in an excess benefit transaction has not been reported on any of the organization's prior Forms 990 or 990-E27 // "Yes," complete Schedule L, Part I is 18b the organization are port any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officier, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II is 20 bit the organization proprie as plant or other assistance to any current or former officier, director, trustee, key employee, creator or founder, substantial contributor or employee thereof any of transperson or founder, or substantial contributor? If "Yes," complete Schedule L, Part II is 27 bit A substantial contributor or employee thereof any of transperson or founder, or substantial contributor? If "Yes," complete Schedule L, Part II is 28b X. X and					
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24th through 24d and complete Schedule K. If "No," go to line 25a D Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24b			23	Х	
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b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule I., Part I 25b X 25b 25b X 25b 25			24d		
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that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? // "Yes," complete Schedule L, Part I		, , ,	25a		<u> </u>
Schedule L, Part I 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 33% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization period a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III 27 X 28 Was the organization applicable filing thresholds, conditions, and exceptions; a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28b X b A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 30 X 31 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M, Part II 31 X 32 Did the organization inquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part II 32 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule N, Part II 32 X 34 Was the organization related to any tax-exempt from ore negage in any transaction with a controlled entity within the meaning of section \$12(b)(13)? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 34 X 35a Did the organization have a controlled entity within the meaning of section \$12(b)(13)? If "Yes,"	b				
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part II 27 X 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV 27 X 28 Was the organization aparty to a business transaction with one of the following parties (see the Schedule L, Part IV 28 X 28 A C report of former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28 X 28 C A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV 28c X 29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 X 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule N, Part I 31 X 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I 31 X 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part I, III, or IV, and Part V, line 1 32 X 33 Did the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part I, III, or IV, and Part V, line 1 34 X 34 Was the organizatio			٥		v
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If "Yes," complete Schedule R, Part V, line 2 36	36	• • • • • • • • • • • • • • • • • • • •			
Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Check if Schedule O contains a response or note to any line in this Part V 10 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V 11 Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 12 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 13 C Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 12 X			36		X
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V The image of the part of the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? The image of the part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to complete Schedule O for Part VI, lines 11b and 19? All Form 990 filers are required to com	37				
Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? 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 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
Check if Schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a response or note to any line in this Part V The schedule O contains a respect to any line in this Part V The schedule O contains a respect to any line in this Part V	38				
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 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X			38	Х	
Ta Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? Yes No Yes No 1a	Par				
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 34 b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0 c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X		Check if Schedule O contains a response or note to any line in this Part V			ـــــــــــــــــــــــــــــــــــــــ
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 1c X			-		
(gambling) winnings to prize winners?		Enter the number of refine WZa metadad of line 14. Enter 6 if not applicable	-		
	С	(mandational descriptions)	4.	y	
	22200				(2022)

Form 990 (2022) UNITED WAY OF BERKS COUNTY, INC.

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	36			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	•	2b	Х	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accou	nt)?	4a		Х
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 A	ccour	nts (FBAR).			
5а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transa	ction?		5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribute	ions o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	rvices	provided to the payor?	7a		_X_
b	•			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as req	uired			7.7
	to file Form 8282?	 I	 T	7с		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	_7d	•	_		37
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c		xt?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		200	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations received a contribution of cars, boats, airplanes, or other vehicles, did the organizations are interested funds. Did a dance of the desirable contributions are interested funds.			7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained sponsoring organization have excess business holdings at any time during the year?	•		8		
9	Sponsoring organizations maintaining donor advised funds.			0		
а	Did the appropriate appropriation makes any total distributions and a continue 10000			9a		
b	Did the constraint and a distribution to a decomplete of the constraint and the constrain			9b		
10	Section 501(c)(7) organizations. Enter:			0.0		
а	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:		•			
а	Gross income from members or shareholders	11a				
	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041	?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the	1	1			
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				
14a				14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					7.7
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					37
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	t inco	me?	16		X
4-	If "Yes," complete Form 4720, Schedule O.	40	_			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

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Form **990** (2022)

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

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 38			
	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 38			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
_	officer director trustee or key employee?	2	х	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
·	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6		6		X
7a	Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
<i>1</i> a		7a		Х
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1 a		- 21
b		7b		Х
	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0		-25
8		0-	х	
a	The governing body?	8a_	X	
b	Each committee with authority to act on behalf of the governing body?	8b		
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	9		Х
Sec	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		- 21
000	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)		Yes	No
100	Did the organization have local chapters, branches, or affiliates?	10a	162	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	IUa		- 21
D		10b		
115	and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.	Ha		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	120		
·		12c	х	
13	on Schedule O how this was done Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent	17		
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	х	
	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	.55		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
iou	taxable entity during the year?	16a		Х
h	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	iou		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed PA			
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	onlv)	availah	ole
	for public inspection. Indicate how you made these available. Check all that apply.	,/		-
	X Own website X Another's website X 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	financ	cial	
	statements available to the public during the tax year.		ui	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
_5	MONICA RUANO-WENRICH - (610) 685-4550			
	25 N. 2ND STREET, SUITE 101, READING, PA 19601			

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

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

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

(A)	(B)	I	mza		<u> </u>	ipci	iout	(D)	(E)	(F)
Name and title	Average	(do		Pos	ition) than (one	Reportable	Reportable	Estimated
	hours per					s both or/trus		compensation	compensation	amount of
	week (list any							from the	from related organizations	other compensation
	hours for	r direc				ped		organization	(W-2/1099-MISC/	from the
	related	stee o	rustee		a.	pensa		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below	ual tru	ional 1		ploye	t com		1099-NEC)		and related
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) TAMMY L. WHITE	37.50		_			1				
PRESIDENT				Х				183,064.	0.	23,451.
(2) MONICA RUANO-WENRICH	37.50									
SR VP FINANCE & ADMIN				Х				110,620.	0.	18,322.
(3) JEAN MORROW	37.50									
SR VP LEADERSHIP UNITED				Х				107,015.	0.	11,510.
(4) SHEILA TULLI	37.50	<u> </u>								
VP RESOURCE DEVELOPMENT				Х				93,426.	0.	18,032.
(5) ASHLEY CHAMBERS	37.50	1								
SR VP COMMUNITY IMPACT	 			Х				93,969.	0.	11,941.
(6) CHRIS SPANIER	37.50	1								
VP MARKETING & COMMUNICATIONS				Х				89,360.	0.	11,215.
(7) SCOTT REHR	1.00	ļ								
CHAIR	1	Х		Х				0.	0.	0.
(8) JONI NAUGLE	1.00	ļ								
VICE CHAIR	1 00	Х	_	Х				0.	0.	0.
(9) CHRISTINA WEEBER	1.00	٠,,		.,						
SECRETARY/TREASURER	1 00	Х		Х				0.	0.	0.
(10) RUTHANN WOLL	1.00	٠,,		3,7						
ASST. SECRETARY/TREASURER	1 00	Х	_	Х				0.	0.	0.
(11) SARA AULESTIA	1.00	·								
DIRECTOR (12) TOWN DODG	1.00	Х						0.	0.	0.
(12) JOHN BOBO DIRECTOR	1.00	х						0.	0.	_
(13) DAVID CAPITANO	1.00	Α						1	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(14) BRUCE COLE	1.00							1	0.	<u>_ </u>
DIRECTOR	1.00	х						0.	0.	0.
(15) PETER CONNORS	1.00							'.		•
DIRECTOR	1.30	х						0.	0.	0.
(16) SANTINA CONNORS	1.00	† 								
DIRECTOR		х						0.	0.	0.
(17) KELLEY CROZIER, M.D.	1.00	1						1		
DIRECTOR		Х						0.	0.	0.
232007 12-13-22	•			•		-				Form 990 (2022)

232007 12-13-22

Form **990** (2022)

Form 990 (2022) UNITED W	AY OF BE	ERK	S	СО	UN	ΤY	,	INC.	23-1655	375	Pa	age 8
Part VII Section A. Officers, Directors, Tru	stees, Key Em	oloy	ees,	and	Hiç	ghes	t Co	ompensated Employee	s (continued)			
(A)	(B)			(0	C)			(D)	(E)		(F)	
Name and title	Average hours per week (list any	box	, unle	Pos heck i ss per nd a di	more son is	than o	n an	Reportable compensation from	Reportable compensation from related	am	timate nount o other	of
	hours for related organizations below line)	Individual trustee or director	In stit utional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	fro orga and	pensatom the anization of the second the sec	e on ed
(18) MICHAEL DUFF	1.00											
DIRECTOR		Х						0.	0.			0.
(19) RICHARD EHST	1.00											
DIRECTOR		Х						0.	0.			0.
(20) ROBERT FIRELY	1.00											
DIRECTOR		Х						0.	0.			0.
(21) STEVEN FISHER	1.00											
DIRECTOR		Х						0.	0.			0.
(22) ROBERT GOONAN	1.00											
DIRECTOR		Х						0.	0.			0.
(23) TERRY GRASSLEY	1.00											
DIRECTOR		Х						0.	0.			0.
(24) BRADLEY HALL	1.00											
DIRECTOR		Х						0.	0.			0.
(25) JOSEPH HARTZ	1.00											
DIRECTOR		Х						0.	0.			0.
(26) VICTORIA HAWKINS	1.00											
DIRECTOR		Х						0.	0.			0.
1b Subtotal								677,454.	0.	94	1,47	-
c Total from continuation sheets to Part \	II, Section A							0.	0.			0.
d Total (add lines 1b and 1c)								677,454.	0.	94	1,47	<u>/1.</u>
2 Total number of individuals (including but	not limited to th	ose	liste	d ab	ove) wh	o re	ceived more than \$100,0	000 of reportable			
compensation from the organization												3
											Yes	No
3 Did the organization list any former office	r, director, trust	ee, k	сеу с	empl	oye	e, or	high	nest compensated empl	oyee on			
line 1a? If "Yes," complete Schedule J for	such individual									3		X
4 For any individual listed on line 1a, is the s												
and related organizations greater than \$15										4	Х	
5 Did any person listed on line 1a receive or									lual for services			
rendered to the organization? If "Yes," co.	mplete Schedule	e J f	or sı	ıch r	oers	on .				5		Х
Section B. Independent Contractors												
1 Complete this table for your five highest c	ompensated inc	depe	nde	nt co	ontra	acto	s th	at received more than \$	100,000 of compensa	tion fro	m	

the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	NONE	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than

Form **990** (2022)

Form 990 UNITED WA	AY OF BE	RK	S.	CO	UN	TY	,	INC.	23-165	5375
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	nplo	yee	s, ar	nd H	lighe	est (Compensated Employe	es (continued)	
(A)	(B)							(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(с	heck	all t	that	арр	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	_				oyee		the	organizations	compensation
	(list any	or director				empl		organization	(W-2/1099-MISC)	from the
	hours for related	e or d	tee			sated		(W-2/1099-MISC)		organization and related
	organizations	truste	al trus		yee	m pen				organizations
	below	Individual trustee	Institutional trustee	er	Key employee	Highest compensated employee	er			
	line)	Indiv	Instit	Officer	Key 6	High	Former			
(27) ANNETTE HINES	1.00									
DIRECTOR		Х						0.	0.	0.
(28) JASON HOERR	1.00									
DIRECTOR		Х						0.	0.	0.
(29) JOANNE JUDGE	1.00									
DIRECTOR		Х						0.	0.	0.
(30) MICHAEL KRUT	1.00									
DIRECTOR		Х						0.	0.	0.
(31) DR. SUSAN LOONEY	1.00									
DIRECTOR		Х						0.	0.	0.
(32) DR. JOSEPH MACHAROLA	1.00									
DIRECTOR		Х						0.	0.	0.
(33) NICK MARMONTELLO	1.00									
DIRECTOR		Х						0.	0.	0.
(34) MISSY ORLANDO	1.00									
DIRECTOR		Х						0.	0.	0.
(35) RENDY ORTIZ	1.00								_	_
DIRECTOR		Х						0.	0.	0.
(36) CRAIG PERROTY	1.00									_
DIRECTOR		Х						0.	0.	0.
(37) SUE PERROTY	1.00	ļ							•	•
DIRECTOR	1 00	Х						0.	0.	0.
(38) FRANCIS POST	1.00								•	•
DIRECTOR	1 00	Х						0.	0.	0.
(39) ROBERTO SANCHEZ	1.00	.,							0	0
DIRECTOR	1 00	Х						0.	0.	0.
(40) ENGUITA MAITE TENA	1.00	. ,							0	0
DIRECTOR (41) DAVID SYDNER	1 00	Х						0.	0.	0.
(41) DAVID TURNER	1.00	.							0	_
DIRECTOR (42) PATRICK VELEKEI	1.00	Х						0.	0.	0.
DIRECTOR	1.00	х						0.	0.	n
(43) KAREN WANG M.D.	1.00	^						0.	0.	0.
DIRECTOR	1.00	х						0.	0.	0.
(44) KIM WOERLE	1.00	25				\vdash	-	0.	0 •	· · ·
DIRECTOR	1.00	Х						0.	0.	0.
									•	•
		1								
		1								
	•						•			
Total to Part VII, Section A, line 1c										
, ,								•		

Form 990 (2022) UNITED
Part VIII Statement of Revenue

			Check if Schedule O contains a	response o	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded from tax under
							function revenue	business revenue	sections 512 - 514
တ္ထ	1	_	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts			Membership dues	1b					
جَ ق			Fundraising events	1c					
ffs,			Related organizations	1d					
ig ig					7,644.				
Sir			Government grants (contributions)	1e	7,044.				
utic er		T	All other contributions, gifts, grants, and	I I	10 280 105				
들 된			similar amounts not included above \dots	1f	10,289,195. 225,195.				
on		_	Noncash contributions included in lines 1a-1f	1g \$	223,193.	10 206 920			
<u>0</u> 8		n	Total. Add lines 1a-1f		B	10,296,839.			
			TD1 T11116 TDD6		Business Code	50 450	TO 450		
Se	2	а	TRAINING FEES		611430	79,472.	79,472.		
e Z		b							
S c		С							
e a		d							
Program Service Revenue		е							
4		f	All other program service revenue						
		g	Total. Add lines 2a-2f			79,472.			
	3		Investment income (including divider	nds, intere	st, and				
			other similar amounts)			579,625.			579,625.
	4		Income from investment of tax-exem						
	5		Royalties						
			(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
			Less: rental expenses 6b						
			Rental income or (loss) 6c						
			Net rental income or (loss)						
			` '	ecurities	(ii) Other				
	•	_		726,871.	. ,				
		h	Less: cost or other basis	,					
ø		~		239,098.					
nue		_		512,227.					
eve			Net gain or (loss)			-512,227.			-512,227.
her Revenue			Gross income from fundraising events (r			922,227.			012,227.
	0	а		_					
Ò				of					
			contributions reported on line 1c). So						
		L-	Part IV, line 18						
			Less: direct expenses						
			Net income or (loss) from fundraising						
	9	d	Gross income from gaming activities						
			Part IV, line 19						
			Less: direct expenses						
			Net income or (loss) from gaming ac						
	10	а	Gross sales of inventory, less returns						
			and allowances						
			Less: cost of goods sold						
-		С	Net income or (loss) from sales of inv	ventory					
က္					Business Code				
e e	11		ADMINISTRATION FEES		561000	10,958.	10,958.		
lan en		b	MISCELLANEOUS		900099	10,771.	10,771.		
Miscellaneous Revenue		С							
Mis		d	All other revenue						
		е	Total. Add lines 11a-11d			21,729.			
	12		Total revenue. See instructions	<u></u>	<u></u>	10,465,438.	101,201.	0.	67,398.

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 (**D**)
Fundraising (C) Management and general expenses Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 9,731,595. 9,731,595. and domestic governments. See Part IV, line 21 Grants and other assistance to domestic individuals. See Part IV, line 22 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 771,925. 350,772. 193,089. 228,064. trustees, and key employees Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,196,798. 433,638. 252,931. 510,229. Other salaries and wages 7 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 248,408. 81,204. 56,906. 110,298. Other employee benefits 9 139,200. 56,749. 30,569. 51,882. 10 Payroll taxes 11 Fees for services (nonemployees): Management Legal 21,700. 9,700. 2,403. 9,597. Accounting Lobbying Professional fundraising services. See Part IV, line 17 69,222. 24,712. 14,066. 30,444. Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 585,757. 64,845. 261,845. 259,067. column (A), amount, list line 11g expenses on Sch O.) 131,542. 14,286. 144. 117,112. Advertising and promotion 12 107,191. 91,803. 2,484. 12,904. Office expenses 13 Information technology 14 Royalties 15 56,876. 154,910. 63,919. 34,115. 16 Occupancy 9,324. 5,262. 867. 3,195. 17 Payments of travel or entertainment expenses 18 for any federal, state, or local public officials Conferences, conventions, and meetings 19 20 Payments to affiliates 285,941. 186,210. 39,353. 60,378. 21 142,259. <u>30,</u>585. 58,698. 52,976. Depreciation, depletion, and amortization 22 24,353. 8,929. 5,973. 9,451. 23 Other expenses. Itemize expenses not covered 24 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.) 60,971. 10,613. 19,069. 31,289. MISCELLANEOUS EXPENSES UW SPONSORED MEETINGS 44,693. 19,594. 1,369. 23,730. 7,477. 7,051. EQUIPMENT RENTAL & MAIN 26,169. 11,641. С d All other expenses 13,751,958. 11,417,006. 755,819. 1,579,133. Total functional expenses. Add lines 1 through 24e 25 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720)

Form 990 (2022)

Part .	^	Balance Sneet					
		Check if Schedule O contains a response or r	ote to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			7,867,582.	2	6,163,786
	3	Pledges and grants receivable, net	5,702,159.	3	6,082,168		
	4	Accounts receivable, net			21,941.	4	29,017
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul	ontributor, or 35%				
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ				6	
ţ2	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use			24 225	8	4 405
`	9				31,035.	9	4,135
1	l0a	Land, buildings, and equipment: cost or other		655 010			
		basis. Complete Part VI of Schedule D			F0C 100		405 525
		Less: accumulated depreciation		250,175.	526,102.	10c	405,735
	11	Investments - publicly traded securities			22,278,811.	11	16,593,141
	12	Investments - other securities. See Part IV, lin		1,039,701.	12	825,082	
	13	Investments - program-related. See Part IV, lir			13		
	14	Intangible assets	26,403.	14	1 070 252		
	15	Other assets. See Part IV, line 11			37,493,734.	15	1,970,252 32,073,316
	16	Total assets. Add lines 1 through 15 (must e	1,311,680.	16 17	1,332,558		
- 1	7 8	Accounts payable and accrued expenses	1,311,000.	18	1,332,330		
	19	Grants payable Deferred revenue	36,116.	19	50,000		
- 1	20			30/1100	20	30,000	
	.o 21	Escrow or custodial account liability. Complet				21	
۔ ا	22	Loans and other payables to any current or fo					
ļ ţie	_	trustee, key employee, creator or founder, sul					
Liabilities		controlled entity or family member of any of the				22	
2 ٿ	23	Secured mortgages and notes payable to unr	-	·····		23	
	24	Unsecured notes and loans payable to unrela				24	
2	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lir					
		of Schedule D			1,110,012.	25	3,063,511
2	26	Total liabilities. Add lines 17 through 25			2,457,808.	26	4,446,069
		Organizations that follow FASB ASC 958, c	heck her	e X			
ces		and complete lines 27, 28, 32, and 33.					
<u>u</u> 2	27	Net assets without donor restrictions	14,755,639.	27	10,719,844		
g 2	28	Net assets with donor restrictions	20,280,287.	28	16,907,403		
<u> </u>		Organizations that do not follow FASB ASC	958, che	eck here			
<u> </u>		and complete lines 29 through 33.					
န္ 2	29	Capital stock or trust principal, or current fund				29	
8 3	80	Paid-in or capital surplus, or land, building, or				30	
- □	31	Retained earnings, endowment, accumulated			25 025 006	31	00 600 040
	32	Total net assets or fund balances			35,035,926.	32	27,627,247
3	33	Total liabilities and net assets/fund balances			37,493,734.	33	32,073,316

Form 990 (2022)

or audits, explain why on Schedule O and describe any steps taken to undergo such audits

Form	1990 (2022) UNITED WAY OF BERKS COUNTY, INC.	23-	<u>-1655</u>	<u> 375</u>	Pa	age 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>	<u></u>			X
1	Total revenue (must equal Part VIII, column (A), line 12)	1),46		
2	Total expenses (must equal Part IX, column (A), line 25)	2		3,75		
3	Revenue less expenses. Subtract line 2 from line 1	3		3,28		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	35	5,03	5,9	<u> 26.</u>
5	Net unrealized gains (losses) on investments	5		3,63	8,3	<u> 77.</u>
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		-48	3,7	782.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	27	7,62	7,2	<u> 147.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	Ο.				
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:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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	Х	\perp
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C).			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required					

232012 12-13-22

SCHEDULE A

(Form 990)

Total

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.

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

2022

Employer identification number Name of the organization UNITED WAY OF BERKS COUNTY, 23-1655375 Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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). X 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 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 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. 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. 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. 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. 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. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) No above (see instructions))

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.)

