** PUBLIC DISCLOSURE COPY **

Return of Organization Exempt From Income Tax

Form **990**

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

A For the 2024 calendar year, or tax year beginning OCT 1, 2024 and ending SEP 30, 2025

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

C Name of organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) 3011 W. GRAND BLVD. SUITE 500 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code DETROIT, MI 48202

F Name and address of principal officer: DR. DARIENNE D. HUDSON, SAME AS C ABOVE

D Employer identification number
20-3099071

E Telephone number 313-226-9200

G Gross receipts $ 179,184,615.

H(a) Is this a group return for subordinates? Yes [X] No

H(b) Are all subordinates included? Yes No
If "No," attach a list. See instructions

H(c) Group exemption number

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

J Website: WWW.LIVEUNITEDSEM.ORG

K Form of organization: [X] Corporation Trust Association Other

L Year of formation: 2005 **M** State of legal domicile: MI

Part I Summary

1 Briefly describe the organization's mission or most significant activities: TO MOBILIZE THE CARING POWER OF DETROIT AND SOUTHEASTERN MICHIGAN TO IMPROVE COMMUNITIES AND

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	41
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	41
5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	237
6	Total number of volunteers (estimate if necessary)	6	8712
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	89,862,992.	108,840,244.
9	Program service revenue (Part VIII, line 2g)	0.	0.
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	2,194,941.	2,384,808.
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,069,725.	1,092,169.
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	93,127,658.	112,317,221.
13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	72,098,753.	91,525,259.
14	Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	19,890,340.	16,122,488.
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
b	Total fundraising expenses (Part IX, column (D), line 25) 4,085,705.		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	9,838,331.	7,643,837.
18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	101,827,424.	115,291,584.
19	Revenue less expenses. Subtract line 18 from line 12	-8,699,766.	-2,974,363.

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	88,922,499.	59,892,872.
21	Total liabilities (Part X, line 26)	45,291,683.	20,193,375.
22	Net assets or fund balances. Subtract line 21 from line 20	43,630,816.	39,699,497.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer SUNNY REED, CHIEF FINANCIAL OFFICER Date 08/13/2026

Type or print name and title

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
ALYSSA M. KENT	ALYSSA M. KENT	08/11/26		P01701477

Firm's name PLANTE & MORAN, PLLC Firm's EIN 33-1498605

Firm's address 3000 TOWN CENTER, SUITE 100 SOUTHFIELD, MI 48075 Phone no. (248) 352-2500

May the IRS discuss this return with the preparer shown above? See instructions [X] Yes No

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:
TO MOBILIZE THE CARING POWER OF DETROIT AND SOUTHEASTERN MICHIGAN TO IMPROVE COMMUNITIES AND INDIVIDUAL LIVES IN MEASURABLE AND LASTING WAYS.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ..... Yes X No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ..... Yes 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 $ 17,929,565. including grants of $ 8,152,553.) (Revenue $ 1,066,244.)
MEETING BASIC NEEDS: IN OUR FOUR-COUNTY REGION, WHICH IS HOME TO NEARLY HALF THE STATE'S POPULATION, 42% OF FAMILIES STRUGGLE TO AFFORD A BASIC, NO-FRILLS MONTHLY BUDGET, ACCORDING TO UNITED WAY'S 2025 ALICE REPORT. THAT MEANS TOO MANY HOUSEHOLDS ARE MAKING IMPOSSIBLE CHOICES BETWEEN NECESSITIES LIKE FOOD, HOUSING, CHILD CARE, AND TRANSPORTATION. UNITED WAY MEETS FAMILIES IN THESE MOMENTS WITH BOTH URGENCY AND INTENTION. THROUGH STRATEGIC INVESTMENTS IN PARTNERS, PROGRAMS, AND ADVOCACY, WE HELP FAMILIES MOVE FROM CRISIS TO STABILITY AND FROM STABILITY TO PROSPERITY. LAST YEAR, OUR COMMUNITY INVESTMENT GRANTS SUPPORTED MORE THAN 290,000 INDIVIDUALS ACROSS SOUTHEASTERN MICHIGAN. THROUGH OUR CONNECT4CARE NETWORK, WE HELP FAMILIES NAVIGATE WHAT CAN OFTEN FEEL LIKE A FRAGMENTED SYSTEM OF SUPPORT CONNECTING THEM TO THE

4b (Code:) (Expenses $ 65,889,170. including grants of $ 63,500,548.) (Revenue $ 0.)
CREATING YOUTH OPPORTUNITY: CHILDREN THRIVE WHEN THEY HAVE ACCESS TO SAFE, SUPPORTIVE, AND ENRICHING ENVIRONMENTS AND WHEN THE SYSTEMS AROUND THEM ARE DESIGNED TO HELP THEM SUCCEED. UNITED WAY PARTNERS WITH EDUCATORS, FAMILIES, AND COMMUNITY ORGANIZATIONS TO STRENGTHEN THE WHOLE CHILD PREPARING THEM FOR LIFELONG SUCCESS.
OUR WORK STRENGTHENS IN-SCHOOL AND OUT-OF-SCHOOL LEARNING AND FILLS CRITICAL GAPS THROUGH SUPPLEMENTAL LITERACY AND STEAM PROGRAMMING. TOGETHER, THESE EFFORTS ENSURE YOUNG PEOPLE ARE PREPARED TO LEARN, GROW, AND SUCCEED IN A RAPIDLY CHANGING WORLD.
LAST YEAR, OUR YOUTH-FOCUSED PROGRAMS REACHED MORE THAN 83,000 CHILDREN ACROSS THE REGION.
PRIORITY INITIATIVES & PROGRAMS

4c (Code:) (Expenses $ 2,683,141. including grants of $ 208,216.) (Revenue $ 0.)
PROMOTING PROSPERITY: FAMILIES CAN'T BUILD A SUCCESSFUL FUTURE WITHOUT FINANCIAL STABILITY. UNITED WAY HELPS INDIVIDUALS AND FAMILIES TAKE CONTROL OF THEIR FINANCES, REDUCE BARRIERS, AND BUILD TOWARD LONG-TERM SECURITY.
THROUGH FREE TAX PREPARATION, FINANCIAL COACHING, AND TRANSPORTATION SUPPORT, WE HELP FAMILIES KEEP MORE OF WHAT THEY EARN AND PLAN FOR WHAT'S AHEAD. IN 2025, OUR COALITION PARTNERS FILED MORE THAN 20,000 TAX RETURNS, SECURING OVER $30 MILLION IN REFUNDS FOR ALICE FAMILIES DOLLARS THAT GO DIRECTLY BACK INTO HOUSEHOLDS AND LOCAL COMMUNITIES.
PRIORITY INITIATIVES & PROGRAMS
VOLUNTEER INCOME TAX ASSISTANCE (VITA)
RIDE UNITED

4d Other program services (Describe on Schedule O.)
(Expenses $ 19,677,053. including grants of $ 19,663,942.) (Revenue $ 0.)

4e Total program service expenses 106,178,929.

SEE SCHEDULE O FOR CONTINUATION(S)

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules *(continued)*

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	106		
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	

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 237			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
b	If "Yes," enter the name of the foreign country _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	**Organizations that may receive deductible contributions under section 170(c).**			
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
9	**Sponsoring organizations maintaining donor advised funds.**			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	**Section 501(c)(7) organizations.** Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	**Section 501(c)(12) organizations.** Enter:			
a	Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**			
a	Is the organization licensed to issue qualified health plans in more than one state? **Note:** See the instructions for additional information the organization must report on Schedule O.	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b			
c	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see the instructions and file Form 4720, Schedule N.	15		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		X
17	**Section 501(c)(21) organizations.** Did the trust, or any disqualified or other person engage in any activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953? If "Yes," complete Form 6069.	17		

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	41		
	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	41		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6			X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed MI

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

[X] Own website [ ] 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 financial statements available to the public during the tax year.

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

DR. DARIENNE D. HUDSON, ED.D - 313-226-9200
3011 W. GRAND BLVD., STE 500, DETROIT, MI 48202

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.
- 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.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) DR. DARIENNE HUDSON	50.00									
CHIEF EXECUTIVE OFFICER	0.00			X				431,735.	0.	9,944.
(2) BRANDON LEE	50.00									
CHIEF OPERATING OFFICER & EXECUTIVE	0.00			X				276,077.	0.	15,112.
(3) TONYA ADAIR	50.00									
FORMER CHIEF PEOPLE, EQUITY & ENG	0.00						X	272,619.	0.	11,885.
(4) SARAH GRUTZA	50.00									
VP CORPORATE RELATIONS-PART YEAR	0.00					X		222,594.	0.	10,940.
(5) ASHLEIGH IMERMAN	50.00									
CHIEF PHILANTHROPY OFFICER	0.00					X		207,775.	0.	25,174.
(6) LARA KEATHLEY	50.00									
VICE PRESIDENT, PEOPLE, CULUTRE, & G	0.00					X		193,290.	0.	22,354.
(7) KYLE DUBUC	50.00									
VICE PRESIDENT, COMMUNICAT	0.00					X		186,090.	0.	27,477.
(8) JEFFREY MILES	50.00									
VICE PRESIDENT, COMMUNITY	0.00					X		199,704.	0.	5,099.
(9) KAREN LEGENDRE	50.00									
FORMER CHIEF FINANCIAL OFFICER	0.00						X	156,510.	0.	4,137.
(10) MARIA DWYER	3.00									
DIRECTOR/SECRETARY	0.00	X		X				0.	0.	0.
(11) LUANNE THOMAS EWALD	3.00									
DIRECTOR/CHAIR	0.00	X		X				0.	0.	0.
(12) DAVID PARENT	3.00									
DIRECTOR/VICE CHAIR	0.00	X		X				0.	0.	0.
(13) JAMES ROBINSON	3.00									
DIRECTOR/TREASURER	0.00	X		X				0.	0.	0.
(14) LYNDA ROSSI	3.00									
DIRECTOR/SECRETARY - PART YEAR	0.00	X		X				0.	0.	0.
(15) ED SIAJE	3.00									
DIRECTOR/IMMEDIATE PAST CHAIR	0.00	X		X				0.	0.	0.
(16) TIFFANY ALBERT	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(17) ORLANDO BAILEY	1.00									
DIRECTOR - PART YEAR	0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/ 1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) ERIK BAKKER	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(19) LISA CAWLEY	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(20) RICH CHANG	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(21) WANDA COOK-ROBINSON	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(22) STEVE DAVIS	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(23) LAURA DICKERSON	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(24) GREGORY DILL	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(25) BILL EMERSON	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(26) TIM FALLON	1.00									
DIRECTOR	0.00	X						0.	0.	0.
1b **Subtotal**								2,146,394.	0.	132,122.
c **Total from continuation sheets to Part VII, Section A**								0.	0.	0.
d **Total (add lines 1b and 1c)**								2,146,394.	0.	132,122.

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization 31

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
APEX DIGITAL SOLUTIONS, 1000 TOWN CENTER DR. STE. 200, SOUTHFIELD, MI 48075	OUTSOURCED IT SERVICES	437,450.
GRYPHON PLACE 3245 SOUTH 8TH ST., KALAMAZOO, MI 49009	OUTSOURCED IT SERVICES	247,840.
BRIGHTSTREET GROUP LLC, 6545 TANGELWOOD DR. SE, GRAND RAPIDS, MI 49546	PROGRAM CONSULTING SERVICES	195,290.
LEILA HILAL 1353 BAY VIEW HGHTS, PETOSKY, MI 49770	PROGRAM CONSULTING SERVICES	168,576.
ELEVATE PRODUCTION GROUP PO BOX 23005, DETROIT, MI 48223	EVENT PLANNING	149,164.

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization 7

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) PANCHO HALL	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(28) SONIA HASSAN DUGGAN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(29) IAN HOGAN	1.00									
DIRECTOR - PART YEAR	0.00	X						0.	0.	0.
(30) JOCELYN HOWARD	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(31) KELLE ILITCH	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(32) HASSAN JABER	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(33) SAUNTEEL JENKINS	1.00									
DIRECTOR - PART YEAR	0.00	X						0.	0.	0.
(34) JOHN JOHNSON	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(35) HARRY KEMP	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(36) NICOLE KONTYKO	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(37) WENDY LEWIS JACKSON	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(38) DEBBIE MANZANO	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(39) ALYCIA MERIWEATHER	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(40) MARK MORENO	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(41) DARYL NEWMAN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(42) RICHARD PAPPAS	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(43) ANUP POPAT	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(44) MICHAEL REIN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(45) MICHAEL RESHA	1.00									
DIRECTOR - PART YEAR	0.00	X						0.	0.	0.
(46) ANGELA REYES	1.00									
DIRECTOR	0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(47) MELISSA ROY	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(48) KRISTIN SMALLWOOD	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(49) JENNIFER STAFEIL	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(50) MARK STIERS	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(51) BRANDON TUCKER	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(52) JOE VALENTI	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(53) ALLYSON WALDMAN	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(54) CLARE WILLETT	1.00									
DIRECTOR	0.00	X						0.	0.	0.
(55) DANA WILLIAMS	1.00									
DIRECTOR	0.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	1,890,360.				
	d Related organizations	1d					
	e Government grants (contributions)	1e	11,960,399.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	94,989,485.				
	g Noncash contributions included in lines 1a-1f	1g	$ 368,673.				
	h **Total.** Add lines 1a-1f			108840244.			
Program Service Revenue			**Business Code**				
	2a						
	b						
	c						
	d						
	e						
	f All other program service revenue						
	g **Total.** Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			2,393,902.			2393902.
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
			(i) Real / (ii) Personal				
	6a Gross rents	6a					
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
			(i) Securities / (ii) Other				
	7a Gross amount from sales of assets other than inventory	7a	66,562,105.				
	b Less: cost or other basis and sales expenses	7b	66,571,199.				
	c Gain or (loss)	7c	-9,094.				
	d Net gain or (loss)			-9,094.			-9,094.
	8a Gross income from fundraising events (not including $ 1,890,360. of contributions reported on line 1c). See Part IV, line 18	8a	322,120.				
	b Less: direct expenses	8b	296,195.				
	c Net income or (loss) from fundraising events			25,925.			25,925.
	9a Gross income from gaming activities. See Part IV, line 19	9a					
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
	10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue			**Business Code**				
	11a ADMIN & COST RECOVERY FEES		900099	667,359.	667,359.		
	b OTHER FEES FOR SERVICE		900099	389,955.	389,955.		
	c						
	d All other revenue		900099	8,930.	8,930.		
	e **Total.** Add lines 11a-11d			1,066,244.			
	12 **Total revenue.** See instructions			112317221.	1,066,244.	0.	2410733.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	82,231,527.	82,231,527.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	9,293,732.	9,293,732.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,107,737.	696,134.	336,718.	74,885.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	11,926,926.	7,404,888.	2,524,452.	1,997,586.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	2,126,357.	1,503,950.	238,226.	384,181.
10 Payroll taxes	961,468.	648,071.	147,764.	165,633.
11 Fees for services (nonemployees):				
a Management				
b Legal	143,593.		143,593.	
c Accounting	138,784.		138,784.	
d Lobbying	109,419.		109,419.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	24,684.		24,684.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	2,674,839.	1,797,390.	659,548.	217,901.
12 Advertising and promotion	517,163.	288,368.	178,417.	50,378.
13 Office expenses	1,066,654.	458,557.	144,807.	463,290.
14 Information technology				
15 Royalties				
16 Occupancy	1,065,797.	741,795.	176,922.	147,080.
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	711,738.	192,459.	31,360.	487,919.
20 Interest				
21 Payments to affiliates	641,374.	641,374.		
22 Depreciation, depletion, and amortization	227,158.	158,102.	37,708.	31,348.
23 Insurance	98,542.	48,567.	38,315.	11,660.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MISCELLANEOUS	105,673.	23,641.	75,373.	6,659.
b COMMUNICATION	96,418.	44,538.	8,837.	43,043.
c MEMBERSHIP DUES	22,001.	5,836.	12,023.	4,142.
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	115,291,584.	106,178,929.	5,026,950.	4,085,705.
26 **Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	13,801,223.	2	10,517,009.
	3	Pledges and grants receivable, net	8,802,333.	3	9,022,123.
	4	Accounts receivable, net		4	
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	1,580,537.	9	650,639.
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a: 4,017,960.			
	b	Less: accumulated depreciation — 10b: 2,092,611.	2,105,008.	10c	1,925,349.
	11	Investments - publicly traded securities	41,775,649.	11	32,040,608.
	12	Investments - other securities. See Part IV, line 11		12	
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	20,857,749.	15	5,737,144.
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)	88,922,499.	16	59,892,872.
Liabilities	17	Accounts payable and accrued expenses	12,585,556.	17	9,803,412.
	18	Grants payable	4,025,915.	18	3,308,792.
	19	Deferred revenue	6,922,948.	19	609,838.
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	21,757,264.	25	6,471,333.
	26	**Total liabilities.** Add lines 17 through 25	45,291,683.	26	20,193,375.
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here** ☒ **and complete lines 27, 28, 32, and 33.**			
	27	Net assets without donor restrictions	30,121,242.	27	25,071,185.
	28	Net assets with donor restrictions	13,509,574.	28	14,628,312.
		Organizations that do not follow FASB ASC 958, check here ☐ **and complete lines 29 through 33.**			
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	43,630,816.	32	39,699,497.
	33	Total liabilities and net assets/fund balances	88,922,499.	33	59,892,872.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	112,317,221.
2	Total expenses (must equal Part IX, column (A), line 25)	2	115,291,584.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,974,363.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	43,630,816.
5	Net unrealized gains (losses) on investments	5	648,715.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,605,671.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	39,699,497.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
b	Were the organization's financial statements audited by an independent accountant?	2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: ☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the 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 audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	3b	X	