Sec	ction A. Public Support	71	1	,			
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and	, ,	, ,	` ,		, ,	
	membership fees received. (Do not						
	include any "unusual grants.")	11084477.	11144072.	21426022.	12544375.	10296839.	66495785.
2	Tax revenues levied for the organ-						
	ization'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	11084477.	11144072.	21426022.	12544375.	10296839.	66495785.
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)						4248446.
6	Public support. Subtract line 5 from line 4.						62247339.
	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	11084477.	11144072.	21426022.	12544375.	10296839.	66495785.
	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	188,278.	239,570.	321,510.	1242838.	579,625.	2571821.
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.)	27,624.	22,904.	57,533.	20,187.	21,729.	149,977.
11	Total support. Add lines 7 through 10			_			69217583.
12	Gross receipts from related activities,	etc. (see instruction	ons)		•	12	109,450.
13	First 5 years. If the Form 990 is for the	ne organization's fi				01(c)(3)	
	organization, check this box and sto	_			• • • • • • • • • • • • • • • • • • • •		
Sec	tion C. Computation of Publ						
14	Public support percentage for 2022 (line 6, column (f), d	livided by line 11,	column (f))		14	89.93 %
15	Public support percentage from 2021	Schedule A, Part	II, line 14			15	91.66 %
	33 1/3% support test - 2022. If the					ore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				X
b	33 1/3% support test - 2021. If the						
	and stop here. The organization qua	lifies as a publicly s	supported organiza	ation			
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances to	est. The organizatio	on qualifies as a pu	blicly supported o	rganization		
b	10% -facts-and-circumstances test	-	-	*	-		
	more, and if the organization meets the	ŭ				•	
	organization meets the facts-and-circ						
18	Private foundation. If the organization		-				s
							(Form 990) 2022

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	slow, please comp	nete Part II.)				
	ear (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
•	grants, contributions, and	(4) 2313	(2) 2010	(0) 2020	(4) 2021	(6) 2022	(i) rotal
-	pership fees received. (Do not						
	de any "unusual grants.")						
	receipts from admissions,						
	nandise sold or services per-						
	d, or facilities furnished in						
,	ctivity that is related to the ization's tax-exempt purpose						
-	receipts from activities that						
	ot an unrelated trade or bus-						
	under section 513						
	evenues levied for the organ-						
	n's benefit and either paid to						
-	pended on its behalf					+	
	alue of services or facilities						
	hed by a governmental unit to						
	rganization without charge						
	Add lines 1 through 5						
	ints included on lines 1, 2, and						
	eived from disqualified persons				-		
	ts included on lines 2 and 3 received ther than disqualified persons that						
exceed	the greater of \$5,000 or 1% of the						
	on line 13 for the year						
	nes 7a and 7b						
8 Publi	c support. (Subtract line 7c from line 6.)						
Section	B. Total Support		1	<u> </u>	_		1
Calendar ye	ear (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	ınts from line 6						
	s income from interest,						
	ends, payments received on ities loans, rents, royalties,						
	ncome from similar sources						
b Unrela	ted business taxable income						
(less s	ection 511 taxes) from businesses						
acquir	ed after June 30, 1975						
c Add li	nes 10a and 10b						
	come from unrelated business						
	ties not included on line 10b,						
	ner or not the business is arly carried on						
_	income. Do not include gain						
	s from the sale of capital						
	s (Explain in Part VI.)						
	5 years. If the Form 990 is for th	ne organization's fi	rst second third	fourth or fifth tax	vear as a section	501(c)(3) organizatio	
	this box and stop here	J			•	() ()	· —
	C. Computation of Publi						
	support percentage for 2022 (li			column (f))		15	%
	support percentage from 2021					16	<u> </u>
	D. Computation of Inves					1 10 1	
	tment income percentage for 20			ine 13 column (f)		17	%
	tment income percentage from 2					18	%
	3% support tests - 2022. If the						
							, 13 HUL
	than 33 1/3%, check this box an	=	-				L
	3% support tests - 2021. If the						
	8 is not more than 33 1/3%, che						
∠u Priva	te foundation. If the organizatio	n did not check a	DOX OR LINE 14, 19	a. or 190. check th	iis dox and see in:	SITUCTIONS	1 1

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **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? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
2		
3a		
Ja		
3b		
0-		
3c		
4a		
4b		
4c		
5a		
5b 5c		
- 50		
6		
0		
7		
0		
8		
9a		
0.		
9b		
9с		
10a		
10b		
ule A (Forn	n 990)	2022

Par	t IV Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sect	tion B. Type I Supporting Organizations			
			Yes	No
	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)			
	effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported			
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	_		
Sact	supervised, or controlled the supporting organization. tion C. Type II Supporting Organizations	2		
Seci	tion 6. Type if Supporting Organizations		1	·
	Were a sector to a filtre a construction to all the decrease and a first the decrease at the construction of the all the decrease at the construction of the construct		Yes	No
	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed	1		
Sect	the supported organization(s). tion 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		103	140
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported	-		
	organization(s) or (ii) serving on the governing body of a supported organization? If "No." explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sect	tion 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).			
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instance)	struction	s).	ı
	Activities Test. Answer lines 2a and 2b below.		Yes	No
	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined	0-		
	that these activities constituted substantially all of its activities.	2a		
	Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	2b		
	these activities but for the organization's involvement. Parent of Supported Organizations. Answer lines 3a and 3b below.	ZIJ		
	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
L	Did the organization eversion a substantial degree of direction over the policies, programs, and activities of each			

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of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

SCHE	dule A (Form 990) 2022 ONTIED WAT OF BERRS COO			13 1033373 Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting	g Orga	nizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyin	g trust or	Nov. 20, 1970 (explain in	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus		•	•
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
_5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

Schedule A (Form 990) 2022

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

instructions).

emergency temporary reduction (see instructions).

INC.

	rt V Type III Non-Functionally Integrated 509((a)(3) Supporting Orga	nizations (continu	ued)	i ago .
Sect	ion D - Distributions		•		Current Year
_1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
_3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets			4	
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
		(i)	(ii)		(iii)
Sect	ion E - Distribution Allocations (see instructions)	Excess Distributions	Underdistribution Pre-2022	ns	Distributable Amount for 2022
_1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
<u>a</u>	From 2017				
b	From 2018				
<u> </u>	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
<u>h</u>	Applied to 2022 distributable amount				
<u>i</u>	Carryover from 2017 not applied (see instructions)				
<u>i</u> _	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years			_	
b	Applied to 2022 distributable amount				
с	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, 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 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
a	Excess from 2018				
b	Excess from 2019				
c	Excess from 2020				
d	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

Schedule B

Department of the Treasury Internal Revenue Service

(Form 990)

Schedule of Contributors Attach to Form 990 or Form 990-PF.

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

INC.

UNITED WAY OF BERKS COUNTY

OMB No. 1545-0047

Schedule B (Form 990) (2022)

Name of the organization

Employer identification number

23-1655375

Organization type (check one): Filers of: Section: X 501(c)(3) (enter number) organization Form 990 or 990-EZ 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 X 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), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), 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).

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

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

UNITED WAY OF BERKS COUNTY, INC.

23-1655375

, , 1	Contributors (see instructions). Use duplicate copies of Part I i		T
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions.)

Name of organization Employer identification number

UNITED WAY OF BERKS COUNTY, INC.

23-1655375

Part II	Noncash Property (see instructions). Use duplicate copies of Part	Il if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
223453 11-15.	00		Schedule B (Form 990) (2022)

Schedule B (Form 990) (2022) Page **4**

Name of organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 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 (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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 Inspection

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

Employer identification number 23-1655375

Pai	t I Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		r Si	milar Funds o	r Ac	coun	ts. Complete if the
	organization anomorou neo orni om oco, natriv, iiii	(a) Donor adv	vised	funds	(1	b) Fun	ds and other accounts
1	Total number at end of year	. ,					
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisors in v	vriting that the assets	held	d in donor advised	d fund	s	
	are the organization's property, subject to the organization's	-					Yes No
6	Did the organization inform all grantees, donors, and donor ad						
	for charitable purposes and not for the benefit of the donor or						
	impermissible private benefit?						
Par	t II Conservation Easements. Complete if the org	ganization answered "	Yes	" on Form 990, Pa	art IV,	line 7.	
1	Purpose(s) of conservation easements held by the organization	on (check all that appl	y).				
	Preservation of land for public use (for example, recreat	tion or education)		Preservation of a	a histo	rically	important land area
	Protection of natural habitat			Preservation of a	certif	fied his	storic structure
	Preservation of open space						
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation cont	ribu	tion in the form of	a cor	servat	
	day of the tax year.						Held at the End of the Tax Year
а	Total number of conservation easements					2a	
b						2b	
С	Number of conservation easements on a certified historic stru					2c	
d	Number of conservation easements included in (c) acquired a						
	historic structure listed in the National Register					2d	
3	Number of conservation easements modified, transferred, rele	eased, extinguished, o	or te	rminated by the o	organiz	zation	during the tax
	year						
4	Number of states where property subject to conservation eas	_					
5	Does the organization have a written policy regarding the per						
	violations, and enforcement of the conservation easements it						Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, l	handling of violations,	, and	l enforcing conse	rvatioi	n ease	ments during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and	enfo	orcina conservatio	on eas	ement	ts during the vear
		,		J			,
8	Does each conservation easement reported on line 2(d) above	e satisfy the requireme	ents	of section 170(h)	(4)(B)(i)	
	and section 170(h)(4)(B)(ii)?						Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its re	venu	ue and expense st	tateme	ent and	d
	balance sheet, and include, if applicable, the text of the footn	ote to the organization	n's f	inancial statemen	its tha	t desc	ribes the
Da	organization's accounting for conservation easements.	Aut Historiaal T		Oth	- · · · ·	:1	w Accete
Pai	t III Organizations Maintaining Collections of		rea	sures, or Oth	er Si	ımııaı	r Assets.
	Complete if the organization answered "Yes" on Form						
1a	If the organization elected, as permitted under FASB ASC 956	•					
	of art, historical treasures, or other similar assets held for pub	•				ce of p	DUBLIC
	service, provide in Part XIII the text of the footnote to its finan						
b	If the organization elected, as permitted under FASB ASC 956	•					
	art, historical treasures, or other similar assets held for public	exhibition, education	, or	research in furthe	rance	of pub	olic service,
	provide the following amounts relating to these items:						•
	(i) Revenue included on Form 990, Part VIII, line 1						
•							\$
2	If the organization received or held works of art, historical treat				gain, p	rovide	•
_	the following amounts required to be reported under FASB AS						¢
a	Revenue included on Form 990, Part VIII, line 1						Φ
D	Assets included in Form 990, Part X						φ

232051 09-01-22

Schedule D (Form 990) 2022

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		22,258.	4,401.	17,857.
d Equipment		335,234.	185,495.	149,739.
e Other		298,418.	60,279.	238,139.
Total. Add lines 1a through 1e. (Column (d) must equa	405,735.			

Schedule D (Form 990) 2022

Scriedule L	/ (I OIIII 990) 2022	01111111	****	<u> </u>	
Dart VII	Investments	- Other Securit	ioc		

Complete if the organization answered "Yes"	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Fotal. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII Investments - Program Related.		
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11c. See Form 990, Part X, line 13.
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		

Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.

(6) (7) (8) (9)

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

(a) Description	(b) Book value
(1) BENEFICIAL INTEREST IN LIFE INSURANCE POLICY	27,537.
(2) RIGHT-OF-USE ASSET - OPERATING LEASE	1,942,715.
(3)	
(4)	
(5)	
(6)	
(8)	
<u>(9)</u>	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	1,970,252.

Other Liabilities. Part X

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DUE TO OTHER UNITED WAYS	317,629.
(3) DUE TO DESIGNATED AFFILIATED	
(4) AGENCIES	746,942.
(5) OPERATING LEASE LIABILITY	1,998,940.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,063,511.

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) 2022

Schedule D	(Form 990)	2022	UNITE) WAY	OF	BERKS	COUNTY

Sche	dule D (Form 990) 2022 UNITED WAY OF BERKS COUNTY,	INC	2.	23-	1655375 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts Wit	th Revenue per Re	turn.	
	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_	5,485,394.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-3,638,377. 62,108.		
b	Donated services and use of facilities	2b	62,108.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	-331,364.		
е	Add lines 2a through 2d			2e	-3,907,633.
3	Subtract line 2e from line 1			3	9,393,027.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		i		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	69,222.		
b	Other (Describe in Part XIII.)	4b	1,003,189.		
С	Add lines 4a and 4b			4c	1,072,411.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	
Par	t XII Reconciliation of Expenses per Audited Financial Statemer	nts W	ith Expenses per F	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
1	Total expenses and losses per audited financial statements			1	12,894,073.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a	62,108.		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	62,108.
3	Subtract line 2e from line 1			3	12,831,965.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		i		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	69,222.		
b	Other (Describe in Part XIII.)	4b	850,771.		
С	Add lines 4a and 4b			4c	919,993.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	13,751,958.
Pai	t XIII Supplemental Information.				
Provi	de 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 additi	onal inf	formation.		
DAE	om ty time 1.				
PAL	RT V, LINE 4:				
тнь	ORGANIZATION'S ENDOWMENT CONSISTS OF FIFTH	EEN	DONOR-RESTRI	СТЕ	ח
			DONOR REDIRE	<u> </u>	
SUE	B-FUNDS AND ONE BOARD-DESIGNATED SUB-FUND, A	ALL	OF WHICH ARE	то	BE HELD
	·				
INI	EFINITELY, WITH THE INCOME EXPENDABLE FOR (OPER	ATIONS AS DI	REC	TED BY
DOI	ORS OR THE BOARD OF DIRECTORS.				
PAF	RT X, LINE 2:				
TAT	ACCORDANCE WITHII GENERALLY ACCEPTED ACCOUNTS	rato	DD TMOTDI EC	mite	
TIV	ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTS	LNG	PRINCIPLES,	THE	
ORG	SANIZATION ACCOUNTS FOR UNCERTAIN TAX POSIT	ONS	RELATIVE TO	UN	RELATED
BUS	SINESS INCOME, IF ANY, AS REQUIRED.				

PART XI, LINE 2D - OTHER ADJUSTMENTS:

Schedule D (Form 990) 2022 UNITED WAY OF BERKS COUNTY, INC. Part XIII Supplemental Information (continued)	23-1655375 Page 5
	214 610
UNREALIZED GAINS/(LOSSES) ON BENEFICIAL INTEREST	-214,619.
TRANSFERS BETWEEN NET ASSET RESTRICTIONS	-116,745.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-331,364.
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATED CONTRIBUTIONS	1,003,189.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
	050 771
DONOR DESIGNATED ALLOCATIONS	850,771.

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

Open to Public Inspection

Name of the organization	Employer identification number								
UNITED WAY OF BERKS COUNTY, INC. 23-1655375 Part I General Information on Grants and Assistance									
		amount of the grants	or againtance, the	grantoos' oligibility	for the grapte or easi	stance, and the colocti			
1 Does the organization maintain records criteria used to award the grants or assis							X Yes No		
2 Describe in Part IV the organization's pro	ocedures for monit	oring the use of grant	funds in the United	l States.					
Part II Grants and Other Assistance to					anization answered "Y	es" on Form 990, Part	IV, line 21, for any		
recipient that received more than	\$5,000. Part II can	be duplicated if addit	ional space is need	ed.					
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance		
							LIVE UNITED GRANT: GARDEN		
18TH WONDER IMPROVEMENT							& NUTITIONAL LEARNING;		
ASSOCIATION - 400 HANCOCK							ONE-TIME GRANT: OAKBROOK		
BOULEVARD - READING, PA 19611	82-3815954	501(C)(3)	10,000.	0.			COMMUNITY GARDEN		
ALBRIGHT COLLEGE							ONE-TIME GRANT: 13TH		
1621 N 13TH STREET	23-1352615	E01/G)/3)	0.500				STREET EDUCATIONAL		
READING, PA 19604	23-1352615	501(C)(3)	8,500.	0.			PARTNERSHIP		
AMERICAN CANCER SOCIETY									
498 BELLEVUE AVENUE							PARTNER AGENCY		
READING, PA 19605	13-1788491	501(C)(3)	100,000.	0.			INVESTMENTS: HEALTH		
,							PARTNER AGENCY		
AMERICAN RED CROSS - TRI COUNTY							INVESTMENTS: DISASTER		
CHAPTER - 3939 BROADWAY -							RESPONSE, VETERANS		
ALLENTOWN, PA 18104	53-0196605	501(C)(3)	191,369.	0.			TRANSPORTATION		
BARRIO ALEGRIA									
140 N. 5TH STREET							ONE-TIME GRANTS: OAKBROOK		
READING, PA 19601	83-1617182	501(C)(3)	50,000.	0.			ART SESSIONS		
BERKS ALLIANCE									
606 COURT STREET							RAPID RESPONSE GRANT:		
READING, PA 19601	47-5101292	501(C)(3)	35,000.	0.			GATEWAY STABILITY PROGRAM		
2 Enter total number of section 501(c)(3) a	ınd government orç	ganizations listed in th	ne line 1 table				71.		

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

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

SEE PART IV FOR COLUMN (H) DESCRIPTIONS

Schedule I (Form 990) 2022

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	- Lugor
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
							ONE-TIME GRANT: ENHANCE
BERKS AREA YOUTH RECREATION, INC.							YOUTH PROGRAMMING; READY
19 VERMONT ROAD							SET READ SUMMER LEARNING
SINKING SPRING, PA 19608	23-3070480	501(C)(3)	22,080.	0.			GRANT
							PARTER AGENCY
BERKS COALITION TO END							INVESTMENTS: HOMELESS
HOMELESSNESS - PO BOX 7712 -							PREVENTION; COVID-19
READING, PA 19603	37-1575390	501(C)(3)	182,413.	0.			RESPONSE GRANT: EMERGENCY
BERKS COMMUNITY HEALTH CENTER							ONE-TIME GRANT: OAKBROOK
1040 LIGGETT AVENUE							COMMUNITY OUTREACH
	27-3795179	501/01/31	32,000.	0.			SPECIALIST
READING, PA 19611	27-3793179	501(0)(3)	32,000.	0.			PARTNER AGENCY
BERKS CONNECTIONS/PRETRIAL							INVESTMENTS: RE-ENTRY
SERVICES - 19TH N. 6TH STREET, 4TH	22 1060010	E01/G)/3)	414 142	_			PROGRAM; FOCUS GRANT:
FLOOR - READING, PA 19601	23-1969810	501(0)(3)	414,142.	0.			REENTRY WORKS
BERKS COUNSELING CENTER							FOCUS GRANT: FAMILY
							CENTER & INTENSIVE
645 PENN STREET, 2ND FLOOR	23-2043478	E01/G)/2)	100 200	0.			OUTPATIENT PROGRAM
READING, PA 19601	23-2043476	501(C)(3)	188,200.	0.			OUTPATIENT PROGRAM
BERKS COUNTY COMMUNITY FOUNDATION							
237 COURT STREET							SUBCONTRACTED GRANT: DEI
READING, PA 19601	23-2769892	501(C)(3)	10,000.	0.			FOR CAPACITY BUILDING
							PARTNER AGENCY
BERKS ENCORE							INVESTMENTS: MEALS ON
40 NORTH 9TH STREET							WHEELS; RAPID RESPONSE
READING, PA 19601	23-1656050	501(C)(3)	178,684.	0.			GRANT: HVAC
BERKS LATINO WORKFORCE DEVELOPMENT							
CORPORATION - 450 S 6TH STREET -							FOCUS GRANT: WORKFORCE
READING, PA 19602	84-2735102	501(C)(3)	375,000.	0.			DEVELOPMENT
BIG BROTHERS/BIG SISTERS OF BERKS							PARTNER AGENCY
COUNTY - 303 WINDSOR STREET -							INVESTMENTS: MENTORING
	23_6463246	501(C)(3)	270 221	0.			PROGRAM
READING, PA 19601	23-6463246	DOT(C)(3)	279,321.	<u> </u>			FROGRAM

Part II Continuation of Grants and Other	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	Tuge 1
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRDSBORO COMMUNITY MEMORIAL							PARTNER AGENCY
CENTER - 201 EAST MAIN STREET -							INVESTMENTS: OUT OF
BIRDSBORO, PA 19508	23-1365317	501(C)(3)	61,351.	0.			SCHOOL PROGRAMMING
EINBERG, III 1990	23 1303317	301(0)(3)	01,331.	•			PARTNER AGENCY
BOYERTOWN AREA MULTI-SERVICE, INC.							INVESTMENTS: BASIC NEEDS,
200 WEST SPRING STREET							SUPPORTIVE SERVICES FOR
BOYERTOWN, PA 19512	23-7289405	501(C)(3)	60,736.	0.			OLDER ADULTS
			,				
BOYERTOWN COMMUNITY LIBRARY							READY SET READ SUMMER
24 NORTH READING AVENUE							LEARNING GRANTS: OCEAN OF
BOYERTOWN, PA 19512	23-2519885	501(C)(3)	6,450.	0.			POSSIBILITIES PROGRAM
BRING THE CHANGE							
47 NANTUCKET DRIVE							ONE-TIME GRANT: AGENTS OF
READING, PA 19605	83-4062630	501(C)(3)	10,000.	0.			CHANGE LEADERSHIP PROGRAM
CASA OF BERKS COUNTY							
845 N. PARK ROAD							ONE-TIME INVESTMENT
WYOMISSING, PA 19610	47-3440847	501(C)(3)	30,000.	0.			GRANT: AT RISK YOUTH
							PARTNER AGENCY
CATHOLIC CHARITIES, DIOCESE OF							INVESTMENTS: CASE
ALLENTOWN - 400 WASHINGTON STREET,							MANAGEMENT/COUNSELING FOR
SUITE 100 - READING, PA 19601	23-1352211	501(C)(3)	90,976.	0.			VETERANS & FAMILIES;
GINERO VIGRINO RIVIEL MORRES ING							DARWING AGENCY
CENTRO HISPANO DANIEL TORRES, INC.							PARTNER AGENCY
25 N. 2ND STREET	23-2041081	E01/G)/3)	270 222	0			INVESTMENTS: SOCIAL
READING, PA 19601	23-2041061	501(0)(3)	279,333.	0.			SERVICES, OPENING DOORS
THE CHILDREN'S HOME OF READING							PARTNER AGENCY
1010 CENTRE AVENUE							INVESTMENTS: FOSTER
READING, PA 19601	23-1352080	501(C)(3)	35,917.	0.			CARE/ADOPTION
	23 1332000		33,517.	· · · · · · · · · · · · · · · · · · ·			RAPID RESPONSE GRANT:
CLARE OF ASSISI HOUSE							RESIDENTIAL REPAIRS;
325 S 12TH STREET							ONE-TIME GRANT: SAFE
READING, PA 19602	47-1044541	501(C)(3)	45,000.	0.			PARKING LOT PROGRAM
		1 ' ' ' '			l	I	0-1