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization	Employer identification number
UNITED WAY FOR SOUTHEASTERN MICHIGAN	20-3099071

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
10 ☐ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
f Enter the number of supported organizations .....
g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	(iv) No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	55126707.	9039983.	46714078.	89862992.	108840244	309584004
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	55126707.	9039983.	46714078.	89862992.	108840244	309584004
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)						122710019
6 **Public support.** Subtract line 5 from line 4.						186873985

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	55126707.	9039983.	46714078.	89862992.	108840244	309584004
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	2597559.	159,729.	1640778.	1875692.	2393902.	8667660.
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.)		796,000.	230,411.	254,464.	322,120.	1602995.
11 **Total support.** Add lines 7 through 10						319854659

12 Gross receipts from related activities, etc. (see instructions) 12 7,609,976.

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f)) 14 58.42 %

15 Public support percentage from 2023 Schedule A, Part II, line 14 15 73.94 %

16a **33 1/3% support test - 2024.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☒

b **33 1/3% support test - 2023.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

17a **10% -facts-and-circumstances test - 2024.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

b **10% -facts-and-circumstances test - 2023.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ☐

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for **2024** (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from **2023** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests - 2024.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described 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		
c	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		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year* **(see instructions).**

a ☐ The organization satisfied the Activities Test. *Complete* **line 2** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

c ☐ The organization supported a governmental entity. *Describe in* **Part VI** *how you supported a governmental entity (see instructions).*

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

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

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

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

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

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

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

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

Section D - Distributions		Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	1	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4 Amounts paid to acquire exempt-use assets	4	
5 Qualified set-aside amounts (prior IRS approval required - *provide details in* **Part VI**)	5	
6 Other distributions (describe in **Part VI**). See instructions.	6	
7 **Total annual distributions.** Add lines 1 through 6.	7	
8 Distributions to attentive supported organizations to which the organization is responsive (*provide details in* **Part VI**). See instructions.	8	
9 Distributable amount for 2024 from Section C, line 6	9	
10 Line 8 amount divided by line 9 amount	10	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - *explain in* **Part VI**). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f **Total** of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: $			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, 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 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, *explain in* **Part VI.** See instructions.			
7 **Excess distributions carryover to 2025.** Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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

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

PART II, SECTION A. COLUMN (B)
UNITED WAY FOR SOUTHEASTERN MICHIGAN HAS CHANGED THEIR YEAR END FROM 06/30 TO 09/30. THE FYE 2022 RETURN IS A SHORT YEAR RETURN DUE TO THE YEAR END CHANGE.

Schedule B (Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number

20-3099071

Organization type (check one):

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

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

General Rule

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

Special Rules

☒ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), 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).

Name of organization

UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number

20-3099071

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 66,298,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 6,316,591.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 4,135,397.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 3,093,129.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5		$ 2,321,797.	Person [X] Payroll [X] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization

UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number

20-3099071

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

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

Name of organization: UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number: 20-3099071

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

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

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

(e) Transfer of gift

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

SCHEDULE C
(Form 990)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

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

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

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

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

Name of organization	Employer identification number (EIN)
UNITED WAY FOR SOUTHEASTERN MICHIGAN	20-3099071

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

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
2 Political campaign activity expenditures ..... $
3 Volunteer hours for political campaign activities .....

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

1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... $
2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... $
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... ☐ Yes ☐ No
4a Was a correction made? ..... ☐ Yes ☐ No
b If "Yes," describe in Part IV.

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

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... $
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... $
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... $
4 Did the filing organization file **Form 1120-POL** for this year? ..... ☐ Yes ☐ No
5 Enter the names, addresses, and EINs of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

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

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	54,789.	
b Total lobbying expenditures to influence a legislative body (direct lobbying)	54,627.	
c Total lobbying expenditures (add lines 1a and 1b)	109,416.	
d Other exempt purpose expenditures	106178929.	
e Total exempt purpose expenditures (add lines 1c and 1d)	106288345.	
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.	
g Grassroots nontaxable amount (enter 25% of line 1f)	250,000.	
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.	

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

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

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount	549,050.	1,000,000.	1,000,000.	1,000,000.	3,549,050.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,323,575.
c Total lobbying expenditures	2,287.	242,914.	153,910.	109,416.	508,527.
d Grassroots nontaxable amount	137,263.	250,000.	250,000.	250,000.	887,263.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,330,895.
f Grassroots lobbying expenditures	2,002.	164,048.	71,825.	54,789.	292,664.

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

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

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

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

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

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

Part IV **Supplemental Information**

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

PART II-A COLUMN (A)
UNITED WAY FOR SOUTHEASTERN MICHIGAN HAS CHANGED THEIR YEAR END FROM 06/30 TO 09/30. THE FYE 2022 RETURN IS A SHORT YEAR RETURN DUE TO THE YEAR END CHANGE.

SCHEDULE D (Form 990)
(Rev. December 2024)
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

Open to Public Inspection

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

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

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements.

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)
☐ Preservation of a historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included on line 2a	2c	
d	Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

b Assets included in Form 990, Part X $ _____

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

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

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

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

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

Part IV Escrow and Custodial Arrangements

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

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

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

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

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

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

Part V Endowment Funds

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	30,314,843.	24,312,764.	22,189,104.	23,773,769.	29,138,290.
b Contributions		2,355,314.			
c Net investment earnings, gains, and losses	2,265,224.	5,449,733.	2,905,660.	-1,389,665.	-3,752,521.
d Grants or scholarships					
e Other expenditures for facilities and programs	4,911,623.	1,802,968.	782,000.	195,000.	1,612,000.
f Administrative expenses					
g End of year balance	27,668,444.	30,314,843.	24,312,764.	22,189,104.	23,773,769.

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

a Board designated or quasi-endowment 88.0000 %
b Permanent endowment 12.0000 %
c Term endowment .0000 %

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

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

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

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

Part VI Land, Buildings, and Equipment

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		575,000.		575,000.
b Buildings		1,090,000.	72,667.	1,017,333.
c Leasehold improvements		300,324.	178,493.	121,831.
d Equipment		2,052,636.	1,841,451.	211,185.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, line 10c, column (B))*				1,925,349.

Part VII Investments - Other Securities

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

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

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) BENEFICAL INTEREST	1,655,684.
(2) RIGHT OF USE ASSET	4,081,460.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 15, col. (B))*	5,737,144.

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DESIGNATIONS PAYABLE - UNDISTRIBUTED PLEDGES	2,021,823.
(3) LEASE LIABILITY	4,449,510.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, line 25, col. (B))*	6,471,333.

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 ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

1	Total revenue, gains, and other support per audited financial statements			1	43,320,271.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	648,715.		
b	Donated services and use of facilities	2b	205,275.		
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	853,990.
3	Subtract line 2e from line 1			3	42,466,281.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	69,850,940.		
c	Add lines 4a and 4b			4c	69,850,940.
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	112,317,221.

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

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

1	Total expenses and losses per audited financial statements			1	45,645,682.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a	205,277.		
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	205,277.
3	Subtract line 2e from line 1			3	45,440,405.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	69,851,179.		
c	Add lines 4a and 4b			4c	69,851,179.
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	115,291,584.

Part XIII Supplemental Information

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

PART XI, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATIONS	4,770,519.
CONTRIBUTIONS RECORDED AS AGENCY TRANSACTIONS PER AUDIT	65,080,421.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	69,850,940.

PART XII, LINE 4B - OTHER ADJUSTMENTS:	
DONOR DESIGNATIONS	4,770,519.
CONTRIBUTIONS RECORDED AS AGENCY TRANSACTIONS PER AUDIT	65,080,660.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	69,851,179.

Part XIII Supplemental Information *(continued)*

SCHEDULE G (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number

20-3099071

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of nongovernment grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	**(iii)** No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col. **(i)**	**(vi)** Amount paid to (or retained by) organization
Total						

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1 FORD GOLF OUTING (event type)	(b) Event #2 WOMEN OF INFLUENCE (event type)	(c) Other events 4 (total number)	(d) Total events (add col. (a) through col. (c))
Revenue	1 Gross receipts	1,706,000.	360,116.	146,364.	2,212,480.
	2 Less: Contributions	1,526,000.	255,116.	109,244.	1,890,360.
	3 Gross income (line 1 minus line 2)	180,000.	105,000.	37,120.	322,120.
Direct Expenses	4 Cash prizes				
	5 Noncash prizes	16,771.	35,697.	1,100.	53,568.
	6 Rent/facility costs	12,760.	21,041.	9,400.	43,201.
	7 Food and beverages	13,090.	38,760.	26,063.	77,913.
	8 Entertainment		27,472.		27,472.
	9 Other direct expenses	5,809.	66,584.	21,648.	94,041.
	10 Direct expense summary. Add lines 4 through 9 in column (d)				296,195.
	11 Net income summary. Subtract line 10 from line 3, column (d)				25,925.