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CO-COUNTY WELLNESS SERVICES 429 WALNUT STREET READING, PA 19601	23-2657264	501(C)(3)	174,049.	0.			PARTNER AGENCY INVESTMENTS: BERKS TEENS MATTER; RAPID RESPONSE GRANT: ROOF REPAIR	
COMMUNITIES IN SCHOOLS OF EASTERN PA - 739 N 12TH STREET - ALLENTOWN, PA 18102	23-2222874	501(C)(3)	80,376.	0.			PARTNER AGENCY INVESTMENTS: EDUCATION; ONE-TIME GRANT: 10TH & PENN ELEMENTARY STUDENT	
COMMUNITY SERVICES FOR CHILDREN 1520 HANOVER AVE ALLENTOWN, PA 18109	23-2204725	501(C)(3)	186,566.	0.			PARTNER AGENCY INVESTMENTS: CHILD CARE	
DREXEL UNIVERSITY 3201 ARCH STREET, SUITE 400 PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	6,500.	0.			ONE TIME GRANT: BRIDGING THE GAPS COMMUNITY HEALTH INTERNSHIP PROGRAM	
EASTER SEALS EASTERN PENNSYLVANIA 1501 LEHIGH STREET, SUITE 201 ALLENTOWN, PA 18103	23-2823542	501(C)(3)	379,437.	0.			PARTNER AGENCY INVESTMENTS: PEDIATRIC CLINICS, OUTPATIENT THERAPY, THERAPEUTIC	
EDUCATIONWORKS,INC. 990 SPRING GARDEN STREET, SUITE 601 PHILADELPHIA, PA 19123	22-3798916	501(C)(3)	15,000.	0.			ONE-TIME GRANT: READING CLIMATE CORPS	
FAMILY GUIDANCE CENTER 1235 PENN AVENUE, SUITE 205-206 READING, PA 19610	23-1679207	501(C)(3)	452,590.	0.			PARTNER AGENCY INVESTMENTS: COUNSELING	
FAMILY PROMISE OF BERKS COUNTY 325 N. 5TH STREET READING, PA 19601	20-4557683	501(C)(3)	48,283.	0.			PARTNER AGENCY INVESTMENTS; U-TURN; ONE-TIME GRANT: EXECUTIVE LEADERSHIP DEVELOPMENT	
FRIEND, INC. COMMUNITY SERVICES 658D NOBLE STREET KUTZTOWN, PA 19530	23-1924643	501(C)(3)	182,353.	0.			PARTNER AGENCY INVESTMENTS: COMMUNITY RESOURCE CONNECTIONS	

Part II Continuation of Grants and Other A	Assistance to Doi	mestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GIRL SCOUTS OF EASTERN PENNSYLVANIA - 330 MANOR ROAD -							PARTNER AGENCY INVESTMENTS: OUTREACH TO
MIQUON, PA 19444	23-1352309	501(C)(3)	137,614.	0.			AT-RISK GIRLS
GREATER READING MENTAL HEALTH ALLIANCE - 1234 PENN AVENUE - WYOMISSING, PA 19610	23-1522636	501(C)(3)	165,784.	0.		1	PARTNER AGENCY INVESTMENTS: MENTAL HEALTH ALLIANCE, ADVOCACY & SUPPORT GROUPS;
HABITAT FOR HUMANITY OF BERKS COUNTY - 201 WASHINGTON STREET; SUITES 329-330 - READING, PA 19601	23-2500851		83,772.	0.			PARTNER AGENCY INVESTMENTS: HOMEOWNERSHIP FOR NEEDY FAMILIES; COVID 19
HAWK MOUNTAIN COUNCIL BOY SCOUTS OF AMERICA - 5027 POTTSVILLE PIKE - READING, PA 19605	23-1352047		313,602.	0.			PARTNER AGENCY INVESTMENTS: COMPREHENSIVE YOUTH DEVELOPMENT, URBAN
HELPING HARVEST 117 MORGAN DRIVE READING, PA 19608	22-2456238	501(C)(3)	73,350.	0.			PARTNER AGENCY INVESTMENTS; FOOD ACCESS & DISTRIBUTION
HOPE RESCUE MISSION 645 N 6TH ST READING, PA 19601	23-1413677		35,000.	0.			ONE-TIME INVESTMENTGRANT: WELCOME CENTER/CASE MANAGEMENT ASSISTANT
IM ABLE FOUNDATION 1007 HILL AVENUE, BLDG 17 WYOMISSING, PA 19610	06-1783154	501(C)(3)	15,000.	0.			ONE-TIME INVESTMENTGRANT: IM FIT INCLUSIVE FITNESS PROGRAM SOFTWARE
JEWISH FEDERATION OF READING, PA 1100 BERKSHIRE BOULEVARD, SUITE 125 WYOMISSING, PA 19610	23-1728784	501(C)(3)	82,658.	0.			PARTNER AGENCY INVESTMENTS: FOOD BANK, SUPPORTIVE SERVICES
LITERACY COUNCIL OF READING-BERKS 35 SOUTH DWIGHT STREET	22 2004057	E01/G)/2)	124.050				PARTNER AGENCY INVESTMENTS: ENGLISH FORWARD; LITERACY
WEST LAWN, PA 19609	23-2004957	DOT(C)(2)	134,269.	0.		1	TRAINING & ESL; ONE-TIME

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITERACY COUNCIL OF READING-BERKS 35 SOUTH DWIGHT STREET WEST LAWN, PA 19609	23-2004957	501(C)(3)	65,000.	0.			RAPID RESPONSE GRANT: ESL CLASSES; VENTURE GRANT: LEVEL UP PROGRAM
MANUFACTURERS RESOURCE CENTER 7200A WINDSOR DRIVE ALLENTOWN, PA 18106	23-2514764	501(C)(3)	10,000.	0.			ONE-TIME INVESTMENT GRANT: STEM CAREERS
MARY'S SHELTER 615 KENHORST BLVD READING, PA 19611	23-2722494	501(C)(3)	30,750.	0.			PARTNER AGENCY INVESTMENTS: SHELTER SERVICES PROGRAM
MIDPENN LEGAL SERVICES 213-A NORTH FRONT STREET HARRISBURG, PA 17101	23-7101191	501(C)(3)	82,467.	0.			PARTNER AGENCY INVESTMENTS: LEGAL REPRESENTATION FOR BASIC NEEDS
NEW JOURNEY COMMUNITY OUTREACH, INC 138 S 6TH STREET - READING, PA 19602	46-3623955	501(C)(3)	47,233.	0.			PARTNER AGENCY INVESTMENTS: SOUP KITCHEN & FOOD PANTRY
OLIVET BOYS & GIRLS CLUB OF READING & BERKS COUNTY - 1161 PERSHING BOULEVARD - READING, PA 19611	23-1365380	501(C)(3)	1,027,070.	0.			PARTNER AGENCY INVESTMENTS: COMPREHENSIVE YOUTH DEVELOPMENT; READY SET
OPPORTUNITY HOUSE 430 NORTH SECOND STREET READING, PA 19601	23-2543677	501(C)(3)	234,085.	0.			PARTNER AGENCY INVESTMENTS: CHILD CARE, SHELTER PROGRAM
PENN STATE HEALTH - ST. JOSEPH'S 2500 BERNVILLE RD BERN TOWNSHIP, PA 19605	23-1352211	501(C)(3)	106,300.	0.			ONE TIME GRANT: VEGGIE RX & HEALTHY FOOD ACCESS; FOCUS GRANT: HEALTHY FOOD STORAGE
READING AREA COMMUNITY COLLEGE 10 SOUTH SECOND STREET, PO BOX 1706 READING, PA 19603	23-1745816		149,685.	0.			PARTNER AGENCY INVESTMENTS: ESL LANGUAGE CLASSES; FOCUS GRANT: WORKPLACE DEVELOPMENT

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
READING HOSPITAL/TOWER HEALTH 420 S 5TH AVENUE	02.1250004	F04 (G) (2)	50.000				ONE-TIME INVESTMENT GRANT: HEALTH EQUITY		
WEST READING, PA 19611	23-1352204	501(C)(3)	50,000.	0.			COMMUNITY COLLABORATIVE		
READING HOSPITAL FOUNDATION/TOWER HEALTH - 420 S 5TH AVENUE - WEST READING, PA 19611	47-3054125	501(C)(3)	50,004.	0.			PARTNER AGENCY INVESTMENTS: STREET MEDICINE		
READING PUBLIC LIBRARY 100 SOUTH FIFTH STREET							READY SET READ SUMMER LEARNING GRANT: EARLY LITERACY; RAPID RESPONSE		
READING, PA 19602	23-1628407	501(C)(3)	35,450.	0.			GRANT: REFRIGERATION		
READING SCHOOL DISTRICT 800 WASHINGTON STREET READING, PA 19601	23-6004134		12,900.	0.			READY SET READ SUMMER LEARNING GRANTS: SUMMER GRANT PROGRAMS		
SAFE BERKS 255 CHESTNUT ST						1	PARTNER AGENCY INVESTMENTS: CRISIS		
READING, PA 19602	23-2087191	501(C)(3)	206,583.	0.			SERVICES		
SALVATION ARMY: SERVICE EXTENSION UNITS - 701 BROAD STREET - PHILADELPHIA, PA 19123	13-5562351	501(C)(3)	59,853.	0.			PARTNER AGENCY INVESTMENTS: COMMUNITY WELFARE		
THE FOOD TRUST 1617 JOHN F KENNEDY BLVD, SUITE 900 PHILADELPHIA, PA 19103	23-2678383	501(C)(3)	50,000.	0.			VENTURE GRANT: HEALTHY CORNER STORE INITIATIVE		
THE HARWOOD INSTITUTE FOR PUBLIC INNOVATION - 4915 ST. ELMO AVE, SUITE 402 - BETHESDA, MD 20814	31-1510297		405,000.	0.			FOCUS GRANT: READING THRIVING, TOGETHER; ONE-TIME GRANT: CATALYTIC FUNDERS INITIATIVE		
THE LGBT CENTER OF GREATER READING 1501 N 13TH STREET READING, PA 19604	81-3191097		128,400.	0.			FOCUS GRANT: HEALTH PROGRAM		

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE OUTREACH PROGRAM 301 CENTER STREET UNION, IA 50258	20-0636360	501(C)(3)	62,905.	0.			ONE-TIME INVESTMENT GRANT: FOOD INSECURITY			
THE SALVATION ARMY OF READING CORPS - PO BOX 1099 - READING, PA 19602	13-5562351	501(C)(3)	279,616.	0.			PARTNER AGENCY INVESTMENTS: LEARNING CENTER, SUPPORTIVE HOUSING, FAMILY SERVICES			
THRESHOLD REHABILITATION SERVICES, INC 1000 LANCASTER AVENUE - READING, PA 19607	23-1681448	501(C)(3)	138,086.	0.			PARTNER AGENCY INVESTMENTS: EMPLOYMENT SERVICES			
TOWER HEALTH AT HOME BERKS 1170 BERKSHIRE BOULEVARD WYOMISSING, PA 19610	23-1466250	501(C)(3)	396,713.	0.			PARTNER AGENCY INVESTMENTS: SKILLED NURSING & RELATED SERVICES; ONE-TIME			
UNITED LABOR COUNCIL OF READING & BERKS COUNTY - 65 FURNACE STREET - ROBESONIA, PA 19551	23-2962223	501(C)(3)	98,917.	0.			PROGRAM FUNDING INVESTMENTS			
UNITED WAY OF LANCASTER COUNTY 1910 HARRINGTON DR, SUITE A LANCASTER, PA 17601	23-1352093	501(C)(3)	65,000.	0.			SUBCONTRACTED GRANTS: 211 CALL CENTER			
UNITED WAY WORLDWIDE 701 NORTH FAIRVAX STREET ALEXANDRIA, VA 22314	13-1635294	501(C)(3)	35,000.	0.			ONE TIME INVESTMENT GRANT: HUMANITARIAN AID FOR UKRAINE			
WESTERN BERKS FREE MEDICAL CLINIC, INC 480 BIG SPRING ROAD - ROBESONIA, PA 19551	01-0742666	501(C)(3)	38,713.	0.			VENTURE GRANT: SATELLITE CLINIC; LIVE UNITED GRANT: MEDIA CAMPAIGN			
WIDOKTADWEN CENTER FOR NATIVE KNOWLEDGE - 237 COURT STREET, SUITE 302 - READING, PA 19601	85-3324133	501(C)(3)	15,000.	0.			ONE-TIME INVESTMENT GRANT: INFORMATION & REFERRAL PROGRAM			

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
YMCA OF READING & BERKS COUNTY 631 WASHINGTON STREET READING, PA 19603	23-1244009	501(C)(3)	521,338.	0.			PARTNER AGENCY INVESTMENTS: CHILD CARE/HEALTHY YOUTH, TRANSITIONAL HOUSING,			
YOCUM INSTITUTE FOR ARTS EDUCATION 3000 PENN AVE WYOMISSING, PA 19609	23-1365985	501(C)(3)	25,000.	0.			SUBCONTRACTED GRANTS: NEIGHBORHOOD BRIDGES			
				l						

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 (book, FMV, appraisal, other) (f) Description of noncash assistance										
Part IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	Iditional information.						
PART I, LINE 2:										
UNITED WAY JUDICIOUSLY DISTRIBUTES	DOLLARS	DONATED IN	SUPPORT O	F THE						
COMMUNITY'S HEALTH AND HUMAN SERVICE	CES NEEDS	, PRIMARII	Y TO AND T	HROUGH THE						
PARTNER AGENCIES. ALSO INCLUDED IS THE DAY-TO-DAY SUPPORT AND ASSISTANCE										
PROVIDED TO THE PARTNER AGENCIES THROUGH SPECIAL AND ROUTINE AGENCY										
RELATIONS' ACTIVITIES. IN 2022, WE ALLOCATED FUNDS TO 33 AGENCY PARTNERS,										
SUPPORTING OVER 50 PROGRAMS AND SEF	RVICES. I	N TOTAL, M	ORE THAN 1	90,000 BERKS						
COUNTIANS RECEIVED UNITED WAY-FUNDE	ED SERVIC	ES.								

Part IV | Supplemental Information

UNITED WAY CONTINUES ITS EMPHASIS ON COMPLIANCE AND ACCOUNTABILITY

PROCEDURES TO ENSURE THE EFFECTIVE AND EFFICIENT OPERATION OF UNITED WAY

PARTNER PROGRAMS.

PART II, LINE 1, COLUMN (H):

NAME OF ORGANIZATION OR GOVERNMENT: BERKS COALITION TO END HOMELESSNESS

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTER AGENCY INVESTMENTS: HOMELESS

PREVENTION; COVID-19 RESPONSE GRANT: EMERGENCY SHELTER

NAME OF ORGANIZATION OR GOVERNMENT:

CATHOLIC CHARITIES, DIOCESE OF ALLENTOWN

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS: CASE

MANAGEMENT/COUNSELING FOR VETERANS & FAMILIES; VENTURE GRANT: FOOD PANTRY

NAME OF ORGANIZATION OR GOVERNMENT: COMMUNITIES IN SCHOOLS OF EASTERN PA

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS:

EDUCATION; ONE-TIME GRANT: 10TH & PENN ELEMENTARY STUDENT SUPPORT

NAME OF ORGANIZATION OR GOVERNMENT: EASTER SEALS EASTERN PENNSYLVANIA

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS:

PEDIATRIC CLINICS, OUTPATIENT THERAPY, THERAPEUTIC RECREATION

NAME OF ORGANIZATION OR GOVERNMENT:

GREATER READING MENTAL HEALTH ALLIANCE

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS: MENTAL

HEALTH ALLIANCE, ADVOCACY & SUPPORT GROUPS; ONE-TIME GRANT: GUARDIANSHIP

PROGRAM

Schedule I (Form 990)

NAME OF ORGANIZATION OR GOVERNMENT: HABITAT FOR HUMANITY OF BERKS COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS:

HOMEOWNERSHIP FOR NEEDY FAMILIES; COVID 19 RESPONSE GRANT

NAME OF ORGANIZATION OR GOVERNMENT:

HAWK MOUNTAIN COUNCIL BOY SCOUTS OF AMERICA

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS:

COMPREHENSIVE YOUTH DEVELOPMENT, URBAN SCOUTING

NAME OF ORGANIZATION OR GOVERNMENT: LITERACY COUNCIL OF READING-BERKS

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS: ENGLISH

FORWARD; LITERACY TRAINING & ESL; ONE-TIME GRANT: GED PROGRAM

NAME OF ORGANIZATION OR GOVERNMENT:

OLIVET BOYS & GIRLS CLUB OF READING & BERKS COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS:

COMPREHENSIVE YOUTH DEVELOPMENT; READY SET READ SUMMER LEARNING GRANT

NAME OF ORGANIZATION OR GOVERNMENT: TOWER HEALTH AT HOME BERKS

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS: SKILLED

NURSING & RELATED SERVICES; ONE-TIME GRANTS: CHILD IMMUNIZATION &

TRAINING

NAME OF ORGANIZATION OR GOVERNMENT: YMCA OF READING & BERKS COUNTY

(H) PURPOSE OF GRANT OR ASSISTANCE: PARTNER AGENCY INVESTMENTS: CHILD

CARE/HEALTHY YOUTH, TRANSITIONAL HOUSING, BABY UNIVERSITY

Schedule I (Form 990)

SCHEDULE J (Form 990)

Department of the Treasury

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.

Open to Public

Internal Revenue Service Name of the organization

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

Inspection
Employer identification number

OMB No. 1545-0047

UNITED WAY OF BERKS COUNTY, INC.

23-1655375

Pa	rt I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,			
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	X Form 990 of other organizations X 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:			
а	Receive a severance payment or change-of-control payment?	4a		X
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
С	Participate in or receive payment from an equity-based compensation arrangement?	4c		Х
	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:	_		37
a	The organization?	<u>5a</u>		X
b	Any related organization?	5b		
_	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:			v
	The organization?	6a		X
b	Any related organization?	6b		\vdash
_	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	_		v
_	not described on lines 5 and 6? If "Yes," describe in Part III	7		X
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			v
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53,4958-6(c)?	9	ı	1

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

Schedule J (Form 990) 2022

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-MISO compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
		(i) Base (ii) Bonus incentive compensation		(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) TAMMY L. WHITE	(i)	183,064.	0.	0.	7,961.	15,490.	206,515.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							1 1/5 000) 0000

Part III Supplemental Information

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

PART I, LINE 3:

EXECUTIVE COMPENSATION PROCEDURES:

UNITED WAY OF BERKS COUNTY'S PRIMARY OBJECTIVE IS TO PROVIDE A REASONABLE

AND COMPETITIVE EXECUTIVE COMPENSATION OPPORTUNITY CONSISTENT WITH

COMPENSATION PRACTICES FOR INDIVIDUALS POSSESSING THE EXPERIENCE AND SKILLS

NEEDED TO IMPROVE THE OVERALL PERFORMANCE OF THE ORGANIZATION.

THE ORGANIZATION'S EXECUTIVE COMPENSATION PHILOSOPHY IS DESIGNED TO:

- ENCOURAGE THE ATTRACTION AND RETENTION OF A HIGH CALIBER EXECUTIVE
- REINFORCE THE GOALS FOR THE ORGANIZATION BY SUPPORTING TEAMWORK AND

COLLABORATION

- ENSURE THAT PAY IS PERCEIVED TO BE FAIR AND EQUITABLE
- BE FLEXIBLE TO REWARD INDIVIDUAL ACCOMPLISHMENTS AS WELL AS

ORGANIZATIONAL SUCCESS

- ENSURE THAT THE PROGRAM IS EASY TO EXPLAIN, UNDERSTAND AND ADMINISTER
- BALANCE THE NEED TO BE COMPETITIVE WITH THE LIMITS OF AVAILABLE

FINANCIAL RESOURCES

THE CHAIRPERSON OF THE BOARD LEADS THE BOARD OF DIRECTORS IN THE EVALUATION

Schedule J (Form 990) 2022

Part III Supplemental Information

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

OF THE PRESIDENT'S PERFORMANCE ON AN ANNUAL BASIS. THE PRESIDENT PRESENTS

TO THE CHAIRPERSON INFORMATION ON THE ACCOMPLISHMENTS OF THE ORGANIZATION

AND ITS PROGRESS TOWARD ACHIEVING THE GOALS OUTLINED IN THE STRATEGIC PLAN,

THE FULFILLMENT OF HIS/HER DUTIES AND RESPONSIBILITIES AS OUTLINED IN THE

POSITION DESCRIPTION, AND THE MANNER IN WHICH THE CHALLENGES OF THE

ORGANIZATION HAVE BEEN ADDRESSED AND THE OPPORTUNITIES TAKEN. THE

PRESIDENT ALSO DEFINES AND DISCUSSES CURRENT AND FUTURE ORGANIZATIONAL

CHALLENGES AND OPPORTUNITIES. THIS INFORMATION IS SHARED WITH THE BOARD OF

DIRECTORS.