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in:

a The organization's facility 13a %

b An outside facility 13b %

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

Name

Address

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

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

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

Name

Address

16 Gaming manager information:

Name

Gaming manager compensation $ _____

Description of services provided

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions:

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

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

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

Part IV **Supplemental Information** *(continued)*

SCHEDULE I (Form 990)
(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization: UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number: 20-3099071

Part I General Information on Grants and Assistance

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
3D DANCE ACADEMY 8425 W. MCNICHOLS DETROIT, MI 48221	83-2137426	501(C)(3) PUBLIC CHA	0.	700,000.			GRANT
826 MICHIGAN 115 E. LIBERTY ST ANN ARBOR, MI 48104	20-1963960	501(C)(3) PUBLIC CHA	0.	39,977.			GRANT
ACADEMY OF THE SACRED HEART 1250 KENSINGTON RD BLOOMFIELD HILLS, MI 48304	38-1358173	501(C)(3) PUBLIC CHA	0.	12,500.			GRANT
ACADEMY OF WARREN 13943 E. 8 MILE RD WARREN, MI 48089	61-1473532	SCHOOL	0.	920,000.			GRANT
ACCENT PONTIAC 32666 OLD POST RD BEVERLY HILL, MI 48025	81-4608180	501(C)(3) PUBLIC CHA	0.	45,000.			GRANT
ACCOUNTING AID SOCIETY 3031 W. GRAND BLVD. STE. # 470 DETROIT, MI 48202	23-7310753	501(C)(3) PUBLIC CHA	0.	253,618.			GRANT/DESIGNATION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 360.

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

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
AFFIRMATIONS LESBIAN AND GAY COMMUNITY CENTER - 290 W. 9 MILLE RD. - FERNDALE, MI 48220	38-2882823	501(C)(3) PUBLIC	0.	5,659.			DESIGNATION
AID IN MILAN 89 W. MAIN ST MILAN, MI 48160	38-2108453	501(C)(3) PUBLIC	0.	20,000.			GRANT
ALL THINGS WOMEN, INC 20304 ANGLING LIVONIA, MI 48152	82-4973764	501(C)(3) PUBLIC	0.	53,135.			GRANT
ALLIANCE FOR HOUSING OAKLAND COUNTY - 1 N. SAGINAW, SUITE 208 - PONTIAC, MI 48342	46-1549875	501(C)(3) PUBLIC	0.	50,000.			GRANT
ALMA COLLEGE 614 W. SUPERIOR ALMA, MI 48801	38-1359083	501(C)(3) PUBLIC	0.	28,522.			DESIGNATION
ALTERNATIVES FOR GIRLS 903 W. GRAND BLVD. DETROIT, MI 48208	38-2766412	501(C)(3) PUBLIC	0.	305,165.			GRANT/DESIGNATION
ALZHEIMER'S ASSOCIATION GREATER MICHIGAN CHAPTER - 25200 TELEGRAPH RD. STE. 100 - SOUTHFIELD, MI 48033	13-3039601	501(C)(3) PUBLIC	0.	58,552.			DESIGNATION
AMERICAN CANCER SOCIETY PO BOX 10069 DETROIT, MI 48210	13-1788491	501(C)(3) PUBLIC	0.	29,627.			DESIGNATION
AMERICAN CIVIL LIBERTIES UNION FUND OF MICHIGAN - 2966 WOODWARD AVE - DETROIT, MI 48201	23-7243421	501(C)(3) PUBLIC	0.	5,329.			DESIGNATION

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
AMERICAN DIABETES ASSOCIATION PO BOX 7023 MERRIFIELD, VA 22116	13-1623888	501(C)(3) PUBLIC	0.	64,400.			DESIGNATION
AMERICAN LUNG ASSOC OF MICHIGAN 26555 EVERGREEN RD, STE, 540 SOUTHFIELD, MI 48076	13-1632524	501(C)(3) PUBLIC	0.	16,698.			DESIGNATION
AMERICAN MONTESSORI ACADEMY 14800 MIDDLEBELT RD LIVONIA, MI 48154	20-0894864	SCHOOL	0.	192,000.			GRANT
AMERICAN RED CROSS OF SE MICHIGAN 7800 W OUTER DR., SUITE 205 DETROIT, MI 48235	53-0196605	501(C)(3) PUBLIC	0.	53,380.			GRANT/DESIGNATION
ANN ARBOR AREA COMMUNITY FOUNDATION - 301 N. MAIN ST STE 300 - ANN ARBOR, MI 48104	38-6087967	501(C)(3) PUBLIC	0.	14,030.			DESIGNATION
ANN ARBOR HANDS-ON MUSEUM - LESLIE SCIENCE & NATURE CENTER - 220 E. ANN ST - ANN ARBOR, MI 48104	38-2236345	501(C)(3) PUBLIC	0.	5,926.			DESIGNATION
ANN ARBOR ROTARY FOUNDATION PO BOX 131217 ANN ARBOR, MI 48113	38-6092093	501(C)(3) PUBLIC	0.	28,169.			DESIGNATION
ANN ARBOR SUMMER FESTIVAL 210 HURONVIEW BLVD STE 1 ANN ARBOR, MI 48103	38-2307397	501(C)(3) PUBLIC	0.	6,249.			DESIGNATION
ANN ARBOR SYMPHONY ORCHESTRA 35 RESEARCH DR STE 100 ANN ARBOR, MI 48103	38-6069701	501(C)(3) PUBLIC	0.	10,626.			DESIGNATION

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
ANN ARBOR YMCA 400 W. WASHINGTON ST ANN ARBOR, MI 48103	38-1525162	501(C)(3) PUBLIC	0.	5,683.			DESIGNATION
ARAB COMMUNITY CENTER FOR ECON & SOCIAL SCVS - 2651 SAULINO CT. - DEARBORN, MI 48120	23-7444497	501(C)(3) PUBLIC	0.	89,791.			GRANT/DESIGNATION
ARBOR HOSPICE 2366 OAK VALLEY DR ANN ARBOR, MI 48103	38-2532215	501(C)(3) PUBLIC	0.	27,190.			DESIGNATION
ARTS & TECHNOLOGY ACADEMY OF PONTIAC - 888 ENTERPRISE DR - PONTIAC, MI 48341	38-3572745	SCHOOL	0.	841,937.			GRANT
AT BAT, INC. 25901 W. 10 MILE RD STE 114 SOUTHFIELD, MI 48033	47-5494939	501(C)(3) PUBLIC	0.	280,000.			GRANT
AUTISM ALLIANCE OF MICHIGAN 26913 NORTHWESTERN HWY., STE. 520 SOUTHFIELD, MI 48033	27-0472137	501(C)(3) PUBLIC	0.	43,888.			DESIGNATION
AUTISM SUPPORT OF MICHIGAN PO BOX 45 BANNISTER, MI 48807	38-3034552	501(C)(3) PUBLIC	0.	34,416.			DESIGNATION
AVONDALE SCHOOL DISTRICT 1435 W. AUBURN RD ROCHESTER HILLS, MI 48309	38-6003043	SCHOOL	0.	416,000.			GRANT
BAILEY PARK PROJECT, THE 2200 HUNT ST., #411 DETROIT, MI 48207	46-2725559	501(C)(3) PUBLIC	0.	15,000.			GRANT

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
BARBARA ANN KARMANOS CANCER INST 24601 NORTHWESTERN HWY SOUTHFIELD, MI 48341	38-1613280	501(C)(3) PUBLIC	0.	97,138.			DESIGNATION
BASS, INC 15885 WOODWARD AVE HIGHLAND PARK, MI 48203	38-3142470	501(C)(3) PUBLIC	0.	48,000.			GRANT
BIG BROTHERS BIG SISTERS OF METROPOLITAN DETROIT - 2470 COLLINGWOOD ST. STE. 218 - DETROIT, MI 48206-1500	38-6112533	501(C)(3) PUBLIC	0.	86,841.			GRANT/DESIGNATION
BINT JEBAIL CULTURAL CENTER 14201 PROSPECT ST DEARBORN, MI 48126	38-2977860	501(C)(3) PUBLIC	0.	286,962.			GRANT
BLACK FAMILY DEVELOPMENT, INC. 2995 E. GRAND BLVD DETROIT, MI 48202	38-2248479	501(C)(3) PUBLIC	0.	166,112.			GRANT/DESIGNATION
BLACK MALE EDUCATORS ALLIANCE 1550 TAYLOR ST DETROIT, MI 48206	82-3283296	501(C)(3) PUBLIC	0.	550,000.			GRANT
BLOOD CANCER FOUNDATION OF MICHIGAN - 27655 MIDDLEBELT RD., STE 160 - FARMINGTON HILLS, MI 48334	38-1682300	501(C)(3) PUBLIC	0.	57,600.			DESIGNATION
BLUEGREEN ALLIANCE FOUNDATION 2701 UNIVERSITY AVE. SE, # 209 MINNEAPOLIS, MN 55414	20-3477309	501(C)(3) PUBLIC	0.	30,000.			GRANT
BOY SCOUTS OF AMERICA - GREAT LAKES COUNCIL - 1776 W. WARREN - DETROIT, MI 48208	38-1359086	501(C)(3) PUBLIC	0.	31,659.			DESIGNATION