IN ADDITION TO THE ANNUAL REVIEW, A PRESIDENT'S EVALUATION SURVEY IS

CONDUCTED SEMI-ANNUALLY WITH FULL BOARD PARTICIPATION, THE RESULTS OF WHICH

ARE COMPILED AND ANALYZED BY A THIRD-PARTY PROVIDER HAVING NO VESTED

INTEREST IN THE OUTCOME OF THIS PROCESS. A FORMAL REPORT IS PRESENTED BY

THE PROVIDER FIRST TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR

INITIAL DISCUSSION, THEN TO THE FULL BOARD OF DIRECTORS AS PART OF AN

EXECUTIVE SESSION.

FOLLOWING THIS SESSION, THE CHAIRPERSON MEETS WITH THE PRESIDENT AND SHARES

Schedule J (Form 990) 2022

Part III Supplemental Information

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

THE RESULTS OF THE GROUP EVALUATION AS WELL AS ANY GOALS OR SUGGESTIONS THE

BOARD HAS RELATIVE TO THE INFORMATION PRESENTED AND THE FUTURE DIRECTION OF

THE ORGANIZATION. THE CHAIRPERSON OF THE BOARD COMMUNICATES THE RESULTS OF

THE ASSESSMENT VERBALLY TO THE PRESIDENT AND THE INFORMATION IS CAPTURED

THROUGH THE MINUTES OF THE EXECUTIVE SESSIONS FOR EXECUTIVE COMMITTEE AND

THE BOARD OF DIRECTORS. THE RESULTS OF THE ASSESSMENT ARE INCLUDED IN THE

PRESIDENT'S PERSONNEL FILE.

THE LEVEL AND FORM OF COMPENSATION IS DETERMINED FOLLOWING A REVIEW OF

LOCAL COMPENSATION LEVELS OF CEO'S OF ORGANIZATIONS OF SIMILAR SIZE AND

SCOPE, AS WELL AS THE COMPENSATION LEVELS OF CEO'S OF UNITED WAY

ORGANIZATIONS OF SIMILAR SIZE AND SCOPE. WHILE UNITED WAY FOCUSES ON

OTHER UNITED WAYS AND NONPROFITS TO BENCHMARK COMPENSATION, THE

ORGANIZATION UNDERSTANDS THAT THE MARKET FOR EXECUTIVE TALENT MAY BE

BROADER THAN THE GROUP OF CHARITIES. MARKET INFORMATION FROM ADDITIONAL

MARKET SEGMENTS AND PUBLISHED NOT-FOR-PROFIT COMPENSATION SURVEYS, MAY BE

USED AS A SUPPLEMENT. THE PRESIDENT'S ANNUAL COMPENSATION IS COMMUNICATED

BOTH VERBALLY AND IN WRITING TO THE PRESIDENT AND IS INCLUDED IN HIS/HER

PERSONNEL FILE.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Inspection Employer identification number

Types of Property		UNITED WAY O	F BERK	S COUNTY,	INC.	23-1	65537	5
Art - Works of art Art - Works of art Art - Works of art - Historical treasures Art - Historica	Pai	t I Types of Property						
2 At - Historical Interests			Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de	termining	nts
3 At - Fractional interests	1	Art - Works of art						
3 At - Fractional interests	2							
Sooks and publications Clothing and household goods Cars and other vehicles Boats and planes Intellectual property Securities - Publicity traded X 20 222,195. FATR VALUE Securities - Patriarship, LLC, or trust interests Securities - Real estate - Commercial Real estate - Commercial Real estate - Commercial Real estate - Commercial Securities - Sourities - Patriarship - LC, or Trust interests Collectibles Conservation contribution - Where Collectibles Col	3							
5 Clothing and household goods 6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 20 222,195. FAIR VALUE 11 Securities - Partnership, LLC, or trust interests 12 Securities - Miscellaneous 13 Qualified conservation contribution - Other 14 Gualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Food inventory 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ())	4							
6 Cars and other vehicles 7 Boats and planes 8 Intellectual property 9 Securities - Publicly traded X 20 222,195. FAIR VALUE 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 Real estate - Residential 15 Real estate - Residential 16 Real estate - Commercial 17 Real estate - Other 18 Collectibles 19 Proof inventory 20 Drugs and medical supplies 21 Taxidermy 21 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ()	5							
7 Boats and planes 8 Intellectual property 9 Securities - Publicity traded X 20 222,195. FATR VALUE 10 Securities - Partnership, LLC, or trust interests 11 Securities - Partnership, LLC, or trust interests 12 Securities - Niscellaneous 13 Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other Seal estate - Residential 16 Real estate - Commercial 17 Real estate - Coher Securities - Publicity Securities - Pu	6							
8 Intellectual property 9 Securities - Publicly traded X 20 222,195 . FATR VALUE 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 - Commercial 18 Collectibles 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other () Colter () Col	7							
9 Securities - Publicly traded X 20 222,195. FATR VALUE 10 Securities - Closely held stock	8							
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 - Other 17 Real estate - Other 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other () 26 Other () 27 Other () 28 Other () 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Lungt held to be used for exempt purposes for the entire holding period? Yes No Yes No Yes No			Х	20	222,195.	FAIR VALUE		
11 Securities - Partnership, LLC, or trust interests 2 Securities - Miscellaneous 3 Qualified conservation contribution - Historic structures 4 Qualified conservation contribution - Other 5 Real estate - Residential 6 Real estate - Commercial 7 Real estate - Other 9 Proof inventory 12 Taxidermy 13 Scientific specimens 14 Archeological artifacts 15 Scientific specimens 16 Other ())					,			
trust interests Securities - Miscellaneous Qualified conservation contribution - Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other Soluetibles Drugs and medical supplies 17 Taxidermy Historical artifacts Sicritific specimens 4 Archeological artifacts Cother () Other () Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Testing and the discontribution and which isn't required to be used for exempt purposes for the entire holding period? X and in the organization contribution, and which isn't required to be used for exempt purposes for the entire holding period?								
12 Securities · Miscellaneous Qualified conservation contribution - Historic structures	• •							
13. Qualified conservation contribution - Historic structures 14. Qualified conservation contribution - Other 15. Real estate - Residential 16. Real estate - Other 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 () 26. Other () 27. Other () 28. Other () 29. Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29. Supplies 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?	12							
Historic structures 14 Qualified conservation contribution - Other 15 Real estate - Residential 16 Real estate - Other 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 () 26 Other () 27 Other () 28 Other () 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?								
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 ())	14							
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 () 26 Other () 27 Other () 28 Other () 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Ves No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?								
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 (
18 Collectibles								
19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other () 26 Other () 27 Other () 28 Other () 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X								
20 Drugs and medical supplies								
21 Taxidermy								
22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other (
Scientific specimens Archeological artifacts Other (
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Other () Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No Uuring 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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X								
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No 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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X		,						
for which the organization completed Form 8283, Part V, Donee Acknowledgement Yes No Uring 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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X		· · · · · · · · · · · · · · · · · · ·	zation during	the tax year for co	ontributions			
Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X	23	, ,	-					
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 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X		To which the organization completed form ozi	00, 1 ait v, D	once Acknowledg	CITICIL		Vas	No
must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? 30a X	30a	During the year did the organization receive by	v contributio	n any property rep	orted in Part I lines 1 throug	h 28 that it	10.	110
exempt purposes for the entire holding period?	oou		•		,	·		
g							30a	x
b ii res, describe the arrangement iirr art ii.	h		•				000	+
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?		,	nolicy that re	equires the review of	of any nonstandard contribut	ions?	31 X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash			-	•	•			+
	uza			_	· ·		322	x
contributions? b If "Yes," describe in Part II.	h						JZa	+25
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked,			olumn (c) for	r a type of property	y for which column (a) is choo	ked		
describe in Part II.	55	-	Oldifili (C) 101	a type of property	To willon column (a) is chec	ncu,		

232141 09-09-22

LHA

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

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

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 Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

Employer identification number 23-1655375

FORM 990, PART III, LINE 2, **NEW PROGRAM SERVICES:** FIRST LAUNCHED AS A VIRTUAL PILOT IN PARTNERSHIP WITH THE OLIVET BOYS AND GIRLS CLUB, THE READ ALLIANCE PILOT WAS EXPANDED TO BE DELIVERED IN PERSON AT TWO LOCATIONS READING SCHOOL DISTRICT'S 10TH & PENN ELEMENTARY SCHOOL AND THE OLIVET BOYS AND GIRLS CLUB OAKBROOK SITE. READ ALLIANCE MODEL HAS LONG BEEN SUCCESSFUL IN NEW YORK CITY AND BECAME A VITAL DELIVERY METHOD UWBC WHEN THE PANDEMIC CLOSED MANY OF ITS READY.SET.READ! PROGRAMMING. THE NYC-BASED ORGANIZATION PROVIDED TRAINING AND ASSISTANCE WITH FACILITATION OF THE PROGRAM IN THE BERKS COUNTY REGION. DURING 2022, 18 ELEMENTARY STUDENTS ACROSS BOTH RECEIVED ONE-TO-ONE TUTORING FROM 21 HIGH SCHOOL STUDENTS. THE HIGH SCHOOL STUDENTS WERE TRAINING USING THE READING FOR ALL LEARNERS LITERACY CURRICULUM TO ASSIST IN INCREASING READING GROWTH OVER THE 15-WEEK PROGRAM, MONDAY-THURSDAY $3-4:30\,\mathrm{PM}$. TEACHERS SUPERVISE THE TEENS AND HELP TO FACILITATE THE AFTERSCHOOL PROGRAM. FOR MANY OF TEENS THIS IS THEIR FIRST PAID JOB AND GAIN HANDS ON EXPERIENCE IN EDUCATION FIELD. THE PROGRAM HAS PROVEN SUCCESSFUL IN BERKS COUNTY AND WILL CONTINUE TO BE SCALED TO SERVE MORE CHILDREN AND TEENS.

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

DURING 2022, UWBC INVESTED FUNDING IN 50 PROGRAMS DELIVERED BY 33

AGENCY PARTNERS, AS WELL AS SUPPORTED COMMUNITY INITIATIVES AND

PROVIDED VARIOUS ONE-TIME GRANTS. ALL PROGRAMS IN WHICH UWBC INVESTS IN

ANNUALLY ARE EVALUATED BY OUR COMMUNITY IMPACT CABINET, FOCUS AREA

PANELS (FAP) AND ACCOUNTABILITY REVIEWERS, REPRESENTING OVER 50

VOLUNTEER COMMUNITY MEMBERS FROM VARIOUS SECTORS. THESE VOLUNTEERS

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

Schedule O (Form 990) 2022

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

Employer identification number 23-1655375

DEDICATE INVALUABLE TIME TO ENSURE UWBC DOLLARS ARE INVESTED IN

HIGH-PRIORITY PROGRAMS THAT ADDRESS CRITICAL CURRENT COMMUNITY NEEDS,

AS WELL AS PROGRAMS THAT ARE HIGH-PERFORMING - CONSISTENTLY AND

EFFECTIVELY DELIVERING A HIGH-QUALITY PROGRAM PRODUCING MEANINGFUL

RESULTS FOR PARTICIPANTS. ANNUALLY, PROGRAMS RECEIVING UWBC INVESTMENTS

ARE REQUIRED TO SUBMIT A REPORT THAT DETAILS HOW UWBC DOLLARS ARE SPENT

TO SUPPORT PROGRAMMING, AND THE OUTCOMES ACHIEVED BY CLIENTS. THESE

OUTCOMES PLAY A CRUCIAL ROLE IN DETERMINING THE EFFECTIVENESS OF UWBC

UWBC INVESTED IN THE FOLLOWING PROGRAMS IN 2022:

EDUCATION FOCUS AREA

INVESTMENTS IN PROGRAMS.

UNITED WAY BELIEVES THAT EVERYONE CAN PLAY A ROLE IN ENSURING THAT

CHILDREN GROW UP TO BE PRODUCTIVE CITIZENS AND MEMBERS OF OUR

COMMUNITY. THIS BEGINS WITH A GOOD EDUCATION THAT IS THE FOUNDATION FOR

A CHILD'S SUCCESS IN WORK AND LIFE, ALONG WITH PROVIDING SUPPORTIVE

PROGRAMMING THAT HELPS YOUTH DEVELOP NECESSARY SKILLS FOR THEIR

FUTURES. TO MEET THIS GOAL, KEY ISSUES ADDRESSED BY UWBC AND ITS

SUPPORTED PROGRAMS IN THIS FOCUS AREA INCLUDE EARLY CHILDHOOD CARE,

SCHOOL READINESS, SCHOOL SUCCESS, AND POSITIVE YOUTH DEVELOPMENT, SINCE

THESE ISSUES ARE ALL INTERTWINED IN HELPING CHILDREN ACHIEVE THEIR

POTENTIAL. THESE PROGRAMS IMPACTED OVER 25,000 CHILDREN AND YOUTH IN

BERKS COUNTY IN 2022.

EARLY CARE AND SCHOOL READINESS

- COMMUNITY-LEVEL OUTCOME: FAMILIES HAVE ACCESS TO AFFORDABLE AND

QUALITY EARLY LEARNING EXPERIENCES THAT RESULT IN KINDERGARTEN

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Schedule O (Form 990) 2022

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

Employer identification number
23-1655375

-- COMMUNITY SERVICES FOR CHILDREN, INC. IS A LEADER IN PROVIDING THE

READINESS.

HIGHEST QUALITY EARLY CHILDHOOD EDUCATION AND FAMILY SERVICES FOR ECONOMICALLY DISADVANTAGED FAMILIES. AS PARENTS ARE CONTINUING TO RETURN TO THE WORKFORCE, CHILDCARE IS A GREATER NEED THAN EVER ACROSS THE COUNTY, STATE AND COUNTRY. SUPPORTING FAMILIES IN CHOOSING AND AFFORDING QUALITY CHILDCARE IS ONE OF THE MAIN FUNCTIONS OF THE EARLY LEARNING RESOURCE CENTER. WHILE SUPPORT AROUND CHILDCARE CONTINUES TO BE A GREAT NEED IN THE COMMUNITY, THE AVAILABILITY OF CHILD CARE WORKS (CCW) DOLLARS SUPPORTED BY UNITED WAY HAS MEANT THAT THERE IS CURRENTLY NO WAITING LIST FOR FUNDING. THE FOCUS HAS BEEN ON SUPPORTING FAMILIES IN NEED WHO DO NOT QUALIFY FOR OTHER FUNDING SOURCES TO BE ABLE TO HAVE ACCESS TO CHILDCARE. -- OPPORTUNITY HOUSE, CHILDCARE: THE SECOND STREET LEARNING CENTER IS A COMPREHENSIVE COMMUNITY CHILDCARE PROGRAM FOR CHILDREN AGES 6 WEEKS TO 13 YEARS FOCUSING ON CREATIVITY, SOCIALIZATION, AND THE DEVELOPMENT OF HIGH SELF-ESTEEM. ACTIVITIES ARE DESIGNED TO MEET THE NEEDS OF EACH INDIVIDUAL CHILD. MULTI-CULTURAL AND DEVELOPMENTALLY APPROPRIATE MATERIALS AND EQUIPMENT ARE OFFERED. --YMCA OF READING & BERKS COUNTY, CHILDCARE: OFFERS A

SCIENTIFICALLY-BASED, IMPLEMENTED EARLY CHILDHOOD CURRICULUM THAT

ALIGNS WITH THE PENNSYLVANIA LEARNING STANDARDS FOR EARLY CHILDHOOD.

SINCE PLAY IS THE FOUNDATION FOR YOUNG CHILDREN'S LEARNING AND

DEVELOPMENT, THE YMCA PROVIDES WELL-EQUIPPED AND CAREFULLY ARRANGED

CLASSROOMS.

- COMMUNITY-LEVEL OUTCOME: INDIVIDUALS GAIN KNOWLEDGE AND DEVELOP

SKILLS TO ESTABLISH STRONG FAMILIES AND HELP CHILDREN REACH THEIR

POTENTIAL.

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Name of the organization
UNITED WAY OF BERKS COUNTY, INC.

Employer identification number 23-1655375

-- CENTRO HISPANO, ABRIENDO PUERTAS/OPENING DOORS PROGRAM: AN

EVIDENCE-BASED, COMPREHENSIVE TRAINING PROGRAM, DEVELOPED BY AND FOR

LATINO PARENTS WITH CHILDREN AGES 0 TO 5; AIMS TO IMPROVE THE OUTCOMES

OF THE NATION'S LATINO CHILDREN BY BUILDING THE CAPACITY AND CONFIDENCE

OF PARENTS TO BE STRONG AND POWERFUL ADVOCATES IN THEIR CHILDREN'S

LIVES. IN 2022, STAFF WENT THROUGH THE NATIONAL TRAINING TO TRANSITION

TO VIRTUAL PROGRAMMING WHICH ELIMINATED BARRIERS FOR PARENTS TO

PARTICIPATE INCLUDING TRANSPORTATION. THIS PROGRAM ALSO ALIGNS WITH

UWBC'S READY.SET.READ! INITIATIVE.

-- YMCA OF READING & BERKS COUNTY, BABY UNIVERSITY: OFFERED AS A

-- YMCA OF READING & BERKS COUNTY, BABY UNIVERSITY: OFFERED AS A
6-WEEK SESSION, EACH PARTICIPANT, A PARENT OR CAREGIVER WITH A CHILD
FROM PRENATAL TO FIVE YEARS OLD, RECEIVES A WEEKLY HOME VISIT IN
ADDITION TO THE WEEKLY CLASSROOM INSTRUCTION, WHICH INCLUDES EDUCATION
ON EARLY CHILDHOOD DEVELOPMENT AND EVIDENCE-BASED PARENTING CURRICULUM.

SCHOOL SUCCESS

- COMMUNITY-LEVEL OUTCOME: STUDENTS WILL ACHIEVE ACADEMIC SUCCESS BY

 IMPROVED ATTENDANCE AND/OR PROMOTION TO THE NEXT GRADE LEVEL.

 -- BIG BROTHERS BIG SISTERS OF BERKS COUNTY, MENTORING PROGRAM

 SERVICES: THEIR MISSION IS TO PROVIDE CHILDREN FACING ADVERSITY WITH

 STRONG AND ENDURING, PROFESSIONALLY SUPPORTED 1-TO-1 RELATIONSHIPS THAT

 CHANGE THEIR LIVES FOR THE BETTER, FOREVER. THIS IS ACHIEVED THROUGH

 PROFESSIONALLY-DIRECTED MENTORING PROGRAMS UTILIZING CAREFULLY SCREENED

 AND TRAINED VOLUNTEERS, AND INCLUDES ONE-TO-ONE PROGRAM, COUL (THE CLUB

 OF UNMATCHED LITTLES) GROUP-MENTORING, TEEN PROGRAM THAT PROVIDES

 GROUP-MENTORING, AND SMART (STUDENTS & MENTORS ACHIEVING RESULTS

 TOGETHER), A SCHOOL-BASED PROGRAM.
 - COMMUNITY-LEVEL OUTCOME: STUDENTS WILL PARTICIPATE IN EDUCATIONAL

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 EXPERIENCES DURING THE SUMMER TO MAINTAIN READING SKILLS. -- BIRDSBORO COMMUNITY MEMORIAL CENTER, OUT OF SCHOOL EDUCATION PROGRAMS: THE SUMMER READING PROGRAM FOR YOUTH IN GRADES FIRST THROUGH SIXTH ALLOWS PARTICIPANTS TO PRACTICE AND LEARN NEW STRATEGIES THAT WILL ASSIST THEM IN MAINTAINING CURRENT READING LEVELS, OR INCREASE LEVELS, THROUGHOUT THE SUMMER MONTHS. -- OLIVET BOYS AND GIRLS CLUB OF READING AND BERKS COUNTY, COMPREHENSIVE YOUTH DEVELOPMENT: OLIVET SUMMER CAMP PROGRAMS PICK UP WHEN THE AFTER-SCHOOL PROGRAM ENDS, KEEPING YOUTH ENGAGED IN PROGRAMS DURING THE SUMMER MONTHS. -- READY.SET.READ!: UNITED WAY PROVIDES SUMMER LEARNING GRANTS TO PARTNER SCHOOLS, SUMMER LEARNING COALITION MEMBERS, AND OTHER ORGANIZATIONS SERVING BERKS COUNTY TITLE 1 STUDENTS. THE PROGRAM IS DESIGNED TO PROVIDE SMALL GRANTS IN SUPPORT OF SUMMER LEARNING PROGRAMMING FOR STUDENTS UP TO AND INCLUDING 3RD GRADE. FOLLOWING A THOROUGH REVIEW PROCESS, THE COMMITTEE APPROVED 10 PROGRAMS FOR A TOTAL FUNDING OF \$50,000. THESE GRANTS IMPACTED 1,723 STUDENTS DURING THE SUMMER OF 2022. -- THE SALVATION ARMY READING CORPS LEARNING CENTER: A SUMMER DAY CAMP IS OFFERED FOR YOUTH IN THE SOUTHSIDE OF PENN NEIGHBORHOOD. THEY ARE PROVIDED BREAKFAST AND THEN ENJOY A DAY OF FUN INCLUDING EDUCATIONAL GAMES AND ACTIVITIES, CHARACTER DEVELOPMENT SKILLS, AND A WEEKLY FIELD TRIP. SNACKS ARE PROVIDED THROUGHOUT THE DAY AND LUNCH AND DINNER ARE

YOUTH DEVELOPMENT

PROVIDED.