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
BOYS & GIRLS CLUB OF TROY JEFF EVANS 3670 JOHN R TROY, MI 48083	23-7390931	501(C)(3) PUBLIC	0.	12,500.			GRANT
BOYS & GIRLS CLUBS OF SOUTH OAKLAND COUNTY - 1545 E LINCOLN - ROYAL OAK, MI 48067	38-1579180	501(C)(3) PUBLIC	0.	10,919.			DESIGNATION
BOYS & GIRLS CLUBS OF SOUTHEASTERN MICHIGAN - 26777 HALSTED RD. STE# 100 - FARMINGTON HILLS, MI 48331	38-1387123	501(C)(3) PUBLIC	0.	133,150.			GRANT/DESIGNATION
BRENSEAN WINSTON FOUNDATION 484 W. GOLDEN GATE DETROIT, MI 48203	99-3040677	501(C)(3) PUBLIC	0.	80,000.			GRANT
BRIDGING COMMUNITIES INC. 6900 MCGRAW DETROIT, MI 48210	38-3434841	501(C)(3) PUBLIC	0.	67,254.			GRANT
BRILLIANT DETROIT 5675 LARKINS STREET DETROIT, MI 48210	47-3446334	501(C)(3) PUBLIC	0.	817,000.			GRANT
CANCER SUPPORT COMMUNITY OF GREATER ANN ARBOR - 2010 HOGBACK #3 - ANN ARBOR, MI 48197	05-0597871	501(C)(3) PUBLIC	0.	5,120.			DESIGNATION
CANIFF LIBERTY ACADEMY 2650 CANIFF ST HAMTRAMCK, MI 48212	38-3882048	SCHOOL	0.	429,971.			GRANT
CAPITAL AREA UNITED WAY INC 330 MARSHALL ST STE 203 LANSING, MI 48912	38-1359193	501(C)(3) PUBLIC	0.	6,124.			DESIGNATION

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
CATHOLIC CHARITIES OF SE MICHIGAN 24445 NORTHWESTERN HWY., STE. 200 SOUTHFIELD, MI 48075-2437	45-3623184	501(C)(3) PUBLIC	0.	294,749.			GRANT/DESIGNATION
CATHOLIC SOCIAL SERVICES OF WASHTENAW COUNTY - 4925 PACKARD RD - ANN ARBOR, MI 48108	38-1654500	501(C)(3) PUBLIC	0.	17,976.			DESIGNATION
CATHOLIC YOUTH ORGANIZATION 12TH STATE ST. DETROIT, MI 48226	38-1359504	501(C)(3) PUBLIC	0.	31,078.			DESIGNATION
CAUGHT UP 5811 GRAYTON DETROIT, MI 48224	47-2302502	501(C)(3) PUBLIC	0.	271,460.			GRANT
CENTER FOR SUCCESS NETWORK-FIDUCIARY FOR THE PONTIAC UNITED - 1600 EAST GRAND BLVD - DETROIT, MI 48211	46-3792734	501(C)(3) PUBLIC	0.	290,500.			GRANT
CENTER LINE PREP ACADEMY 8155 RITTER ST CENTER LINE, MI 48015	38-3636017	SCHOOL	0.	172,800.			GRANT
CHALDEAN AMERICAN LADIES OF CHARITY - UNITED COMMUNITY FAMILY SERVICES 2033 AUSTIN DRIVE - TROY, MI 48083	38-2336363	501(C)(3) PUBLIC	0.	90,000.			GRANT
CHALDEAN COMMUNITY FOUNDATION 3601 15 MILE RD STERLING HEIGHTS, MI 48310	20-3963417	501(C)(3) PUBLIC	0.	70,000.			GRANT
CHILD ABUSE AND NEGLECT COUNCIL 44765 WOODWARD PONTIAC, MI 48341-2983	38-2305297	501(C)(3) PUBLIC	0.	18,096.			DESIGNATION

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
CHILD CARE NETWORK WASHTENAW 4 C 3941 RESEARCH PARK DRIVE SUITE C ANN ARBOR, MI 48108	38-2160250	501(C)(3) PUBLIC	0.	135,000.			GRANT
CHILDREN'S HOSPITAL OF MICHIGAN FOUNDATION - 3011 WEST GRAND BLVD. STE# 218 - DETROIT, MI 48202	38-1357994	501(C)(3) PUBLIC	0.	80,602.			DESIGNATION
COALITION ON TEMPORARY SHELTER 26 PETERBORO ST. DETROIT, MI 48201	38-2420565	501(C)(3) PUBLIC	0.	46,486.			DESIGNATION
CODY ROUGE COMMUNITY ACTION ALLIANCE - 19321 W. CHICAGO - DETROIT, MI 48228	27-1841875	501(C)(3) PUBLIC	0.	103,636.			GRANT
COMMONWEALTH COMMUNITY DEVELOPMENT ACADEMY - 13477 EUREKA ST - DETROIT, MI 48212	38-3303926	SCHOOL	0.	153,600.			GRANT
COMMUNITY & HOME SUPPORTS 2111 WOODWARD AVE., STE 608 DETROIT, MI 48201	26-3365037	501(C)(3) PUBLIC	0.	80,000.			GRANT
COMMUNITY ACTION NETWORK PO BOX 130076 ANN ARBOR, MI 48113	38-2792610	501(C)(3) PUBLIC	0.	50,000.			GRANT
COMMUNITY EDUCATION COMMISSION 18100 MEYERS DETROIT, MI 48235	27-4616034	501(C)(3) PUBLIC	0.	1,000,000.			GRANT
COMMUNITY HOUSING NETWORK 570 KIRTS BLVD STE# 231 TROY, MI 48084	38-3372734	501(C)(3) PUBLIC	0.	100,000.			GRANT

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
COMMUNITY RESOURCE CENTER INC 710 E. MAIN ST ROOM 229 MANCHESTER, MI 48158	38-2792399	501(C)(3) PUBLIC	0.	20,000.			GRANT
CONGRESS OF COMMUNITIES 4870 ST. HEDWIG ST DETROIT, MI 48210	81-2759276	501(C)(3) PUBLIC	0.	7,000.			GRANT
CONNECTING THROUGH THE ARTS & EDUCATION - 25423 WOODWARD AVE - ROYAL OAK, MI 48067	46-5403764	501(C)(3) PRIVAT	0.	12,500.			GRANT
CORNELL UNIVERSITY PO BOX 37334 BOONE, IA 50037	15-0532082	501(C)(3) PUBLIC	0.	9,180.			DESIGNATION
CORNER HEALTH CENTER 47 N. HURON ST YPSILANTI, MI 48197	38-2329742	501(C)(3) PUBLIC	0.	10,962.			DESIGNATION
COVENANT HOUSE MICHIGAN 2959 MARTIN LUTHER KING JR BLVD DETROIT, MI 48208	38-3351777	501(C)(3) PUBLIC	0.	10,372.			DESIGNATION
CRANBROOK EDUCATIONAL COMMUNITY PO BOX 801 BLOOMFIELD HILLS, MI 48303-0801	38-2015048	501(C)(3) PUBLIC	0.	30,588.			GRANT
CREATIVE MONTESSORI ACADEMY 12701 MCCANN ST SOUTHGATE, MI 48195	38-3576229	SCHOOL	0.	262,400.			GRANT
CRESCENT ACADEMY 17570 W. 12 MILE RD SOUTHFIELD, MI 48076	20-0901574	SCHOOL	0.	282,555.			GRANT

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
CULTURAL WELLNESS CENTER 2025 PORTLAND AVE MINNEAPOLIS, MN 55404	41-1850859	501(C)(3) PUBLIC	0.	100,000.			GRANT
DAVID ELLIS ACADEMY 19800 BEECH DALY RD REDFORD, MI 48240	36-4555500	SCHOOL	0.	1,008,089.			GRANT
DAWN FARM 16633 STONY CREEK RD YPSILANTI, MI 48197	23-7318277	501(C)(3) PUBLIC	0.	14,288.			DESIGNATION
DEARBORN ACADEMY, THE 19310 FORD RD DEARBORN, MI 48128	38-3348338	SCHOOL	0.	336,000.			GRANT
DEARBORN PUBLIC SCHOOLS(SCHOOL DISTRICT OF T) - 18700 AUDETTE - DEARBORN, MI 48124	38-6004193	SCHOOL	0.	53,760.			GRANT
DEPAUW UNIVERSITY PO BOX 37334 GREENCASTLE, IN 46135	35-0869045	501(C)(3) PUBLIC	0.	14,774.			DESIGNATION
DETROIT ACADEMY OF ARTS AND SCIENCES - 2985 E. JEFFERSON - DETROIT, MI 48207	38-3364099	SCHOOL	0.	606,317.			GRANT
DETROIT AREA PRE COLLEGE ENGINEERIN - 100 FARNSWORTH # 245 - DETROIT, MI 48202	38-2451827	501(C)(3) PUBLIC	0.	12,500.			GRANT
DETROIT EDISON PUBLIC SCHOOL ACADEMY - 1903 WILKINS - DETROIT, MI 48207	38-3417883	SCHOOL	0.	372,994.			GRANT

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
DETROIT ENTERPRISE ACADEMY 11224 KERCHEVAL ST DETROIT, MI 48214	20-1525762	SCHOOL	0.	290,400.			GRANT
DETROIT INSTITUTE OF ARTS 5200 WOODWARD AVE DETROIT, MI 48202	38-1359510	501(C)(3) PUBLIC	0.	9,748.			DESIGNATION
DETROIT LEADERSHIP ACADEMY 13600 VIRGIL DETROIT, MI 48223	27-2440169	SCHOOL	0.	372,994.			GRANT
DETROIT MERIT CHARTER ACADEMY 1091 ALTER RD DETROIT, MI 48215	37-1438996	SCHOOL	0.	230,000.			GRANT
DETROIT PHEONIX CENTER 1420 WASHINGTON BLVD STE 301 DETROIT, MI 48226	82-1262148	501(C)(3) PUBLIC	0.	70,000.			GRANT
DETROIT POLICE ATHLETIC LEAGUE INC 1680 MICHIGAN AVE. DETROIT, MI 48216	38-3314318	501(C)(3) PUBLIC	0.	5,633.			DESIGNATION
DETROIT PUBLIC SAFETY FOUNDATION 1301 THIRD SUITE 547 DETROIT, MI 48226	30-0056848	501(C)(3) PUBLIC	0.	84,867.			GRANT
DETROIT PUBLIC SCHOOLS COMMUNITY DISTRICT - 3011 W. GRAND BLVD. STE 1004 14TH FL - DETROIT, MI 48202	81-2847693	501(C)(3) PUBLIC	0.	22,718,637.			GRANT
DETROIT PUBLIC SCHOOLS FOUNDATION 3011 W. GRAND BLVD. STE 1004 DETROIT, MI 48202	30-0135450	501(C)(3) PUBLIC	0.	102,561.			GRANT/DESIGNATION

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
DETROIT RESCUE MISSION MINISTRIES 150 STIMSON DETROIT, MI 48201	38-1459371	501(C)(3) PUBLIC	0.	45,000.			GRANT
DETROIT SERVICE LEARNING ACADEMY 21605 W SEVEN MI RD DETROIT, MI 48219	38-3478684	SCHOOL	0.	478,400.			GRANT
DETROIT ZOOLOGICAL SOCIETY 8450 W. 10 MILE ROYAL OAK, MI 48067	38-6027356	501(C)(3) PUBLIC	0.	47,990.			GRANT
DEVELOPING K.I.D.S. 19321 W. CHICAGO ST. DETROIT, MI 48228	01-0893642	501(C)(3) PUBLIC	0.	1,147,121.			GRANT
DIVERSIFIED COMMUNITY SERVICES 28231 PEPPERMILL RD FARMINGTON HILLS, MI 48331	47-4907105	501(C)(3) PUBLIC	0.	606,293.			GRANT
DOING DEVELOPMENT DIFFERENT IN METRO DETROIT - 4750 WOODWARD AVE STE 401 - DETROIT, MI 48201	47-3288292	501(C)(3) PUBLIC	0.	170,000.			GRANT
DOMESTIC VIOLENCE PROJECTS/SAFE HOUSING - 4100 CLARK RD - ANN ARBOR, MI 48105	38-2121751	501(C)(3) PUBLIC	0.	16,258.			DESIGNATION
DOVE ACADEMY 20001 WEXFORD ST DETROIT, MI 48234	38-3359822	SCHOOL	0.	193,600.			GRANT
DOWNTOWN BOXING GYM YOUTH PROGRAM 6445 E. VERNOR HWY DETROIT, MI 48207	27-5106242	501(C)(3) PUBLIC	0.	1,010,000.			GRANT

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
DREAM CENTERS OF MICHIGAN 6600 ROCHESTER RD TROY, MI 48085	47-1103865	501(C)(3) PUBLIC	0.	128,000.			GRANT
EASTPOINTE COMMUNITY SCHOOLS 24685 KELLY RD EASTPOINTE, MI 48021	38-6002520	SCHOOL	0.	591,375.			GRANT
EASTSIDE COMMUNITY NETWORK 4401 CONNER ST DETROIT, MI 48215	38-2561225	501(C)(3) PUBLIC	0.	13,754.			GRANT
ECOLOGY CENTER 339 E. LIBERTY STE 300 ANN ARBOR, MI 48104	38-1912803	501(C)(3) PUBLIC	0.	6,957.			DESIGNATION
E-COMMUNITY OUTREACH SERVICES 245 RUNDELL PONTIAC, MI 48342	84-4232489	501(C)(3) PUBLIC	0.	6,500.			GRANT
ECORSE PUBLIC SCHOOL 27225 W. OUTER DR ECORSE, MI 48229	38-6004162	SCHOOL	0.	810,000.			GRANT
ELE'S PLACE, ANN ARBOR 5665 HINES DR ANN ARBOR, MI 48108	38-2976751	501(C)(3) PUBLIC	0.	9,372.			DESIGNATION
EMBRACE SPORTZ 16870 LA SALLE AVE DETROIT, MI 48221	85-1386179	501(C)(3) PUBLIC	0.	160,000.			GRANT
ENGINEERING SOCIETY OF DETROIT 20700 CIVIC CENTER DR STE 450 SOUTHFIELD, MI 48076	38-1207155	501(C)(3) PUBLIC	0.	6,253.			DESIGNATION

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ENNIS CENTER FOR CHILDREN INC 129 E THIRD STREET FLINT, MI 48502	38-2222428	501(C)(3) PUBLIC	0.	9,266.			GRANT
ENTREPRENEURIAL VENTURES IN EDUCATION - 1001 MARINA DR # 410 - QUINCY, MA 02171	26-3185784	501(C)(3) PUBLIC	0.	1,212,000.			GRANT
EPILEPSY FOUNDATION OF MICHIGAN 25200 TELEGRAPH RD SUITE 110 SOUTHFIELD, MI 48033	38-1508581	501(C)(3) PUBLIC	0.	5,819.			DESIGNATION
EQUITY ALLIANCE OF MICHIGAN 6602 WALTON DETROIT, MI 48210	93-3761739	501(C)(3) PUBLIC	0.	32,000.			GRANT
FAITH IN ACTION 603 S. MAIN ST CHELSEA, MI 48118	38-2463646	501(C)(3) PUBLIC	0.	25,000.			GRANT
FAMILY LEARNING INSTITUTE OF ANN ARBOR - 1954 S. INDUSTRIAL HWY STE D - ANN ARBOR, MI 48104	38-3514675	501(C)(3) PUBLIC	0.	7,656.			DESIGNATION
FAXON ACADEMY 26275 NORTHWESTERN HGYW SOUTHFIELD, MI 48076	45-5318993	SCHOOL	0.	92,800.			GRANT
FERNDALE SCHOOLS 871 PINECREST DR. FERNDALE, MI 48220	38-6003089	501(C)(3) PUBLIC	0.	482,891.			GRANT
FIGURE SKATING IN DETROIT 361 W. 125TH ST 4TH FLOOR NEW YORK, MI 10027	13-3945168	501(C)(3) PUBLIC	0.	88,000.			GRANT

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FIRST STEP 44567 PINETREE DR. PLYMOUTH, MI 48170	38-2208980	501(C)(3) PUBLIC	0.	84,048.			GRANT/DESIGNATION
FISH AND LOAVES COMMUNITY FOOD PANTRY - 25670 NORTHLINE RD - TAYLOR, MI 48180	20-5865585	501(C)(3) PUBLIC	0.	50,000.			GRANT
FOCUS HOPE 1400 OAKMAN BLVD. DETROIT, MI 48328	38-1948285	501(C)(3) PUBLIC	0.	158,087.			GRANT/DESIGNATION
FOOD GATHERERS PO BOX 131037 ANN ARBOR, MI 48113	38-2853858	501(C)(3) PUBLIC	0.	214,904.			GRANT/DESIGNATION
FORGOTTEN HARVEST 21800 GREENFIELD RD. OAK PARK, MI 48237	38-2926476	501(C)(3) PUBLIC	0.	295,327.			GRANT/DESIGNATION
FOUNDATIONS PRESCHOOL OF WASHTENAW CTY - 3770 PACKARD RD - ANN ARBOR, MI 48108	38-1256680	501(C)(3) PUBLIC	0.	16,456.			GRANT/DESIGNATION
FRANKLIN WRIGHT SETTLEMENTS 3360 CHARLEVOIX AVE DETROIT, MI 48207	38-1845857	501(C)(3) PUBLIC	0.	958,785.			GRANT/DESIGNATION
FRIENDS IN DEED OF WASHTENAW COUNTY - 1196 ECORSE RD - YPSILANTI, MI 48198	38-2443974	501(C)(3) PUBLIC	0.	15,112.			GRANT/DESIGNATION
FRIENDS OF PARKSIDE 5000 CONNER STE 103 DETROIT, MI 48213	38-3017821	501(C)(3) PUBLIC	0.	45,000.			GRANT