- COMMUNITY-LEVEL OUTCOME: BY PARTICIPATING IN DIVERSE, SAFE, AND EFFECTIVE OUT-OF-SCHOOL TIME PROGRAMS, YOUTH WILL DEVELOP ACADEMIC,

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

23-1655375

ARTISTIC, AND/OR LEADERSHIP SKILLS.

-- BIRDSBORO COMMUNITY MEMORIAL CENTER, OUT OF SCHOOL EDUCATION

PROGRAMS: LITERACY PROGRAMS OFFERED AS PART OF THE AFTER-SCHOOL

CLUBHOUSE, WHICH ENGAGES STUDENTS, GRADES 1-6. STAFF ASSIST STUDENTS

WITH HOMEWORK AND READING SUPPORT. THE PROGRAM ALSO ENCOMPASSES SOCIAL

ACTIVITIES.

-- GIRL SCOUTS OF EASTERN PA, OUTREACH TO AT-RISK GIRLS: GIRLS IN

FUNDED INITIATIVES PROGRAMS PROVIDE HIGH-QUALITY OUT-OF-SCHOOL-TIME

THROUGH EDUCATION OPPORTUNITIES FOR GIRLS IN UNDERSERVED COMMUNITIES IN

THE CITY OF READING. GIRLS ATTEND WEEKLY MEETINGS AT CONVENIENT

COMMUNITY LOCATIONS BOTH DURING THE SCHOOL YEAR AND IN THE SUMMER.

THIS PROGRAM OPERATES WITHIN THE LOCAL NEIGHBORHOOD AT LOCATIONS

PROVIDED BY PARTNERSHIPS THAT HAVE A CONTINUED INTEREST IN CITIZENSHIP

TRAINING, PERSONAL FITNESS, AND CHARACTER DEVELOPMENT. ADULT VOLUNTEERS

ADMINISTER THE PROGRAMS AT ALL LEVELS WITH SUPPORT FROM THE HAWK

MOUNTAIN COUNCIL. THE LEVEL OF YOUTH LEADERSHIP IS BASED UPON AGE

APPROPRIATE ACTIVITIES.

-- HAWK MOUNTAIN COUNCIL BOY SCOUTS OF AMERICA, URBAN SCOUTING:

SCOUTREACH IS THE HAWK MOUNTAIN COUNCIL'S COMMITMENT TO ENSURING ALL

YOUNG PEOPLE HAVE AN OPPORTUNITY TO JOIN SCOUTING, REGARDLESS OF THEIR

CIRCUMSTANCES, NEIGHBORHOOD, OR CULTURAL OR ETHNIC BACKGROUND.

SCOUTREACH IS THE SAME PROGRAM AS SCOUTING IN ANY OTHER AREA BUT IS

TYPICALLY AN AFTER-SCHOOL PROGRAM THAT PROVIDES AN ADDITIONAL EMPHASIS

ON SPECIAL NEEDS OF PARTICIPANTS, SUCH AS PARENTAL INVOLVEMENT,

FINANCIAL ABILITY, ACADEMIC PERFORMANCE, ACCESS TO TECHNOLOGY AND

CULTURAL AND LANGUAGE DIFFERENCES. UWBC PROVIDED AN INCREASED

Schodu

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 INVESTMENT TO ASSIST WITH PILOTING THE NEW STEM SCOUTS WITHIN THE CITY OF READING. THIS VALUES-BASED PROGRAM FOCUSES ON SCHOOL SUCCESS AND YOUTH DEVELOPMENT. STEM SCOUTS EXPANDS BOY SCOUTING OPPORTUNITIES TO GIRLS. SCOUTS SPEND 90 MINUTES PER MEETING WORKING ON SELF-IMPROVEMENT, CRITICAL THINKING, AND HANDS ON EXPERIMENTATION FOCUSING ON TOPICS SUCH AS PHYSICS OF LIGHT, PROPERTIES OF MATTER, MAGNETISM, PROPERTIES OF SOUND, ROBOTICS, ARCHAEOLOGY, AND SPACE. -- OLIVET BOYS AND GIRLS CLUB OF READING AND BERKS COUNTY, COMPREHENSIVE YOUTH DEVELOPMENT: DURING THE SCHOOL YEAR KIDS ATTEND THEIR CLUBS MONDAY THROUGH FRIDAY AND PARTICIPATE IN MANY ACTIVITIES AND PROGRAMS THAT ENRICH THEIR LIVES AND HELP MAKE THEM SUCCESSFUL STUDENTS, ATHLETES, AND CITIZENS. MEMBERS AGES 6-12 PARTICIPATE FROM 2:30-6 P.M. MEMBERS 13 AND OLDER UTILIZE THE CLUBS FROM 6-9 P.M. THESE PROGRAMS INCLUDE TUTORING, ARTS AND CRAFTS, SPORTS AND RECREATION, COMPUTER AND TECHNOLOGY, LEADERSHIP AND CHARACTER BUILDING, COLLEGE ACCESS AND CAREER DEVELOPMENT, AND VISUAL AND PERFORMING ARTS. -- THE SALVATION ARMY READING CORPS LEARNING CENTER: AN AFTER-SCHOOL PROGRAM IS AVAILABLE FOR CHILDREN IN THE SOUTH OF PENN NEIGHBORHOOD, WHERE THERE ARE LIMITED OPPORTUNITIES FOR YOUTH. CHILDREN ARE ABLE TO ATTEND RIGHT AFTER SCHOOL UNTIL 5 P.M. THEY ARE PROVIDED SNACKS, RECEIVE TUTORING, HELP WITH HOMEWORK ASSIGNMENTS, AND CAN PARTICIPATE IN ARTS AND CRAFTS, PLAY GAMES IN THE GYM, READ BOOKS, WORK OUT PUZZLES, AND HAVE DINNER BEFORE HEADING HOME. EDUCATIONAL CASE MANAGEMENT COMMUNITY-LEVEL OUTCOME: INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES.

-- COMMUNITIES IN SCHOOLS (CIS), INTEGRATED STUDENT SUPPORT: THE CIS

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Name of the organization
UNITED WAY OF BERKS COUNTY, INC.

Employer identification number 23-1655375

MODEL OF INTEGRATED STUDENT SUPPORT OPERATES THROUGH THE COORDINATION

AND DELIVERY OF SCHOOL-WIDE SUPPORTS, GROUP-LEVEL SUPPORTS, AND

INDIVIDUALIZED SUPPORTS FOCUSING ON IMPROVING ATTENDANCE, BEHAVIOR, AND

ACADEMIC PERFORMANCE. AT THE READING INTERMEDIATE HIGH SCHOOL, CIS IS

WORKING TO ESTABLISH AND STRENGTHEN RELATIONSHIPS WITH STUDENTS,

FAMILIES, SCHOOL DISTRICT STAFF, AND COMMUNITY PARTNERS.

LITERACY

- COMMUNITY-LEVEL OUTCOME: STUDENTS IMPROVE MEANING-BASED LITERACY

SKILLS. MEANING-BASED SKILLS INCLUDE ORAL LANGUAGE (VOCABULARY AND WORD

KNOWLEDGE), TEXT CHARACTERISTICS, UNDERSTANDING OF PURPOSE, INTEREST,

MOTIVATION AND RELEVANT BACKGROUND KNOWLEDGE.

READY.SET.READ!

THIRD GRADE READING PROFICIENCY IS A KEY INDICATOR OF FUTURE SUCCESS,

YET RECENT PSSA SCORES SHOW THAT A HIGH PERCENT OF THIRD GRADERS IN

BERKS COUNTY FALL SHORT OF BEING PROFICIENT. LAUNCHED IN 2012,

READY.SET.READ! (RSR) IS A COLLABORATION AMONG UNITED WAY OF BERKS

COUNTY, THE EDUCATIONAL AND BUSINESS COMMUNITIES, AND COMMUNITY

ORGANIZATIONS WORKING TO IMPROVE READING PROFICIENCY FOR STUDENTS BY

THE END OF THIRD GRADE. THE COLLECTIVE WORK FOCUSES ON FOUR KEY

STRATEGIES: IMPLEMENT SCHOOL-READINESS ACTIVITIES FOR PRE-SCHOOL

CHILDREN TO SUPPORT LANGUAGE AND PRE-LITERACY DEVELOPMENT IN YOUNG

CHILDREN, CONNECT TUTORS WITH EARLY GRADE STUDENTS NEEDING SUPPLEMENTAL

INSTRUCTION, ENGAGE PARENTS TO PROMOTE LITERACY AND MOBILIZE THE

COMMUNITY AROUND THIS WORK.

RSR 2022 PROGRAM OVERVIEW:

Employer identification number Name of the organization UNITED WAY OF BERKS COUNTY, INC. 23-1655375 - HISTORICALLY, STAR READERS HAS PROVIDED TUTORING TO 35 ELEMENTARY SCHOOLS IN 14 SCHOOL DISTRICTS AND SERVING OVER 300 STUDENTS IN FIRST AND SECOND GRADE BUT HAS CONTINUED TO RECOVER FROM THE IMPACTS OF THE PANDEMIC. IN THE 2021-2022 SCHOOL YEAR STAR READERS PROVIDED TUTORING TO 20 ELEMENTARY SCHOOLS IN 8 SCHOOL DISTRICTS AND WAS DELIVERED BY 153 VOLUNTEER TUTORS SERVING 162 STUDENTS IN FIRST AND SECOND GRADES. GROWING READERS: LATINO-OWNED CHILDCARE CENTERS IN THE CITY OF READING RECEIVE COACHING AND MENTORING SERVICES ALONG WITH CURRICULUM SUPPORT TO ENHANCE LITERACY DEVELOPMENT FOR THEIR STUDENTS. GROWING READERS ALSO OFFERS A PROFESSIONAL DEVELOPMENT PROGRAM TO ASSIST CHILDCARE TEACHERS IN OBTAINING THEIR CHILD DEVELOPMENT ASSOCIATE CREDENTIAL (CDA) THROUGH A PARTNERSHIP WITH READING AREA COMMUNITY COLLEGE. IN 2022, 10 CANDIDATES COMPLETED THE EDUCATION PORTION OF THE PROGRAM WITH 7 CDAS EARNED. THREE ADDITIONAL CDAS WERE EARNED BY STUDENTS FROM PREVIOUS COHORTS WHO WERE DELAYED DUE TO THE CONSTRAINTS OF COVID 19, BRINGING THE 2022 TOTAL EARNED CDAS TO 10. ADDITIONALLY, 7 OTHER STUDENTS COMPLETED 50% OF PROGRAM REQUIREMENTS (ONE CLASS AND THE CDA APPLICATION PROCESS REMAIN TO BE COMPLETED IN 2023). UWBC WORKED WITH CANDIDATES FROM 8 CENTERS. COACHING AND MODELING WAS SCHEDULED IN 2 CENTERS (LITTLE GENIUS DAY CARE WITH ALL NEW STAFF AND BABIES N MOTION). ACTUAL DELIVERY WAS DELAYED DUE TO STAFFING ISSUES IN MANY CENTERS ACROSS THE CITY. THERE WERE 146 CHILDREN SERVED FOR GROWING READERS, RESULTING FROM PROFESSIONAL DEVELOPMENT OF THE TEACHERS. READ WITH ME PROVIDES A BOOK BORROWING PROGRAM TO PROMOTE HOME BOOK READING ROUTINES IN FIVE ELEMENTARY SCHOOLS AND TWO CHILDCARE CENTERS IN A TOTAL OF 40 CLASSROOMS. VOLUNTEERS ALSO ASSIST WITH THE IMPLEMENTATION OF THIS PROGRAM, REVIEWING AND ROTATING THE BOOK BAGS ON A WEEKLY BASIS.

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 - REACH OUT AND READ INCORPORATES EARLY LITERACY INTO PEDIATRIC PRACTICES, PROVIDING PARENTS TOOLS TO HELP PREPARE THEIR CHILDREN TO LEARN AND READ. A TOTAL OF 670 BOOKS WERE DISTRIBUTED TO PARTNER PEDIATRIC PRACTICES TO CHILDREN, AGES BIRTH THROUGH FIVE YEARS OLD, AT THEIR ANNUAL CHECKUP. - SUMMER LEARNING GRANTS 2022: THIS COMPETITIVE GRANT WAS OPENED TO RSR PARTNER SCHOOLS, SUMMER LEARNING COALITION MEMBERS, AND OTHER ORGANIZATIONS SERVING BERKS COUNTY TITLE 1 STUDENTS. THE GRANT WAS DESIGNED TO PROVIDE UP TO \$5,000 IN SUPPORT OF SUMMER LEARNING PROGRAMMING UP TO AND INCLUDING 3RD GRADERS IN 2022. TEN SUMMER PROGRAMS RECEIVED GRANTS RANGING FROM \$2,600 - \$6,500 TOTALING \$50,000. THESE SUMMER PROGRAMS PROVIDED OVER 1,900 CHILDREN WITH AN OPPORTUNITY TO MITIGATE SUMMER LEARNING LOSS. - BOOKS FOR BIKES IS A SUMMER READING PROGRAM FACILITATED BY UWBC IN THE OAKBROOK HOMES COMMUNITY OF READING THROUGH PARTNERSHIPS WITH BERKS COMMUNITY HEALTH CENTER, CUSTOMERS BANK, READING HOUSING AUTHORITY, READING SCHOOL DISTRICT, ALVERNIA UNIVERSITY, AND YMCA READING BRANCH. IN ITS SEVENTH YEAR, OVER 200 CHILDREN SPENT AN AVERAGE OF 78 HOURS EACH ENGAGED IN LITERACY ACTIVITIES OVER A 6-10 WEEK PERIOD (PROGRAMS DIFFERED IN LENGTH) IN SUMMER 2022. OF THESE CHILDREN, 200 RECEIVED NEW BIKES AND HELMETS, COURTESY OF CUSTOMERS BANK, FOR ATTAINING AT LEAST 75% PARTICIPATION RATE IN THE BOOKS FOR BIKES PROGRAM. - READ ALLIANCE: READ ALLIANCE IS A DUAL IMPACT PROGRAM TRAINING HIGH SCHOOL STUDENTS TO TUTOR FIRST GRADERS STRUGGLING WITH READING. IN 2022, UWBC EXPANDED A PILOT TO FACILITATE A PROGRAM AT BOTH READING SCHOOL DISTRICT'S 10TH AND PENN ELEMENTARY SCHOOL AND THE OLIVET BOYS AND GIRLS AT OAKBROOK CLUB. EIGHTEEN ELEMENTARY STUDENTS PARTICIPATED ACROSS BOTH SITES PAIRED WITH 21 HIGH SCHOOL STUDENTS TRAINED WITH THE

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Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 READING FOR ALL LEARNERS CURRICULUM. ALL CHILDREN PARTICIPATING IN THE PROGRAM EXPERIENCED READING GROWTH. 65 PERCENT MET THEIR READING GOAL OF ATTAINING A YEAR OF GROWTH WHILE IN THE PROGRAM. THE FIRST GRADERS GREW SOCIALLY AS WELL AS ACADEMICALLY. THEY IMPROVED THEIR READING SKILLS WHILE CREATING BONDS WITH THEIR PEERS AND TEENS IN THE PROGRAM. FOR MANY OF THE TEENS, THIS WAS THEIR FIRST PAID WORK EXPERIENCE AND PROVIDED THEM WITH THE OPPORTUNITY TO LEARN FIRST-HAND WHAT A CAREER IN EDUCATION COULD BE LIKE. THE PROGRAM RAN FOR 15 WEEKS STARTING FEBRUARY, MONDAY THROUGH THURSDAY FROM 3:00-4:30. YOCUM INSTITUTE FOR ARTS EDUCATION RECEIVED A \$25,000 INVESTMENT FROM UWBC TO THE SUPPORT NEIGHBORHOOD BRIDGES, A COMPREHENSIVE PROGRAM OF STORYTELLING AND CREATIVE DRAMA THAT IS CURRICULUM-BASED AND DEVELOPS CHILDREN'S CRITICAL AND CULTURAL LITERACY, VOCABULARY, WRITING AND COMMUNICATION SKILLS. IT IS RECOGNIZED BY THE U.S. DEPARTMENT OF EDUCATION'S OFFICE OF IMPROVEMENT AND INNOVATION AS AN EFFECTIVE MODEL FOR INTEGRATING THE ARTS WITH STANDARDS-BASED EDUCATION PROGRAMS. YOCUM DELIVERS THE PROGRAM TO ALL FOUR OF THE THIRD-GRADE CLASSROOM AT 16TH & HAAK ELEMENTARY SCHOOL, READING SCHOOL DISTRICT, AS WELL AS SUMMER PROGRAMMING AT 16TH & HAAK AND 10TH & PENN ELEMENTARY, READING SCHOOL DISTRICT.

- READING PUBLIC LIBRARY (RPL) RECEIVED A \$25,000 INVESTMENT TO

SUPPORT ITS EARLY LITERACY PROGRAM AND THE ENDEAVORS OF THE EARLY

LITERACY OUTREACH COORDINATOR. IN 2022, RPL WAS ABLE TO RESUME

IN-PERSON PROGRAMMING. ACTIVITIES INCLUDED HOSTING AUTHOR VISITS,

PROVIDING PARENTING WORKSHOPS THAT DEMONSTRATE THE IMPORTANCE OF EARLY

LITERACY LEARNING AND STRATEGIES, OPPORTUNITIES FOR FAMILIES TO USE

DRAMATIC PLAY CENTERS AND THE DISTRIBUTION OF OVER 900 BOOKS TO

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

Employer identification number 23-1655375

CHILDREN.

FINANCIAL STABILITY

UNITED WAY OF BERKS COUNTY IS COMMITTED TO EFFORTS THAT HELP

INDIVIDUALS AND FAMILIES ACCESS STABLE HOUSING, GAIN JOB SKILLS AND

BUILD FINANCIAL LITERACY SO THEY HAVE INCREASED OPPORTUNITIES TO

ACHIEVE LONG-TERM FINANCIAL STABILITY, BENEFITTING 2,500+ BERKS

RESIDENTS IN 2022. THIS IS ACCOMPLISHED THROUGH FUNDING PROGRAMS WITH

OUR AGENCY PARTNERS, IN ADDITION TO PROVIDING SPECIAL GRANTS FOR OTHER

ORGANIZATIONS HELPING PEOPLE TO ATTAIN FINANCIAL INDEPENDENCE IN

DIFFERENT WAYS. THESE SERVICES ARE VITAL AS WE CONTINUE TO RECOVER FROM

COVID-19 AND ASSIST PEOPLE REGAIN EMPLOYMENT.

AFFORDABLE HOUSING

- COMMUNITY-LEVEL OUTCOME: INDIVIDUALS HAVE ACCESS TO SAFE AND AFFORDABLE HOUSING.
- -- HABITAT FOR HUMANITY OF BERKS COUNTY, INC., HOME

 CONSTRUCTION/RENOVATION FOR LOW INCOME FAMILIES: HABITAT FOR HUMANITY

 BUILDS, RENOVATES, AND REPAIRS HOMES USING VOLUNTEER LABOR AND

 DONATIONS TO PROVIDE SAFE, AFFORDABLE HOUSING FOR LOW-INCOME FAMILIES.

 RECIPIENTS OF HOMES INVEST THEIR OWN LABOR, CALLED "SWEAT EQUITY", INTO

 THE BUILDING/RENOVATION, AND PURCHASE THE HOME THROUGH AN AFFORDABLE

 FINANCING PROGRAM.
- COMMUNITY-LEVEL OUTCOME: INDIVIDUALS HAVE ACCESS TO TRANSITIONAL OR PERMANENT SUPPORTIVE HOUSING.
- -- THE SALVATION ARMY READING CORPS, PERMANENT SUPPORTIVE HOUSING:
 SUPPORTIVE HOUSING PROGRAM OFFERS PERMANENT HOUSING TO CHRONICALLY

HOMELESS AND DISABLED ADULTS AND FAMILIES. THE PROGRAM INCLUDES RENTAL

Name of the organization UNITED WAY OF BERKS COUNTY, INC.

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ASSISTANCE, LANDLORD RELATIONS, LIFE SKILLS TRAINING, MONITORING OF
BOTH FISCAL (BUDGET) AND PHYSICAL/MENTAL HEALTH ISSUES, CONNECTION WITH
THE SALVATION ARMY'S FAMILY SERVICES PROGRAM, AND OTHER COMMUNITY
PROGRAMS. SKILLED CASEWORKERS DEVELOP AND MONITOR A 12-POINT
ENCOURAGEMENT PLAN FOR EACH INDIVIDUAL AND FAMILY.

-- YMCA OF READING & BERKS COUNTY, TRANSITIONAL HOUSING: INDIVIDUALS
WHO ARE EXPERIENCING HOMELESSNESS, CHEMICAL DEPENDENCY, MENTAL HEALTH
ISSUES, AND SOCIAL SERVICE NEEDS IN BERKS COUNTY HAVE A SAFE AND SECURE
PLACE TO STAY. THE TRANSITIONAL LIVING PROGRAMS PROVIDE INTENSIVE CASE
MANAGEMENT SERVICES AND SUPPORTIVE RESOURCE CONNECTIONS IN AN EFFORT TO
ADDRESS AND RESOLVE THE ROOT CAUSES OF HOMELESSNESS, CHEMICAL

DEPENDENCY, MENTAL HEALTH, AND OTHER SOCIAL SERVICE NEEDS.

EMPLOYMENT/JOB SKILLS

- PARTICIPATE IN JOB PREPAREDNESS AND SOFT SKILLS TRAINING, AND RECEIVE

 SUPPORT TO BETTER CONNECT THEM WITH, AND HELP MAINTAIN, EMPLOYMENT.