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FRIENDSHIP CIRLCE 6892 W. MAPLE RD W. BLOOMFIELD, MI 48322	38-3613944	501(C)(3) PUBLIC	0.	9,750.			GRANT
FURNITURE BANK OF SOUTHEASTERN MI 333 NORTH PERRY PONTIAC, MI 48342	38-1914651	501(C)(3) PUBLIC	0.	30,000.			GRANT
GAY ELDERS OF METRO DETROIT SAGE METRO DETROIT 290 W NINE MILE FERNDALE, MI 48220	47-3464425	501(C)(3) PUBLIC	0.	70,000.			GRANT
GEORGE WASHINGTON CARVER ACADEMY 14510 SECOND AVE HIGHLAND PARK, MI 48203	38-3488582	SCHOOL	0.	489,600.			GRANT
GIRL SCOUTS OF SOUTHEASTERN MICHIGAN - 42800 GARFIELD RD - CHARTER TWP OF CLINTON, MI 48038	38-1598947	501(C)(3) PUBLIC	0.	16,345.			DESIGNATION
GIRLS GROUP 2531 JACKSON AVE STE 188 ANN ARBOR, MI 48103	20-4814985	501(C)(3) PUBLIC	0.	18,015.			DESIGNATION
GLACIER HILLS FOUNDATION 1200 EARHART RD ANN ARBOR, MI 48105	20-8072723	501(C)(3) PUBLIC	0.	9,235.			DESIGNATION
GLEANERS COMMUNITY FOOD BANK OF SOUTHEAST MICHIGAN - 2131 BEAUFAIT ST. - DETROIT, MI 48207-3410	38-2156255	501(C)(3) PUBLIC	0.	273,508.			GRANT/DESIGNATION
GLOBAL PARENTS FOR ECZEMA RESEARCH 117 STATE ST SANTA BARBARA, CA 93101	85-3151222	501(C)(3) PUBLIC	0.	9,200.			DESIGNATION

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GREAT OAKS ACADEMY 4257 BART ST WARREN, MI 48091	83-2334904	SCHOOL	0.	252,628.			GRANT
GREATER FAITH TRANSITIONS 670 ONANDAGA YPSILANTI, MI 48198	38-3586637	501(C)(3) PUBLIC	0.	5,945.			DESIGNATION
GREENPATH INNOVATION & DESIGN 36500 CORPORATE DR FARMINGTON HILLS, MI 48331	92-3340798	501(C)(3) PUBLIC	0.	60,000.			GRANT
GROWING HOPE 922 W. MICHIGAN AVE YPSILANTI, MI 48197	74-3091845	501(C)(3) PUBLIC	0.	13,739.			GRANT/DESIGNATION
HABITAT FOR HUMANITY OF OAKLAND COUNTY, INC. - 150 OSMUN ST. - PONTIAC, MI 48342	38-3244099	501(C)(3) PUBLIC	0.	33,643.			GRANT/DESIGNATION
HAMTRAMCK ACADEMY 11420 CONANT ST HAMTRAMCK, MI 48212	20-0114589	SCHOOL	0.	234,475.			GRANT
HAVEN 801 VANGUARD DR. PONTIAC, MI, MI 48343-1045	38-2426175	501(C)(3) PUBLIC	0.	119,131.			GRANT/DESIGNATION
HAZEL PARK SCHOOL DISTRICT 1620 E. ELZA AVE HAZEL PARK, MI 48030	38-6003088	SCHOOL	0.	819,261.			GRANT
HEALTHY KIDZ, INC. 10301 W. SEVEN MILE DETROIT, MI 48221	20-3347549	501(C)(3) PUBLIC	0.	198,205.			GRANT

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HENRY FORD ACADEMY 20900 OAKWOOD BLVD DEARBORN, MI 48124	38-3454443	SCHOOL	0.	84,700.			GRANT
HOLLY AREA SCHOOL DISTRICT 920 BAIRD STREET HOLLY, MI 48442	38-6008212	SCHOOL	0.	12,441.			GRANT
HOMELESS ACTION NETWORK OF DETROIT 3701 MIRACLES BLVD., SUITE 101 DETROIT, MI 48201	38-3315978	501(C)(3) PUBLIC	0.	50,000.			GRANT
HOMES FOR BLACK CHILDREN 1906 25TH ST. DETROIT, MI 48216	23-7133965	501(C)(3) PUBLIC	0.	27,593.			DESIGNATION
HOPE CLINIC PO BOX 980311 YPSILANTI, MI 48198	38-2469007	501(C)(3) PUBLIC	0.	19,187.			DESIGNATION
HOPE VILLAGE REVITALIZATION 14030 LA SALLE BLVD DETROIT, MI 48238	01-0790394	501(C)(3) PUBLIC	0.	7,000.			GRANT
HOSPITALITY HOUSE 2075 E WEST MAPLE RD., STE B204 COMMERCE TWP, MI 48390	38-3635226	501(C)(3) PUBLIC	0.	46,500.			GRANT
HOUSE N2 HOME INC 5361 MCAULEY DR STE 1125 YPSILANTI, MI 48197	84-5085645	501(C)(3) PUBLIC	0.	12,692.			DESIGNATION
HUMANE SOCIETY OF HURON VALLEY 3100 CHERRY HILL RD ANN ARBOR, MI 48105	38-1474931	501(C)(3) PUBLIC	0.	9,356.			DESIGNATION

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HURON RIVER WATERSHED COUNCIL 117 N 1ST STE 100 ANN ARBOR, MI 48104	38-1806452	501(C)(3) PUBLIC	0.	9,944.			DESIGNATION
HURON WATERLOO PATHWAYS INITIATIVE 339 E. LIBERTY STE 120 ANN ARBOR, MI 48104	82-1605735	501(C)(3) PUBLIC	0.	26,459.			DESIGNATION
HYPE ATHLETICS 23302 W. WARREN AVE DEARBORN, MI 48127	20-5698007	501(C)(3) PUBLIC	0.	1,104,000.			GRANT
INTERFAITH HOSPITALITY NETWORK 4290 JACKSON RD ANN ARBOR, MI 48103	38-2052598	501(C)(3) PUBLIC	0.	51,500.			GRANT
INTERLOCHEN CENTER FOR THE ARTS PO BOX 199 INTERLOCHEN, MI 49643	38-1689022	501(C)(3) PUBLIC	0.	7,249.			DESIGNATION
JEWISH COMMUNITY CENTER 6600 W MAPLE RD WEST BLOOMFIELD, MI 48322	38-1358397	501(C)(3) PUBLIC	0.	37,729.			GRANT/DESIGNATION
JEWISH FAMILY SERVICE OF METRO DETROIT - 6555 WEST MAPLE RD - WEST BLOOMFIELD, MI 48322	38-0691329	501(C)(3) PUBLIC	0.	86,405.			GRANT/DESIGNATION
JEWISH FAMILY SERVICES OF WASHTENAW CTY - 2245 S. STATE ST. STE 200 - ANN ARBOR, MI 48104	41-2147486	501(C)(3) PUBLIC	0.	83,736.			GRANT/DESIGNATION
JEWISH FEDERATION OF GREATER ANN ARBOR - 2939 BIRCH HOLLOW - ANN ARBOR, MI 48108	38-2711480	501(C)(3) PUBLIC	0.	5,689.			DESIGNATION