 -- THRESHOLD REHABILITATION SERVICES, INC., BERKS PERSONNEL NETWORK:

 PROVIDES COMPREHENSIVE EMPLOYMENT SERVICES DESIGNED TO SUPPORT AND

 EMPOWER PEOPLE WITH DISABILITIES TO OBTAIN AND MAINTAIN COMPETITIVE

 EMPLOYMENT IN THE COMMUNITY. THE SERVICES ARE INDIVIDUALLY TAILORED TO

 MEET EACH PERSON'S AREAS OF NEED. ACTIVITIES MAY INCLUDE CAREER

 EXPLORATION, RESUME AND EMPLOYMENT APPLICATION SUPPORT, JOB INTERVIEW

 SUPPORT, ADVOCACY, TRANSPORTATION TRAINING, JOB DEVELOPMENT AND
- -- BERKS CONNECTIONS PRETRIAL SERVICES, PRISONER REENTRY SERVICES:

 INMATES AT THE BERKS COUNTY JAIL ARE ASSESSED UTILIZING A

PLACEMENT, ON-THE-JOB TRAINING, SERVICE COORDINATION, AND FOLLOW-UP

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SUPPORT.

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 NATIONALLY-VALIDATED RISK-NEEDS TOOL AND SCREENED FOR POST-RELEASE NEEDS. INMATES WHO QUALIFY ARE TRANSFERRED TO THE BERKS COUNTY COMMUNITY REENTRY CENTER (CRC). ALL RESIDENTS ARE ASSIGNED A CASE MANAGER AND RECEIVE AN INDIVIDUALIZED TRANSITION PLAN. SECURING STABLE, SUSTAINABLE EMPLOYMENT IS A GOAL THAT BCPS SPENDS THE MOST TIME WORKING ON WITH CLIENTS' POST-RELEASE. REENTRANTS REVIEW LESSONS LEARNED FROM EMPLOYMENT GROUPS AT THE CRC AND ARE PROVIDED WITH ONGOING COACHING AND SUPPORT TO AID IN OBTAINING AND MAINTAINING EMPLOYMENT. CLIENTS RECEIVE DIRECT ASSISTANCE THROUGH JOB LEADS, INTERVIEWING SKILLS PRACTICE, RESUME UPDATES AND SUPPORT UTILIZING THE COMPUTER BASED LEARNING CENTER (CBLC) FOR COMPLETING APPLICATIONS, AND CHECKING EMAIL FOR CORRESPONDENCE FROM POTENTIAL EMPLOYERS. - COMMUNITY-LEVEL OUTCOME: INDIVIDUALS IMPROVE LITERACY AND ENGLISH LANGUAGE SKILLS. -- LITERACY COUNCIL OF READING-BERKS, LITERACY TRAINING AND ESL: ONE-ON-ONE TUTORING MATCHES ADULTS WITH A TRAINED VOLUNTEER TUTOR TO WORK ON THE BASIC SKILLS NEEDED TO GET OR RETAIN A JOB OR ENTER POST-SECONDARY EDUCATION. ESL CLASSES AND ENGLISH-LANGUAGE CIVIC CLASSES ARE CONDUCTED WEEKLY, RANGING FROM THE BEGINNING LEVEL TO HIGH ADVANCED LEVEL. CLASSES HELP ADULTS LEARN TO SPEAK, READ AND WRITE ENGLISH, AND PREPARE THEM FOR SUCCESSFUL CAREERS. THEY ALSO OFFER CITIZENSHIP PREPARATION CLASSES, A WORKFORCE DEVELOPMENT PROGRAM, HIGH SCHOOL EQUIVALENCY CERTIFICATION CLASSES, AND MORE. -- LITERACY COUNCIL OF READING-BERKS, ENGLISH FORWARD: INCREASES ACCESS TO ESL CLASSES IN BERKS COUNTY AND IMPROVES THE QUALITY OF ESL INSTRUCTION IN ADULT CLASSROOMS THROUGH INSTRUCTOR TRAINING AND SUPPORT, CLASSROOM RESOURCE DEVELOPMENT, AND TECHNICAL ASSISTANCE. ONCE INSTRUCTORS COMPLETE THE 11-HOUR INSTRUCTOR TRAINING, THEY CAN BEGIN Schedule O (Form 990) 2022

Employer identification number Name of the organization UNITED WAY OF BERKS COUNTY, INC. 23-1655375 THEIR OWN ESL PROGRAMS. THE COUNCIL PROVIDES CONTINUED LEARNING OPPORTUNITIES FOR INSTRUCTORS TO ENSURE THE QUALITY OF ADULT INSTRUCTION ACROSS ALL ESL PROGRAMS. -- READING AREA COMMUNITY COLLEGE, BILINGUAL ESL PROGRAM : SINCE 2008, UNITED WAY HAS PROVIDED A YEARLY GRANT TO READING AREA COMMUNITY COLLEGE TO OFFER ENGLISH AS A SECOND LANGUAGE (ESL) CLASSES FOR PEOPLE WITH THE MOST BASIC ENGLISH LANGUAGE SKILLS, OR NONE AT ALL, AND PROVIDE THEM WITH A MORE FLEXIBLE AND CUSTOMIZED LEARNING ENVIRONMENT. IN 2022, 136 PEOPLE WERE ABLE TO COMPLETE THE PROGRAM. PERSONAL FINANCIAL MANAGEMENT INDIVIDUALS DEVELOP BASIC FINANCIAL MANAGEMENT SKILLS. -- BERKS COALITION TO END HOMELESSNESS, HOMELESS PREVENTION -- BOYERTOWN AREA MULTI-SERVICE, INC., BASIC NEEDS -- FRIEND, INC. COMMUNITY SERVICES, COMMUNITY RESOURCE CONNECTIONS -- GREATER READING MENTAL HEALTH ALLIANCE, ADVOCACY & SUPPORT GROUPS -- HABITAT FOR HUMANITY OF BERKS COUNTY, HOME OWNERSHIP OPPORTUNITIES FOR MODERATE INCOME FAMILIES -- THE SALVATION ARMY READING CORPS, PERMANENT SUPPORTIVE HOUSING FINANCIAL STABILITY CASE MANAGEMENT INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES. -- BERKS COALITION TO END HOMELESSNESS, HOMELESS PREVENTION -- BERKS CONNECTIONS PRETRIAL SERVICES, PRISONER REENTRY SERVICES -- LITERACY COUNCIL OF READING-BERKS, LITERACY TRAINING AND ESL -- THE SALVATION ARMY READING CORPS, PERMANENT SUPPORTIVE HOUSING -- YMCA OF READING & BERKS COUNTY, TRANSITIONAL HOUSING

Name of the organization
UNITED WAY OF BERKS COUNTY, INC.

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HEALTH FOCUS AREA

HEALTH IMPACTS EVERY ASPECT OF A PERSON'S LIFE. GOOD HEALTH ALLOWS

CHILDREN TO LEARN BETTER AND ADULTS TO LIVE MORE PRODUCTIVE, FULLER

LIVES. THROUGH FUNDING PROGRAMS WITH OUR AGENCY PARTNERS AND OUR

INVOLVEMENT IN VARIOUS COMMUNITY COLLABORATIONS, UWBC IS CREATING

OPPORTUNITIES FOR PEOPLE TO ACHIEVE THEIR OPTIMAL HEALTH AND

INDEPENDENCE. PROGRAMS UNITED WAY SUPPORTS ADDRESS BOTH THE PREVENTIVE

ASPECT OF PHYSICAL AND MENTAL HEALTH ISSUES, WHILE ALSO ADDRESSING

INTERVENTIONAL NEEDS AND IMPACTED 33,850 BERKS RESIDENTS IN 2022.

MENTAL HEALTH

- COMMUNITY-LEVEL OUTCOME: INDIVIDUALS EXPERIENCING BEHAVIORAL HEALTH
 PROBLEMS RECEIVE SERVICES THAT IMPROVE THEIR ABILITY TO FUNCTION.
- -- FAMILY GUIDANCE CENTER, COUNSELING: ASSISTS PERSONS IN IMPROVING

 THEIR QUALITY OF LIFE BY PROVIDING AFFORDABLE, ACCESSIBLE, QUALITY

 COUNSELING SERVICES. THEY UTILIZE QUALIFIED, CREDENTIALED, COMPETENT

 STAFF TRAINED IN EVIDENCE-BASED PRACTICE APPROACHES.
- -- GREATER READING MENTAL HEALTH ALLIANCE, ADVOCACY AND SUPPORT

 GROUPS: ASSIST INDIVIDUALS, INCLUDING CHILDREN AND THEIR FAMILIES, AS

 WELL AS ADULTS, WITH MENTAL ILLNESS TO DEVELOP STRATEGIES AND ADVOCATE

 FOR THEMSELVES IN ORDER TO RECEIVE THE SERVICES THEY NEED.

HEALTH AND WELLNESS

- COMMUNITY-LEVEL OUTCOME: INDIVIDUALS RECEIVE ADVOCACY AND
 PREVENTATIVE AND MANAGED CARE FOR CHRONIC DISEASES AND HEALTH
 CONDITIONS.
- -- BOYERTOWN AREA MULTI-SERVICE (BAMS), SUPPORTIVE SERVICES: SINCE ITS

 INCEPTION, BAMS HAS PROVIDED CASE MANAGEMENT SERVICES TO FAMILIES AND

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Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 THEN SEEN BY A PHYSICIAN OR PA. THE GOAL IS TO REPLICATE WHAT ONE MIGHT FIND IN A BRICK-AND-MORTAR PRIMARY CARE PRACTICE. VERY FREQUENTLY DURING A VISIT, PHYSICIANS CAN PROVIDE IMMEDIATE TREATMENT. THE TEAM PROVIDES AN IN-PERSON CLINIC 1/WEEK AT VARIOUS COMMUNITY LOCATIONS. ADDITIONALLY, A TELEMEDICINE KIOSK LOCATED AT HOPE RESCUE OPERATES FOR 12-15 HOURS/WEEK. - COMMUNITY-LEVEL OUTCOME: INDIVIDUALS HAVE ACCESS TO HEALTHY FOODS TO IMPROVE THEIR HEALTH. -- BERKS ENCORE, MEALS ON WHEELS: HOME-BOUND, ISOLATED SENIORS AGED 60+ AND HOME-BOUND DISABLED ADULTS UNDER THE AGE OF 60 RECEIVE A HOT, HOME-DELIVERED MEAL, FIVE DAYS A WEEK. THIS HOME DELIVERED MEAL SERVICE ENABLES THE HOME-BOUND SENIOR TO LIVE INDEPENDENTLY AS LONG AS POSSIBLE AND RELIEVES THE ISOLATION AND LONELINESS THEY EXPERIENCE. SELF-SUFFICIENCY AND INDEPENDENT LIVING COMMUNITY-LEVEL OUTCOME: INDIVIDUALS RECEIVE EARLY ASSESSMENT AND INTERVENTION SERVICES. -- BERKS ENCORE, MEALS ON WHEELS - COMMUNITY-LEVEL OUTCOME: INDIVIDUALS MAINTAIN INDEPENDENT LIVING IN THEIR RESIDENCE. -- EASTERSEALS EASTERN PENNSYLVANIA, OUTPATIENT THERAPY: AT THEIR CENTER IN READING, EASTERSEALS OFFERS PHYSICAL, OCCUPATIONAL AND SPEECH THERAPIES TO HELP CHILDREN OF ALL AGES DEVELOP NEW SKILLS AND IMPROVE THEIR OVERALL LEVEL OF FUNCTIONING. -- EASTERSEALS EASTERN PENNSYLVANIA, PEDIATRIC CLINICS: SPECIALTY MEDICAL CLINICS BRING THE SERVICES OF TOP-QUALITY MEDICAL AND SURGICAL SPECIALISTS TO BERKS COUNTY TO WORK WITH CHILDREN WITH COMPLEX MEDICAL

NEEDS. EASTERSEALS PROVIDE SPECIALTY PEDIATRIC NEUROLOGY, ORTHOPEDIC,

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ORTHOTIC, AND FEEDING CLINICS ALL UNDER ONE ROOF. CLINIC SERVICES ARE
OFFERED AT NO CHARGE TO THE FAMILIES.

HEALTH CASE MANAGEMENT

- INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES.
- -- BERKS TEENS MATTER (MANAGED BY CO-COUNTY WELLNESS SERVICES): UNITED
 WAY IS A FOUNDING PARTNER AND FUNDER IN THE DEVELOPMENT OF BERKS TEENS
 MATTER, A TEEN PREGNANCY PREVENTION INITIATIVE MANAGED BY CO-COUNTY
 WELLNESS SERVICES, TO MEASURABLY DECREASE TEEN PREGNANCY RATES
 THROUGHOUT BERKS COUNTY.
- -- BERKS ENCORE, MEALS ON WHEELS
- -- CO-COUNTY WELLNESS SERVICES, CASE MANAGEMENT FOR OLDER ADULTS
- -- EASTERSEALS EASTERN PENNSYLVANIA, OUTPATIENT THERAPY SERVICES
- -- EASTERSEALS EASTERN PENNSYLVANIA, PEDIATRIC CLINICS

COMMUNITY COLLABORATIONS

BERKS COMMUNITY HEALTH CENTER: TO ASSIST IN MAKING HEALTH CARE EASIER

TO OBTAIN FOR BERKS COUNTY RESIDENTS WHO ARE UNINSURED OR UNDERINSURED,

UNITED WAY PARTNERED WITH LOCAL HOSPITALS AND OTHER ORGANIZATIONS TO

ESTABLISH THE BERKS COMMUNITY HEALTH CENTER (BCHC), WHICH OPERATES OUR

COMMUNITY'S TWO FEDERALLY QUALIFIED HEALTH CENTERS AND PROVIDES

QUALITY, PRIMARY HEALTH CARE FOR ADULTS AND CHILDREN, REGARDLESS OF

ABILITY TO PAY. UNITED WAY'S ROLE IN THIS EFFORT INCLUDES PROVIDING

STAFF TO SERVE ON THE ADVISORY COUNCIL TO THE BOARD, BUILDING

RELATIONSHIPS WITH OTHER COMMUNITY ORGANIZATIONS TO IDENTIFY POTENTIAL

CLIENTS, AND ASSISTING WITH MARKETING AND AWARENESS FOR THE CENTER.

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 UWBC INVESTED \$25,000 IN PENN STATE HEALTH ST. JOSEPH FOR VEGGIE RX PROGRAM: WITH MORE FAST FOOD AND CORNER STORES THAN GROCERY OR MARKET OPTIONS, THE CITY OF READING IS CONSIDERED A "FOOD DESERT." IN A 2014 READING FOOD NEEDS ASSESSMENT, RESPONDENTS LISTED AFFORDABILITY AND ACCESSIBILITY AS BARRIERS AND 62 PERCENT CONSUMED VEGETABLES AND FRUIT LESS THAN FOUR TIMES A WEEK. RESULTS FROM TWO RECENT COMMUNITY HEALTH NEEDS ASSESSMENTS FOR BERKS COUNTY PRIORITIZE OBESITY AND CHRONIC ILLNESS AS AREAS OF GREATEST NEED. OVER 20 PERCENT OF ADULTS SUFFER FROM DIABETES, NEARLY 40 PERCENT HAVE HIGH BLOOD PRESSURE, AND 35 PERCENT ARE CONSIDERED OBESE. (HTTP://WWW.THEFUTUREOFHEALTHCARE.ORG/ASSETS/COMMUNITY-HEALTH-NEEDS-ASSE SMENT.PDF). IN RESPONSE TO THESE COMMUNITY NEEDS, PENN STATE HEALTH ST. JOSEPH IMPLEMENTED A PREVENTATIVE HEALTHCARE PROGRAM IN WHICH PHYSICIANS AT THEIR DOWNTOWN READING CAMPUS PRESCRIBE VOUCHERS FOR DISCOUNTED FRUITS AND VEGETABLES TO PATIENTS AT-RISK FOR, OR CURRENTLY FACING, FOOD INSECURITY AND/OR DIET-RELATED CHRONIC ILLNESSES. THROUGH PARTNERSHIPS WITHIN THE LOCAL COMMUNITY AND ADAPTING THE NATIONALLY USED, EVIDENCE-BASED VEGGIE RX MODEL, PATIENTS REDEEM VOUCHERS AT PARTICIPATING FARMER'S MARKETS, GROCERY STORES, AND BODEGAS. AUGMENTED WITH COOKING DEMONSTRATIONS AND NUTRITION EDUCATION, THIS PROGRAM IS CLOSELY MONITORED TO TRACK KEY PATIENT HEALTH INDICATORS, WHICH EVALUATE PROGRESS AND OVERALL PROGRAM EFFECTIVENESS. UNITED WAY'S ONGOING SUPPORT ASSISTED WITH PROGRAM EXPANSION FROM THE VEGGIE RX PILOT PROGRAM INTO ITS NEXT FORMAL PHASE, VEGGIE RX 2.0, AND SUSTAIN PSHSJ'S HEALTHY FOOD ACCESS PROGRAMMING FOR FOOD INSECURE AND AT-RISK PATIENTS DURING THESE CHALLENGING TIMES. VEGGIE RX 2.0 INCLUDED

Name of the organization

UNITED WAY OF BERKS COUNTY, INC.

REINSTATING FORMAL EDUCATION CLASSES USING A HYBRID MODEL OF IN-PERSON

AND VIRTUAL SESSIONS UNTIL IT IS SAFE TO MEET IN LARGER GROUPS. THE

COURSE CURRICULUM INCLUDES MORE EDUCATION AROUND PREPARING HEALTHY

RECIPES AT HOME, AS WELL AS VIRTUAL COOKING DEMONSTRATIONS. IN 2022,

THE TEAM PLANNED TO EXPAND PREVENTATIVE PROGRAMMING TO THE HOSPITAL'S

CENTERING PREGNANCY PROGRAM AT THE DOWNTOWN CAMPUS. BASED ON THE

NATIONAL BEST PRACTICE MODEL FROM THE CENTERING HEALTHCARE INSTITUTE,

THIS PROGRAM INCLUDES PEER-TO-PEER GROUP EDUCATION SESSIONS WITH

EXPECTANT MOTHERS, ANTICIPATING SUPPORT FOR 40 WOMEN WITH VOUCHER

INCENTIVES FOR SIX MONTHS.

SINGLECARE DISCOUNT PRESCRIPTION DRUG PROGRAM

UNITED WAY OF BERKS COUNTY HAS JOINED WITH 1,000 UNITED WAYS ACROSS THE

NATION IN LOWERING THE COSTS OF PRESCRIPTION MEDICATION THROUGH

ADMINISTERING SINGLECARE (PREVIOULSY FAMILYWIZE) PROGRAM. THE

SINGLECARE DISCOUNT PRESCRIPTION CARD IS AVAILABLE FREE-OF-CHARGE TO

ANYONE WHO NEEDS ASSISTANCE IN PAYING FOR PRESCRIPTIONS NOT COVERED BY

AN INSURANCE PLAN. IN 2022, INDIVIDUALS WERE ASSISTED WITH A

PRESCRIPTION DISCOUNT UTILIZING SINGLECARE, REPRESENTING \$251,467 IN

SAVINGS FOR PEOPLE ACROSS THE COUNTY.

SAFETY-NET SERVICES

PART OF UNITED WAY'S MISSION IS TO ENSURE THAT THE BASIC NECESSITIES OF

LIFE ARE AVAILABLE FOR THOSE IN NEED. UNITED WAY'S PARTNERSHIPS AND

FUNDED PROGRAMS PROVIDE A CRUCIAL SAFETY NET FOR VULNERABLE POPULATIONS

TO QUICKLY ACCESS HELP AND RECEIVE THE NECESSARY SUPPORT TO HELP THEM

HAVE A BETTER QUALITY OF LIFE, BOTH NOW AND IN THE FUTURE. MANY OF OUR

FUNDED PROGRAMS ARE ALSO TAKING AN ADDED APPROACH TO PROVIDING

232212 10-28-22

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 EMERGENCY SERVICES THAT SIMPLY TAKE CARE OF THE CRISIS AT HAND FOR THEIR CLIENTS; PROGRAMS ARE NOW STARTING TO HELP ADDRESS THE ROOT CAUSES OF WHY A CLIENT NEEDS SAFETY NET SERVICES, TO HOPEFULLY AVOID THE CLIENT REQUIRING THESE TYPES OF SERVICES IN THE FUTURE. THE FOLLOWING PROGRAMS SUPPORTED OVER 130,300 RESIDENTS IN BERKS COUNTY IN 2022. BASIC NEEDS - COMMUNITY-LEVEL OUTCOME: INDIVIDUALS IN CRISIS HAVE THEIR BASIC NEEDS MET. -- AMERICAN RED CROSS TRI-COUNTY CHAPTER, DISASTER SERVICES: DISASTER CYCLE SERVICES PROVIDES IMMEDIATE EMERGENCY ASSISTANCE TO THE RESIDENTS OF BERKS COUNTY WHO HAVE BEEN AFFECTED BY NATURAL OR MAN-MADE DISASTERS. TRAINED RED CROSS VOLUNTEERS AND STAFF RESPOND TO DISASTER SITUATIONS AND PROVIDE FOR THE IMMEDIATE EMERGENCY NEEDS OF SHELTER, FOOD, AND CLOTHING. ADDITIONAL ASSISTANCE IN OBTAINING LOST MEDICATIONS AND EYEGLASSES IS ALSO PROVIDED. RED CROSS STAFF CONTINUES TO WORK LONGER TERM WITH CLIENTS THAT NEED HELP WITH RENT OR BEDDING OR REFERRALS FOR HOUSEHOLD FURNISHINGS. IN LARGER DISASTER SITUATIONS, THE RED CROSS IS RESPONSIBLE FOR MASS CARE SHELTERING AND FEEDING OF DISPLACED RESIDENTS. THE RED CROSS ALSO PROVIDES MASS CARE FEEDINGS FOR EMERGENCY RESPONSE PERSONNEL ON THE SCENE OF A DISASTER. STAFF AND VOLUNTEERS ARE TRAINED IN RED CROSS DISASTER SERVICES. -- BERKS COALITION TO END HOMELESSNESS (BCEH), HOMELESS PREVENTION: THE PANDEMIC CREATED A LARGE STRAIN ON OUR COMMUNITY AND THE EFFECTS ARE STILL BEING FELT. DUE TO THE EVICTION MORATORIUMS AND SUBSEQUENT RENTAL ASSISTANCE, HOUSING AND RENTAL COSTS HAVE DRAMATICALLY INCREASED LEADING TO MORE INDIVIDUALS NEEDING ASSISTANCE TO BE ABLE TO MAINTAIN THEIR HOUSING. UNITED WAY'S INVESTMENT HAS SUPPORTED MUCH-NEEDED STAFF

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Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 TO FACILITATE THE EMERGENCY RENTAL ASSISTANCE PROGRAM. THIS PROGRAM CAN ASSIST WITH ARREARS IN RENT AND UTILITIES AND PAY FOR SEVERAL MONTHS OF RENT FOR THE FUTURE. BCEH STAFF ASSIST CLIENTS WITH THE APPLICATION PROCESS AND WORK WITH LANDLORDS REGARDING PAYMENTS WITH A GOAL TO KEEP PEOPLE IN THEIR HOMES. -- FAMILY PROMISE OF BERKS COUNTY, INC., U-TURN PROGRAM: SERVES UNACCOMPANIED, HOMELESS AND AT-RISK YOUTH AND PROVIDES ADVOCACY, CASE MANAGEMENT, SHELTER, AND PERMANENT HOUSING. THE DROP-IN CENTER OFFERS YOUTH A SAFE, HOME-LIKE PLACE TO SHOWER, COOK, DO LAUNDRY, ACCESS TO DEDICATED STAFF, COMPUTERS, PEER CONNECTIONS, RECEIVE NUTRITIOUS SNACKS, MEALS, TOILETRIES AND MORE. IN 2022, 40 YOUTHS WERE PROVIDED SHELTER OR PREVENTED FROM EXPERIENCING AN EPISODE OF HOMELESSNESS. -- HELPING HARVEST, ACCESS TO FOOD: THE WEEKENDER PROGRAM WAS ESTABLISHED TO HELP NOURISH LOW-INCOME, AT-RISK, ELEMENTARY SCHOOL STUDENTS OVER THE WEEKEND A TIME WHEN THEY MAY OTHERWISE GO WITHOUT PROPER NOURISHMENT. CHILDHOOD POVERTY, AND AS A RESULT HUNGER, ARE UNFORTUNATELY GROWING PROBLEMS IN BERKS COUNTY. ACCORDING TO THE PENNSYLVANIA DEPARTMENT OF EDUCATION, FOOD AND NUTRITION DIVISION, APPROXIMATELY 50% OF BERKS COUNTY ELEMENTARY SCHOOL STUDENTS QUALIFY FOR FREE OR REDUCED LUNCHES; MEANING, THEIR FAMILY IS LIVING IN, OR CLOSE TO, POVERTY. -- JEWISH FAMILY SERVICE, SUPPORTIVE SERVICES: SUPPORTIVE SERVICES PROGRAM HELPS CLIENTS AND THEIR FAMILIES FACE VARIOUS CHALLENGES INCLUDING HEALTH, AGING, INTERPERSONAL RELATIONSHIPS, TRANSPORTATION, AND FINANCIAL DIFFICULTIES. CLIENTS ARE EITHER SELF-REFERRED OR REFERRED TO BY NEIGHBORS, FAMILY MEMBERS, CLERGY, PROFESSIONALS IN THE COMMUNITY, AND THROUGH HOSPITAL OUTREACH VISITS. EACH CLIENT IS

EVALUATED TO DETERMINE THE APPROPRIATE LEVEL OF SERVICE.

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 -- JEWISH FAMILY SERVICE, FOOD PANTRY: TWO FOOD PANTRIES ARE OFFERED EACH MONTH. ONE IS HELD AT ANOTHER UWBC PARTNER, OLIVET'S PENDORA PARK LOCATION. THE SECOND IS HELD AT THE SEVENTH DAY ADVENTIST CHURCH IN HAMPDEN HEIGHTS. IN 2022, OVER 4,500 PEOPLE WERE SERVED WITH THIS PROGRAM RECEIVING THE MOST BASIC NEED OF FOOD. -- MIDPENN LEGAL SERVICES , LEGAL REPRESENTATION TO SECURE BASIC NEEDS: LOW-INCOME CLIENTS RECEIVE LEGAL COUNSEL AND ADVICE REGARDING THEIR PARTICULAR LEGAL SITUATION THROUGH MIDPENN'S READING OFFICE. MIDPENN WORKS WITH SAFEBERKS TO ENSURE THAT ALL DOMESTIC VIOLENCE SURVIVORS HAVE ACCESS TO THE JUSTICE SYSTEM. THEY ARE A MEMBER OF BERKS COALITION TO END HOMELESSNESS (BCEH), AND THROUGH THIS PARTNERSHIP, MIDPENN MAKES AND ACCEPTS REFERRALS ON BEHALF OF INDIVIDUALS WHO REQUIRE THEIR LEGAL SERVICES. -- NEW JOURNEY COMMUNITY OUTREACH (NJCO) FOOD ACCESS PROGRAMS INCLUDE SOUP KITCHEN AND FOOD PANTRY SERVICES THAT FOCUS ON THE IMMEDIATE AND LONG-TERM HEALTH IMPLICATIONS OF RECEIVING A NUTRITIOUS DAILY MEAL AND SUPPLEMENTAL GROCERIES. NJCO IS THE LARGEST SOUP KITCHEN IN DOWNTOWN READING, WITH THE NEED CONTINUING TO GROW. PROGRAM DELIVERY CONTINUES WITH PRE-PACKAGING AND PROVIDING GRAB AND GO MEALS; THEY SERVED ON AVERAGE 200 LUNCHES PER DAY AND THE WEEKLY FOOD PANTRY SERVES 300 HOUSEHOLDS EACH WEEK. -- OPPORTUNITY HOUSE, EMERGENCY SHELTER: PROVIDES EMERGENCY SHELTER HOUSING TO HOMELESS CHILDREN, WOMEN AND MEN, AS WELL AS, ON-SITE CASE MANAGEMENT SERVICES, AND CHILDCARE. BERKS COUNSELING SERVICES PROVIDES ON-SITE BEHAVIORAL HEALTH COUNSELING AND MEDICAL CARE IS PROVIDED THROUGH THE BERKS COMMUNITY HEALTH CENTER AT 2ND STREET. -- SALVATION ARMY READING CORPS, FAMILY SERVICES PROGRAM: ASSIST CLIENTS TO RECEIVE EMERGENCY BASIC NEEDS, INCLUDING MONTHLY FOOD

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Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 DISTRIBUTIONS, CLOTHING DISTRIBUTIONS, AND THROUGH CASE MANAGEMENT PROVIDED UTILITY ASSISTANCE, PRESCRIPTION DRUG ASSISTANCE, RENTAL ASSISTANCE, EDUCATION ABOUT COMMUNITY RESOURCES AND APPROPRIATE REFERRALS. THEY ALSO OFFER A YEAR-ROUND FURNITURE BANK. -- SALVATION ARMY: SERVICE EXTENSION UNITS, COMMUNITY WELFARE: COVERING THE HAMBURG AREA, THEY PROVIDE IMMEDIATE EMERGENCY ASSISTANCE TO MEET A SHORT-TERM NEED. AS A SERVICE UNIT, THEY ARE A VOLUNTEER COMMITTEE IN A REGION WHERE THERE IS NO PROFESSIONAL SALVATION ARMY PERSONNEL. EXAMPLES OF SERVICE UNIT EMERGENCY ASSISTANCE PROVIDED INCLUDED GROCERIES, RENTAL ASSISTANCE, FUEL/UTILITIES, MEDICAL/DENTAL/EYE CARE, CLOTHING, SCHOOL SUPPLIES FOR SCHOOL AGED CHILDREN, TEMPORARY SHELTER, AND SEASONAL ASSISTANCE. - COMMUNITY-LEVEL OUTCOME: VICTIMS OF DOMESTIC VIOLENCE AND/OR SEXUAL ASSAULT ARE ENSURED SAFETY AND SUPPORTIVE SERVICES. -- SAFEBERKS, CRISIS SERVICES: SUPPORTS THE SAFE HOUSE PROGRAM, AN EMERGENCY SHELTER TO INDIVIDUALS AND FAMILIES IMPACTED BY DOMESTIC VIOLENCE AND SEXUAL ASSAULT FOR UP TO 60 DAYS. ALL DAILY NECESSITIES OF FOOD, CLOTHING, HYGIENE PRODUCTS, IN ADDITION TO SAFETY PLANNING, CASE MANAGEMENT AND CONNECTION TO COMMUNITY RESOURCES, DOMESTIC VIOLENCE AND SEXUAL ASSAULT COUNSELING, CHILDREN'S PROGRAMMING, INCLUDING A READY TO READ PROGRAM, NUTRITION PROGRAMS, RECREATIONAL SUPPORTS ARE PROVIDED. CRISIS SERVICES INCLUDE THE EMERGENCY HOTLINE, WITH TEXTING NOW AVAILABLE 24/7/365 IN ENGLISH AND SPANISH. THE RAPID RESPONSE PROGRAM PROVIDES SUPPORT TO VICTIMS SEEKING EMERGENCY PROTECTION OR WHO ARE ACCESSING EMERGENCY MEDICAL SERVICES, BASIC CARE, OR RAPE EXAMS AT AREA EMERGENCY ROOMS AND CLINICS.

- COMMUNITY-LEVEL OUTCOME: INDIVIDUALS HAVE ACCESS TO TRANSPORTATION.

-- AMERICAN RED CROSS: BERKS COUNTY CHAPTER, VETERANS TRANSPORTATION:

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 VETERANS RECEIVE SAFE AND RELIABLE TRANSPORTATION TO AND FROM THE LEBANON VA MEDICAL CENTER TO REACH NECESSARY MEDICAL APPOINTMENTS. -- BOYERTOWN AREA MULTI-SERVICE, BASIC NEEDS (UNDER AGE 60 POPULATION) -- OPPORTUNITY HOUSE, EMERGENCY SHELTER -- SALVATION ARMY: SERVICE EXTENSION UNITS, COMMUNITY WELFARE SAFETY NET CASE MANAGEMENT COMMUNITY-LEVEL OUTCOME: INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES. -- CASA OF BERKS COUNTY (COURT APPOINTED SPECIAL ADVOCATE PROGRAM): CASA IS A NATIONAL PROGRAM THAT RECRUITS AND TRAINS VOLUNTEERS TO SERVE AS ADVOCATES FOR CHILDREN WHO HAVE BEEN PLACED IN THE FOSTER CARE SYSTEM. THERE ARE ON AVERAGE 600 CHILDREN IN THE FOSTER CARE SYSTEM/RESIDENTIAL TREATMENT FACILITIES IN BERKS COUNTY. UWBC'S INVESTMENT INCLUDES OPERATIONAL SUPPORT, AS WELL AS, TO CONTINUE TO BUILD PROGRAM CAPACITY. IN 2022, CASA SERVED 110 CHILDREN WITH THE SUPPORT OF 50 VOLUNTEERS. -- CATHOLIC CHARITIES: DIOCESE OF ALLENTOWN, CASE MANAGEMENT AND COUNSELING FOR VETERANS AND THEIR FAMILIES: VETERANS ARE ASSESSED BY A CASE MANAGER TO DETERMINE THEIR IMMEDIATE NEEDS. A SERVICE PLAN IS CREATED TO IDENTIFY THE GOALS AND ACTION STEPS. THE CASE MANAGER WORKS WITH THE VETERAN TO ACCOMPLISH THESE GOALS, WHICH MAY INCLUDE JOB SEARCH, BUDGET COUNSELING AND GUIDANCE, REFERRAL TO BERKS COUNTY VETERAN'S ADMINISTRATION FOR SPECIFIC ASSISTANCE/ENTITLEMENTS, ASSISTANCE WITH APPLICATIONS FOR SUBSIDIZED HOUSING, FOOD STAMPS, AND OTHER LOW-INCOME PROGRAMS FOR WHICH THE VETERAN MAY BE ELIGIBLE. -- CENTRO HISPANO DANIEL TORRES, INC., INFORMATION AND REFERRAL: THE MAJORITY OF CENTRO HISPANO'S CLIENTS ARE EITHER UNEMPLOYED OR

Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 UNDEREMPLOYED. THEY ARE SEEKING ASSISTANCE OR SERVICES TO HELP THEM IN IMPROVING THE QUALITY OF LIFE FOR THEM AND FOR THEIR FAMILIES. INFORMATION AND REFERRAL, INCLUDES CLIENT/SYSTEM ADVOCACY, TRANSLATION AND INTERPRETATION, AND ASSISTANCE AND SUPPORT WITH COMPLETING DOCUMENTATION. CENTRO HISPANO ALSO PROVIDES SUPPORT WITH HELPING CLIENTS APPLY FOR BENEFITS THROUGH THE STATE'S COMPASS SYSTEM. -- CHILDREN'S HOME OF READING (CHOR) FOSTER CARE/ADOPTION PROGRAM PROVIDES A VARIETY OF SERVICES TO FAMILIES WHO ARE INVOLVED IN THE CHILD WELFARE SYSTEM. CHILDREN WHO ARE UNABLE TO REMAIN SAFELY IN THE HOME OF PARENTS/CAREGIVERS REQUIRE TEMPORARY PLACEMENT. WHEN A CHILD ENTERS CHOR'S PROGRAM, THEY ARE ASSIGNED A CASE MANAGER, WHO ENSURES THEIR SAFETY, ADDRESSES PERMANENCY, AND THEIR OVERALL WELL-BEING. -- FAMILY PROMISE OF BERKS COUNTY, INC., U-TURN HELPS KEEP YOUTH OFF THE STREETS, AND THE PROGRAM'S CASE MANAGER HELPS YOUTH FOCUS ON ACHIEVING EDUCATIONAL, EMPLOYMENT AND HOUSING STABILIZATION GOALS. -- FRIEND, INC. COMMUNITY SERVICES, COMMUNITY RESOURCE CONNECTIONS: SERVING THE KUTZTOWN AREA, CLIENTS ARE REFERRED BY CHURCHES, SCHOOLS, OTHER AGENCIES OR NEIGHBORS. THE CASE MANAGER MEETS WITH THE CLIENT TO DETERMINE WHAT SERVICES ARE NEEDED AND WHAT THE CLIENT QUALIFIES FOR. IF THERE IS AN IMMEDIATE CRISIS, THE CASE MANAGER WILL WORK WITH THE CLIENT TO ADDRESS THE ISSUE. IT COULD INCLUDE EMERGENCY FOOD, ASSISTANCE WITH RENT, HEAT AND ELECTRICITY. THE CLIENT IS REFERRED TO OTHER AGENCIES AND/OR CONNECTED TO OTHER SERVICES DEPENDING ON THEIR NEEDS.

COMMUNITY COLLABORATION

211 INFORMATION AND REFERRAL

THE 211 SERVICE PROVIDES PEOPLE WITH INFORMATION ABOUT ESSENTIAL HUMAN

Employer identification number Name of the organization UNITED WAY OF BERKS COUNTY, INC. 23-1655375 SERVICES. WHEN THE COVID-19 PANDEMIC BEGAN IN MARCH 2020, 211 SAW SIGNIFICANT INCREASE IN CALLS TOP NEEDS RELATED TO FOOD AND HOUSING/UTILITY ASSISTANCE. FAMILIES WERE ABLE TO IDENTIFY VIRTUAL LEARNING SUPPORTS. 211 CAN ASSIST FAMILIES WITH LOCATING CHILDCARE, FINDING QUALITY CARE FOR AGING PARENTS, OR JOB TRAINING PROGRAMS. 211 CENTERS ARE STAFFED BY TRAINED SPECIALISTS WHO ASSESS THE CALLERS' NEEDS AND REFER THEM TO THE HELP THEY SEEK. IN ADDITION, THE CALL CENTER SPECIALISTS, SEVERAL POSSESSING BILINGUAL SKILLS, FACILITATE CALLS AND QUESTIONS FROM THOSE INTERESTED IN VOLUNTEERING OR DONATING ITEMS, SUCH AS FOOD AND CLOTHING. 211 SERVES AS A VALUED COMMUNITY RESOURCE AND SERVES AS A VITAL CONNECTION FOR THOSE NEEDING HELP, AS WELL AS FOR THOSE WANTING TO GIVE HELP. ADDITIONALLY, 211 IS A USEFUL PLANNING TOOL SINCE IT PROVIDES REAL TIME INFORMATION ABOUT THE SCOPE OF ISSUES LOCAL PEOPLE ARE FACING. IN 2022, 14,243 CONTACTS -- CALLS/WEB VISITS/TEXTS/EMAILS WERE RECEIVED BY BERKS RESIDENTS. TOP NEEDS REQUESTED WERE HOUSING ASSISTANCE (3,952), UTILITY ASSISTANCE (1,667) AND FOOD/MEALS. 211 PHONE SERVICE IS AVAILABLE 24 HOURS A DAY, 7 DAYS A WEEK, 365 DAYS A YEAR. ONLINE SEARCH CAPABILITY OF THE PA 211 DATABASE IS ALSO AVAILABLE AT WWW.PA211EAST.ORG. ASSISTANCE THROUGH TEXTING IS AVAILABLE MONDAY-FRIDAY, 8AM TO 4PM; ONE CAN TEXT THEIR ZIP CODE TO 898211. FORM 990, PART VI, SECTION A, LINE 2: THE FOLLOWING BOARD MEMBERS ARE RELATED: SANTINA AND PETER CONNORS SPOUSES

SPOUSES

SUE AND CRAIG PERROTY

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TWO MARRIED COUPLES MAINTAIN POSITIONS ON THE UNITED WAY OF BERKS COUNTY BOARD OF DIRECTORS. THIS SITUATION OCCURS BECAUSE IT IS A COMMON PRACTICE FOR A HUSBAND AND WIFE TEAM TO SERVE AS CO-CHAIRS OF THE ANNUAL FUND-RAISING CAMPAIGN, WHICH HAS BEEN A VERY SUCCESSFUL AND POPULAR APPROACH WITH THE VOLUNTEERS. THE COUPLES REPRESENT PAST AND/OR CURRENT AND/OR FUTURE CAMPAIGN CO-CHAIRS.

NO OTHER BOARD MEMBERS ARE RELATED.

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

FORM 990 IS REVIEWED AND APPROVED BY THE GOVERNANCE COMMITTEE AND REPORTED TO THE BOARD OF DIRECTORS ANNUALLY PRIOR TO SUBMISSION. ALL BOARD MEMBERS RECEIVE A COPY OF THE FORM 990.

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

DISCLOSURE OF ACTUAL OR POTENTIAL CONFLICTS OF INTEREST

AN INTERESTED PARTY IS UNDER A CONTINUING OBLIGATION TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST AS SOON AS IT IS KNOWN, OR REASONABLY SHOULD BE KNOWN.

AN INTERESTED PARTY SHALL COMPLETE A QUESTIONNAIRE/DISCLOSURE STATEMENT, IN THE FORM ATTACHED, TO FULLY AND COMPLETELY DISCLOSE THE MATERIAL FACTS ABOUT ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST. THE DISCLOSURE STATEMENT SHALL BE COMPLETED UPON HIS OR HER ASSOCIATION WITH UNITED WAY OF BERKS COUNTY AND SHALL BE UPDATED ANNUALLY. AN ADDITIONAL DISCLOSURE STATEMENT SHALL BE COMPLETED AT SUCH TIMES AS AN ACTUAL POTENTIAL CONFLICT

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ARISES.

FOR BOARD MEMBERS, THE DISCLOSURE STATEMENTS SHALL BE PROVIDED TO THE

PRESIDENT, WHO WILL REVIEW THE DISCLOSURE STATEMENTS AND PRESENT A SUMMARY

OF THE FINDINGS TO THE GOVERNANCE COMMITTEE. THE GOVERNANCE COMMITTEE

SHALL REVIEW THE SUMMARY OF THE FINDINGS PREPARED BY THE PRESIDENT AND

PRESENT A REPORT TO THE EXECUTIVE COMMITTEE IN THE SPRING OF EACH YEAR.

IN THE CASE OF MEMBERS OF THE FINANCE COMMITTEE, THE INVESTMENT COMMITTEE

AND THE AUDIT COMMITTEE, THE DISCLOSURE STATEMENTS SHALL BE PROVIDED TO THE

PRESIDENT, WHO WILL REVIEW THE DISCLOSURE STATEMENTS AND PRESENT A SUMMARY

OF THE FINDINGS TO THE EXECUTIVE COMMITTEE IN THE SPRING OF EACH YEAR.

IN THE CASE OF STAFF, THE DISCLOSURE STATEMENTS SHALL BE PRESENTED TO THE

SENIOR VICE PRESIDENT FINANCE & ADMINISTRATION, WHO WILL REVIEW THE

DISCLOSURE STATEMENTS AND PRESENT A SUMMARY OF THE FINDINGS TO THE

PRESIDENT IN THE SPRING OF EACH YEAR. IN THE CASE OF THE SENIOR VICE

PRESIDENT FINANCE & ADMINISTRATION, THE DISCLOSURE STATEMENT SHALL BE

PROVIDED TO THE PRESIDENT. THE PRESIDENT SHALL PROVIDE HIS/HER DISCLOSURE

STATEMENT TO THE CHAIRMAN OF THE BOARD.

THE PRESIDENT SHALL FILE THE VOLUNTEER DISCLOSURE STATEMENTS WITH THE

OFFICIAL CORPORATE RECORDS OF UNITED WAY OF BERKS COUNTY. THE SENIOR VICE

PRESIDENT FINANCE & ADMINISTRATION SHALL FILE THE STAFF DISCLOSURE

STATEMENTS WITH OTHER EMPLOYEE RECORDS.

GENERAL PROCEDURES FOR THE REVIEW OF ACTUAL OR POTENTIAL CONFLICTS

WHENEVER THERE IS REASON TO BELIEVE THAT AN ACTUAL OR POTENTIAL CONFLICT OF

Name of the organization UNITED WAY OF BERKS COUNTY, INC.

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INTEREST EXISTS BETWEEN UNITED WAY OF BERKS COUNTY AND AN INTERESTED PARTY,

THE BOARD OF DIRECTORS, UPON THE RECOMMENDATION OF THE EXECUTIVE COMMITTEE

OR THE GOVERNANCE COMMITTEE, SHALL DETERMINE THE APPROPRIATE ORGANIZATIONAL

RESPONSE. THIS SHALL INCLUDE, BUT IS NOT NECESSARILY LIMITED TO, INVOKING

THE PROCEDURES DESCRIBED IN SECTION V BELOW, WITH RESPECT TO A SPECIFIC

PROPOSED ACTION OR TRANSACTION.

WHERE THE ACTUAL OR POTENTIAL CONFLICT INVOLVES AN EMPLOYEE OF UNITED WAY

OF BERKS COUNTY OTHER THAN THE PRESIDENT, THE PRESIDENT SHALL, IN THE FIRST

INSTANCE, BE RESPONSIBLE FOR REVIEWING THE MATTER AND MAY TAKE APPROPRIATE

ACTION AS NECESSARY TO PROTECT THE INTERESTS OF UNITED WAY OF BERKS COUNTY.

THE PRESIDENT SHALL DETERMINE WHETHER THE RESULTS OF ANY REVIEW AND ACTION

SHALL BE REPORTED TO THE CHAIRMAN. WHEN REPORTED TO THE CHAIRMAN, THE

CHAIRMAN, IN CONSULTATION WITH THE EXECUTIVE COMMITTEE, SHALL DETERMINE IF

ANY FURTHER BOARD REVIEW OR ACTION IS REQUIRED.

PROCEDURES FOR ADDRESSING CONFLICTS OF INTEREST SPECIFIC TRANSACTIONS

WHERE AN ACTUAL OR POTENTIAL CONFLICT EXISTS BETWEEN THE INTERESTS OF

UNITED WAY OF BERKS COUNTY AND AN INTERESTED PARTY WITH RESPECT TO A

SPECIFIC PROPOSED ACTION OR TRANSACTION, THE UNITED WAY OF BERKS COUNTY

SHALL REFRAIN FROM THE PROPOSED ACTION ON TRANSACTION UNTIL SUCH TIME AS

THE PROPOSED ACTION OR TRANSACTION HAS BEEN APPROVED BY THE DISINTERESTED

MEMBERS OF THE BOARD OF DIRECTORS OF THE ORGANIZATION. THE FOLLOWING

PROCEDURES MAY APPLY:

AN INTERESTED PARTY WHO HAS AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST

WITH RESPECT TO A PROPOSED ACTION OR TRANSACTION OF THE ORGANIZATION SHALL

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NOT PARTICIPATE, AND MAY BE EXCUSED FROM THE DELIBERATIONS AND DECISION

MAKING, WITH RESPECT TO SUCH ACTION OR TRANSACTION. UPON REQUEST BY THE

BOARD, THE INTERESTED PARTY MAY ANSWER QUESTIONS OR PROVIDE MATERIAL OR

FACTUAL INFORMATION ABOUT THE PROPOSED ACTION OR TRANSACTION.

THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS MAY APPROVE THE

PROPOSED ACTION OR TRANSACTION UPON FINDING THAT IT IS IN THE BEST

INTERESTS OF UNITED WAY OF BERKS COUNTY. THE BOARD SHALL CONSIDER WHETHER

THE TERMS OF THE PROPOSED TRANSACTION ARE FAIR AND REASONABLE TO THE UNITED

WAY OF BERKS COUNTY AND WHETHER IT WOULD BE POSSIBLE, WITH REASONABLE

EFFORT, TO FIND A MORE ADVANTAGEOUS ARRANGEMENT WITH A PARTNER OR ENTITY

THAT IS NOT AN INTERESTED PARTY.

APPROVAL BY THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS SHALL BE

BY VOTE OF A MAJORITY OF DIRECTORS IN ATTENDANCE AT A REGULAR OR SPECIAL

MEETING OF THE BOARD OF DIRECTORS. AN INTERESTED PARTY SHALL NEITHER BE

COUNTED FOR PURPOSES OF DETERMINING WHETHER A QUORUM IS PRESENT NOR FOR THE

PURPOSES OF DETERMINING WHAT CONSTITUTES A MAJORITY VOTE OF DIRECTORS IN

ATTENDANCE.

THE MINUTES OF THE MEETING SHALL REFLECT THAT THE CONFLICT DISCLOSURE WAS

MADE, THE VOTE TAKEN AND, WHERE APPLICABLE, THE ABSTENTION FROM VOTING AND

PARTICIPATION BY THE INTERESTED PARTY.

VIOLATIONS OF CONFLICT OF INTEREST POLICY

IF THE BOARD OF DIRECTORS HAS REASON TO BELIEVE THAT AN INTERESTED PARTY

HAS FAILED TO DISCLOSE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, IT

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SHALL INFORM THE PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD THE PERSON

AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE.

IF, AFTER HEARING THE RESPONSE OF THE INTERESTED PARTY AND MAKING SUCH

FURTHER INVESTIGATION, AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD

DETERMINES THAT THE INTERESTED PARTY HAS, IN FACT, FAILED TO DISCLOSE AN

ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE

CORRECTIVE ACTION.

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

EXECUTIVE COMPENSATION PROCEDURES:

UNITED WAY OF BERKS COUNTY'S PRIMARY OBJECTIVE IS TO PROVIDE A REASONABLE

AND COMPETITIVE EXECUTIVE COMPENSATION OPPORTUNITY CONSISTENT WITH

COMPENSATION PRACTICES FOR INDIVIDUALS POSSESSING THE EXPERIENCE AND SKILLS

NEEDED TO IMPROVE THE OVERALL PERFORMANCE OF THE ORGANIZATION.

THE ORGANIZATION'S EXECUTIVE COMPENSATION PHILOSOPHY IS DESIGNED TO:

- ENCOURAGE THE ATTRACTION AND RETENTION OF A HIGH CALIBER EXECUTIVE
- REINFORCE THE GOALS FOR THE ORGANIZATION BY SUPPORTING TEAMWORK AND

COLLABORATION

- ENSURE THAT PAY IS PERCEIVED TO BE FAIR AND EQUITABLE
- BE FLEXIBLE TO REWARD INDIVIDUAL ACCOMPLISHMENTS AS WELL AS

ORGANIZATIONAL SUCCESS

- ENSURE THAT THE PROGRAM IS EASY TO EXPLAIN, UNDERSTAND AND ADMINISTER
- BALANCE THE NEED TO BE COMPETITIVE WITH THE LIMITS OF AVAILABLE

FINANCIAL RESOURCES

THE CHAIRPERSON OF THE BOARD LEADS THE BOARD OF DIRECTORS IN THE EVALUATION

PRESIDENT ALSO DEFINES AND DISCUSSES CURRENT AND FUTURE ORGANIZATIONAL

CHALLENGES AND OPPORTUNITIES. THIS INFORMATION IS SHARED WITH THE BOARD OF

IN ADDITION TO THE ANNUAL REVIEW, A PRESIDENT'S EVALUATION SURVEY IS

CONDUCTED SEMI-ANNUALLY WITH FULL BOARD PARTICIPATION, THE RESULTS OF WHICH

ARE COMPILED AND ANALYZED BY A THIRD-PARTY PROVIDER HAVING NO VESTED

INTEREST IN THE OUTCOME OF THIS PROCESS. A FORMAL REPORT IS PRESENTED BY

THE PROVIDER FIRST TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR

INITIAL DISCUSSION, THEN TO THE FULL BOARD OF DIRECTORS AS PART OF AN

EXECUTIVE SESSION.

THE RESULTS OF THE GROUP EVALUATION AS WELL AS ANY GOALS OR SUGGESTIONS THE BOARD HAS RELATIVE TO THE INFORMATION PRESENTED AND THE FUTURE DIRECTION OF THE ORGANIZATION. THE CHAIRPERSON OF THE BOARD COMMUNICATES THE RESULTS OF THE ASSESSMENT VERBALLY TO THE PRESIDENT AND THE INFORMATION IS CAPTURED THROUGH THE MINUTES OF THE EXECUTIVE SESSIONS FOR EXECUTIVE COMMITTEE AND THE BOARD OF DIRECTORS. THE RESULTS OF THE ASSESSMENT ARE INCLUDED IN THE PRESIDENT'S PERSONNEL FILE.

THE LEVEL AND FORM OF COMPENSATION IS DETERMINED FOLLOWING A REVIEW OF

DIRECTORS.

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LOCAL COMPENSATION LEVELS OF CEO'S OF ORGANIZATIONS OF SIMILAR SIZE AND

SCOPE, AS WELL AS THE COMPENSATION LEVELS OF CEO'S OF UNITED WAY

ORGANIZATIONS OF SIMILAR SIZE AND SCOPE. WHILE UNITED WAY FOCUSES ON

OTHER UNITED WAYS AND NONPROFITS TO BENCHMARK COMPENSATION, THE

ORGANIZATION UNDERSTANDS THAT THE MARKET FOR EXECUTIVE TALENT MAY BE

BROADER THAN THE GROUP OF CHARITIES. MARKET INFORMATION FROM ADDITIONAL

MARKET SEGMENTS AND PUBLISHED NOT-FOR-PROFIT COMPENSATION SURVEYS, MAY BE

USED AS A SUPPLEMENT. THE PRESIDENT'S ANNUAL COMPENSATION IS COMMUNICATED

BOTH VERBALLY AND IN WRITING TO THE PRESIDENT AND IS INCLUDED IN HIS/HER

PERSONNEL FILE.

KEY EMPLOYEE COMPENSATION PROCEDURES:

COMPENSATION PROCEDURES FOR KEY EMPLOYEES OF UNITED WAY OF BERKS COUNTY

FOLLOW THE ORGANIZATION'S SALARY AND ADMINISTRATION PROGRAM AND THE

PERSONNEL POLICIES AS PROVIDED TO ALL STAFF.

THE COMPETITIVENESS OF THE SALARY STRUCTURE AT UNITED WAY OF BERKS COUNTY
WILL BE ASSESSED PERIODICALLY, AS DETERMINED BY THE PRESIDENT, BUT NOT MORE
THAN EVERY THREE YEARS, BASED ON SURVEYS OF SALARIES PAID BY OTHER
EMPLOYERS FOR SIMILAR WORK. AN OUTSIDE HUMAN RESOURCES FIRM NORMALLY DOES
THE ASSESSMENT. IF THERE IS EVIDENCE OF A CHANGE IN GENERAL SALARY LEVELS,
THE SALARY RANGES ARE ADJUSTED ACCORDING TO THE PROGRAM'S OBJECTIVES, WITH
THE APPROVAL OF THE EXECUTIVE COMMITTEE (SEE BELOW). THESE ADJUSTMENTS DO
NOT CHANGE THE GRADES TO WHICH POSITIONS ARE ASSIGNED AND DO NOT RESULT IN
AUTOMATIC CHANGES IN INDIVIDUAL SALARIES.

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, SITTING AS THE PERSONNEL

COMMITTEE, SHALL REVIEW AND APPROVE THE SALARY STRUCTURE. THE REVIEW AND

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APPROVAL NORMALLY FOLLOWS THE ASSESSMENT DONE BY AN OUTSIDE HUMAN RESOURCES

FIRM TO DETERMINE WHETHER CHANGES HAVE OCCURRED IN THE GENERAL SALARY

LEVELS. THE EXECUTIVE COMMITTEE WILL DETERMINE IF A REPORT ON THE

ORGANIZATION'S COMPENSATION PLAN/SALARY STRUCTURE SHALL BE MADE TO THE FULL

BOARD OF DIRECTORS.

UNITED WAY OF BERKS COUNTY'S POLICY IS THAT SALARY INCREASES ARE BASED ON
MERIT AND SHOULD REFLECT AN EMPLOYEE'S CONTRIBUTION TO THE ORGANIZATION IN
RELATION TO THE RESPONSIBILITIES OF HIS OR HER POSITION. SALARY INCREASES
MAY BE LIMITED BY THE AVAILABILITY OF FUNDS. THE SALARY ADMINISTRATION
PROGRAM, THEREFORE, HAS BEEN DESIGNED TO PROVIDE THE BEST PERFORMERS WITH
HIGHER PERCENTAGES OF MERIT INCREASES. WITH THE EXCEPTION OF SPECIAL TYPES
OF SALARY ADJUSTMENTS, MERIT INCREASES ARE THE ONLY TYPE OF SALARY
INCREASES NORMALLY GRANTED.

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

COMPLIANCE WITH PUBLIC INSPECTION REQUIREMENTS:

IN GENERAL, EXEMPT ORGANIZATIONS MUST MAKE AVAILABLE FOR PUBLIC INSPECTION

CERTAIN ANNUAL RETURNS AND APPLICATIONS FOR EXEMPTION, AND MUST PROVIDE

COPIES OF SUCH RETURNS AND APPLICATIONS TO INDIVIDUALS WHO REQUEST THEM.

IN COMPLIANCE WITH THIS REQUIREMENT, UNITED WAY OF BERKS COUNTY ADHERES TO

THE FOLLOWING:

- IN RESPONSE TO A WRITTEN REQUEST AT THE PRINCIPAL OFFICE OF UNITED WAY

 OF BERKS COUNTY, A COPY OF THE COVERED TAX DOCUMENTS SHALL BE PROVIDED TO

 THE REQUESTER WITHIN THIRTY (30) DAYS. PER IRS GUIDANCE, A REQUEST THAT IS

 FAXED, E-MAILED OR SENT BY PRIVATE COURIER IS CONSIDERED A WRITTEN REQUEST.
- IN RESPONSE TO AN IN-PERSON REQUEST AT THE PRINCIPAL OFFICE OF UNITED

 WAY OF BERKS COUNTY, A COPY OF THE COVERED TAX DOCUMENTS SHALL GENERALLY BE

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PROVIDED THE DAY OF THE REQUEST.

- REQUESTS EITHER IN-PERSON OR WRITTEN SHALL BE PROVIDED INFORMATION THAT

 OFFERS THE REQUESTOR THE OPPORTUNITY TO ACCESS THE DOCUMENTS FREE OF CHARGE

 VIA THE WEB, OR AT A COST SHOULD A HARD COPY BE REQUESTED.
- UNITED WAY OF BERKS COUNTY SHALL CHARGE A REASONABLE FEE FOR COPYING

 COSTS AND THE ACTUAL COST OF POSTAGE BEFORE PROVIDING COPIES OF THE

 DOCUMENTS. REASONABLE FEES FOR COPYING ARE CONSISTENT WITH THE IRS

 STANDARD CHARGE OF NO MORE THAN \$.20 PER PAGE, WHILE POSTAGE FEES SHALL BE

 THE ACTUAL COST INCURRED BY THE ORGANIZATION.
- TIMELY NOTICE OF THE APPROXIMATE COST AND ACCEPTABLE FORM OF PAYMENT
 WILL BE PROVIDED WITHIN SEVEN DAYS OF RECEIPT OF THE REQUEST IF IN WRITING
 OR IMMEDIATELY UPON A REQUEST FROM AN IN-PERSON REQUEST. ACCEPTABLE FORMS
 OF PAYMENT INCLUDE CASH AND MONEY ORDER (IN THE CASE OF AN IN-PERSON
 REQUEST) AND CERTIFIED CHECK, MONEY ORDER, AND PERSONAL CHECK OR CREDIT
 CARD, IN THE CASE OF A WRITTEN REQUEST. PAYMENT IN FULL IS DUE PRIOR TO
 PROVIDING COPIES.
- THE NAMES OR ADDRESSES OF THE ORGANIZATION'S CONTRIBUTORS ON ITS ANNUAL RETURN SHALL NOT BE DISCLOSED IN ACCORDANCE WITH IRS REGULATIONS.

PUBLIC INSPECTION OF GOVERNING DOCUMENTS:

UNITED WAY OF BERKS COUNTY IS COMMITTED TO OPENNESS AND TRANSPARENCY TO

DONORS, FUNDERS, PARTNER AGENCIES, GOVERNMENTAL ORGANIZATIONS, ITS VARIOUS

STAKEHOLDERS, AND THE GENERAL PUBLIC. PROACTIVE DISCLOSURE AND

DISSEMINATION OF INFORMATION CONCERNING THE GOVERNANCE, OPERATIONS, AND

FINANCIAL INFORMATION CONCERNING UNITED WAY OF BERKS COUNTY IS AVAILABLE.

THE FOLLOWING DOCUMENTS ARE ACCESSIBLE FOR PUBLIC INSPECTION AT THE OFFICE
OF UNITED WAY OF BERKS COUNTY:

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- ALL DOCUMENTS AS REQUIRED BY FEDERAL, STATE, AND LOCAL LAW, INCLUDING BUT

- ANNUAL REPORT

- ARTICLES OF INCORPORATION

- AUDITED FINANCIAL STATEMENTS

NOT LIMITED TO THE IRS FORM 990.

CAMPAIGN HIGHLIGHTS REPORT

- COMUNITY IMPACT REPORTS

READY.SET.READ! REPORTS

- CODE OF ETHICS AND CONDUCT AND WHISTLEBLOWER POLICY

- RECORD RETENTION

- CONFLICT OF INTEREST POLICY

- ORGANIZATIONAL BY-LAWS

- MISSION STATEMENT

- VISION STATEMENT

DIVERSITY, EQUITY AND INCLUSION POLICY

PERSONS REQUESTING HARD COPIES OF DOCUMENTS SHALL BE PROVIDED INFORMATION

THAT OFFERS THE REQUESTOR THE OPPORTUNITY TO ACCESS THE INFORMATION FREE OF

CHARGE VIA THE WEB. UNITED WAY OF BERKS COUNTY SHALL CHARGE A REASONABLE

FEE FOR COPYING COSTS AND THE ACTUAL COST OF POSTAGE BEFORE PROVIDING

COPIES OF THE DOCUMENTS IF A HARD COPY IS REQUESTED. REASONABLE FEES FOR

COPYING ARE CONSISTENT WITH THE IRS STANDARD CHARGE OF NO MORE THAN \$.20

PER PAGE WHILE POSTAGE FEES SHALL BE THE ACTUAL COST INCURRED BY THE

ORGANIZATION.

THE FOLLOWING DOCUMENTS ARE ACCESSIBLE VIA UNITED WAY OF BERKS COUNTY WEB-SITE AT WWW.UWBERKS.ORG.

- ANNUAL REPORT

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Schedule O (Form 990) 2022 Page 2 Name of the organization **Employer identification number** UNITED WAY OF BERKS COUNTY, INC. 23-1655375 - AUDITED FINANCIAL STATEMENTS CAMPAIGN HIGHLIGHTS REPORT - CODE OF ETHICS AND CONDUCT AND WHISTLEBLOWER POLICY FORM 990 VIA CHARITY NAVIGATOR AND GUIDESTAR - MISSION STATEMENT - VISION STATEMENT FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS: UNREALIZED GAIN/LOSS ON BENEFICIAL INTEREST -214,619. TRANSFERS BETWEEN NET ASSET RESTRICTIONS -116,745. CHANGE IN DONOR DESIGNATIONS -152,418. -483,782. TOTAL TO FORM 990, PART XI, LINE 9

Form **8868**

(Rev. January 2022)

Department of the Treasury Internal Revenue Service

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

► File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

OMB No. 1545-0047

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits. Automatic 6-Month Extension of Time. Only submit original (no copies needed). All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Type or Name of exempt organization or other filer, see instructions. Taxpayer identification number (TIN) print UNITED WAY OF BERKS COUNTY, INC. 23-1655375 File by the Number, street, and room or suite no. If a P.O. box, see instructions. filing your 25 N. 2ND STREET, SUITE 101 return. See City, town or post office, state, and ZIP code. For a foreign address, see instructions. instructions. READING, PA 19601 Enter the Return Code for the return that this application is for (file a separate application for each return) Application Return **Application** Return Is For Is For Code Code Form 990 or Form 990-EZ Form 1041-A 01 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 Form 990-T (corporation) MONICA RUANO-WENRICH • The books are in the care of ▶ 25 N. 2ND STREET, SUITE 101 - READING, PA 19601 Telephone No. \triangleright (610) 685-4550 Fax No. \triangleright (610) 685-4569 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. I request an automatic 6-month extension of time until NOVEMBER 15, 2023, to file the exempt organization return for the organization named above. The extension is for the organization's return for: ► X calendar year 2022 or tax year beginning , and ending | Initial return Final return If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Change in accounting period If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less 0. any nonrefundable credits. See instructions. 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 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. Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions

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For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2022)