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JOIQUE BELL CHARITY 19 SAND BAR LANE DETROIT, MI 48214	46-4068891	501(C)(3) PUBLIC	0.	280,000.			GRANT
JOURNEY TO HEALING 66 COLORADO ST HIGHLAND PARK, MI 48203	83-2494109	501(C)(3) PUBLIC	0.	104,880.			GRANT
JOURNI 440 BURROUGHS ST # 153 DETROIT, MI 48202	47-4047149	501(C)(3) PUBLIC	0.	138,067.			GRANT
JUNIOR ACHIEVEMENT OF SE MICHIGAN 577 EAST LARNED STREET STE 200 DETROIT, MI 48226	38-1348535	501(C)(3) PUBLIC	0.	10,328.			GRANT
KEYS GRACE ACADEMY 27321 HAMPDEN ST MADISON HGTS, MI 48071	47-4356692	SCHOOL	0.	256,000.			GRANT
KONNECTION, THE 19736 WESMORELAND DETROIT, MI 48219	84-2853022	501(C)(3) PUBLIC	0.	48,334.			GRANT
LAKESHORE LEGAL AID 32 MARKET ST. MOUNT CLEMENS, MI 48043-5640	38-1850908	501(C)(3) PUBLIC	0.	125,000.			GRANT
LATIN AMERICAN SOC & ECONOMIC DEV 4138 W VERNOR DETROIT, MI 48209	38-1892670	501(C)(3) PUBLIC	0.	100,000.			GRANT
LAURUS ACADEMY 24590 LANSER RD SOUTHFIELD, MI 48034	20-0114589	SCHOOL	0.	302,400.			GRANT

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LAWRENCE TECHNOLOGICAL UNIVERSITY 21000 W. 10 MILE RD. SOUTHFIELD, MI 48075	38-1369604	501(C)(3) PUBLIC	0.	30,000.			GRANT
LEAPS & BOUNDS FAMILY SERVICES 8129 PACKARD AVE. WARREN, MI 48089	38-2854143	501(C)(3) PUBLIC	0.	435,000.			GRANT
LEGACY CHARTER ACADEMY 4900 E. HILLDALE ST DETROIT, MI 48234	27-1990276	SCHOOL	0.	216,000.			GRANT
LEGACY LAND CONSERVANCY 6276 JACKSON RD STE G ANN ARBOR, MI 48103	38-2899980	501(C)(3) PUBLIC	0.	7,511.			DESIGNATION
LEGAL AID & DEFENDER ASSOCIATION 613 ABBOTT STREET DETROIT, MI 48226	38-1358203	501(C)(3) PUBLIC	0.	56,732.			GRANT/DESIGNATION
LEGAL SERVICES OF SOUTH CENTRAL MICHIGAN - 420 N. 4TH AVE - ANN ARBOR, MI 48104	38-1845444	501(C)(3) PUBLIC	0.	125,000.			GRANT
LELAND COMMUNITY AFFAIRS, INC 22420 FENKELL AVE DETROIT, MI 48223	38-3632312	501(C)(3) PUBLIC	0.	53,200.			GRANT
LIFE REMODELED PO BOX 28508 DETROIT, MI 48228	27-5020487	501(C)(3) PUBLIC	0.	6,329.			DESIGNATION
LIGHTHOUSE OF OAKLAND COUNTY 46156 WOODWARD AVE. PONTIAC, MI 48342	38-2391381	501(C)(3) PUBLIC	0.	11,261.			DESIGNATION

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LIVE6 ALLIANCE 7426 W. MCNICHOLS DETROIT, MI 48221	81-2649383	501(C)(3) PUBLIC	0.	42,254.			GRANT
LIVINGSTON COUNTY UNITED WAY 2980 DORR ROAD BRIGHTON, MI 48116	38-2174453	501(C)(3) PUBLIC	0.	55,563.			DESIGNATION
MACK AVENUE COMMUNITY CHURCH COMMUNITY DEVELOPMENT CORP - 7900 MACK AVE - DETROIT, MI 48214	27-2810691	501(C)(3) PUBLIC	0.	164,317.			GRANT
MACOMB COMMUNITY ACTION 21885 DUNHAM RD STE 10 CLINTON TWP, MI 48036	38-6004868	501(C)(3) PUBLIC	0.	100,000.			GRANT
MACOMB COUNTY 120 NORTH MAIN STREET, 2ND FLOOR MOUNT CLEMENS, MI 48043	38-6004868	GOVERNMENT	0.	68,000.			GRANT
MACOMB FAMILY SERVICES INC 124 W. GATES ROMEO, MI 48065	38-2315965	501(C)(3) PUBLIC	0.	6,955.			DESIGNATION
MADISON DISTRICT PUBLIC SCHOOLS 26550 JOHN R RD MADISON HGTS, MI 48071	38-6003090	SCHOOL	0.	524,400.			GRANT
MARINERS INN 445 LEPYARD ST DETROIT, MI 48201	38-2136488	501(C)(3) PUBLIC	0.	50,000.			GRANT
MATH CORPS 261 E. MAPLE ROAD BIRMINGHAM, MI 48009	82-4958844	501(C)(3) PUBLIC	0.	886,400.			GRANT

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MATRIX HUMAN SERVICES 1400 WOODBRIDGE ST. DETROIT, MI 48207	38-1358015	501(C)(3) PUBLIC	0.	1,153,210.			GRANT/DESIGNATION
MECOSTA OSCEOLA UNITED WAY 315 IVES AVE BIG RAPIDS, MI 49307	38-2489813	501(C)(3) PUBLIC	0.	9,505.			DESIGNATION
MENTAL HEALTH ASSOCIATION IN MICHIGAN - P.O. BOX 11118 - LANSING, MI 48901	38-1358207	501(C)(3) PUBLIC	0.	13,756.			DESIGNATION
MERCY EDUCATION PROJECT 1450 HOWARD ST. DETROIT, MI 48216	38-3209556	501(C)(3) PUBLIC	0.	30,000.			GRANT
METHODIST CHILDREN S HOME SOCIETY 26645 W 6 MILE ROAD REDFORD, MI 48240	38-1240951	501(C)(3) PUBLIC	0.	12,901.			DESIGNATION
METRO CHARTER ACADEMY 34800 ECORSE RD ROUMULUS , MI 48174	38-3545650	SCHOOL	0.	238,400.			GRANT
METROPOLITAN DETROIT AFL-CIO 7700 SECOND AVE STE 617 DETROIT, MI 48202	38-1587001	501(C)(3) PUBLIC	0.	15,000.			GRANT
METRO UNITED WAY, INC. PO BOX 950148 LOUISVILLE, KY 40295-0148	61-0444680	501(C)(3) PUBLIC	0.	476,019.			DESIGNATION
MEXQUENSES UNIDOS DE MICHIGAN PO BOX 3099 ANN ARBOR, MI 48104	88-3981359	501(C)(3) PUBLIC	0.	10,000.			GRANT

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MICHIGAN COALITION AGAINST HOMELESSNESS - 15851 S. US HIGHWAY 27 STE 315 - LANSING, MI 48906	38-2960348	501(C)(3) PUBLIC	0.	45,000.			GRANT
MICHIGAN ENVIRONMENTAL COUNCIL 602 W IONIA ST LANSING, MI 48933	38-2517980	501(C)(3) PUBLIC	0.	11,120.			DESIGNATION
MICHIGAN FOUNDERS FUND 206 E HURON ST STE 305 ANN ARBOR, MI 48104	86-3992946	501(C)(3) PUBLIC	0.	5,262.			DESIGNATION
MICHIGAN HISPANIC COLLABORATIVE, INC., THE - 1420 WASHINGTON BLVD. - DETROIT, MI 48226	81-0942886	501(C)(3) PUBLIC	0.	26,297.			DESIGNATION
MICHIGAN HUMANE SOCIETY 30300 TELEGRAPH ROAD SUITE 220 BINGHAM FARMS, MI 48025	38-1358206	501(C)(3) PUBLIC	0.	6,819.			DESIGNATION
MICHIGAN LEAGUE FOR PUBLIC POLICY 1223 TURNER STREET SUITE 1G LANSING, MI 48906	38-1360557	501(C)(3) PUBLIC	0.	100,000.			GRANT
MICHIGAN LEAGUE OF CONSERVATION 340 BEAKES ST STE 110 ANN ARBOR, MI 48104	37-1430158	501(C)(3) PUBLIC	0.	7,585.			DESIGNATION
MICHIGAN MATHEMATICS & SCIENCE ACADEMY - 27300 DEQUINDRE RD - WARREN, MI 48092	26-3243703	SCHOOL	0.	515,200.			GRANT
MICHIGAN THEATER FOUNDATION 603 E. LIBERTY ST ANN ARBOR, MI 48104	38-2269013	501(C)(3) PUBLIC	0.	10,473.			DESIGNATION

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MIDNIGHT GOLF PROGRAM 30100 TELEGRAPH RD. SUITE 47B BINGHAM FARMS, MI 48025	38-3580432	501(C)(3) PUBLIC	0.	544,311.			GRANT
MILE HIGH UNITED WAY INC 711 PARK AVE W DENVER, MI 80205	84-0404235	501(C)(3) PUBLIC	0.	11,426.			DESIGNATION
MOTHERING JUSTICE 622 WALNUT AVE ROYAL OAK, MI 48073	45-3740989	501(C)(3) PUBLIC	0.	40,000.			GRANT
NATIONAL KIDNEY FOUNDATION OF MICHIGAN - 1169 OAK VALLEY DR. - ANN ARBOR, MI 48108	38-1559941	501(C)(3) PUBLIC	0.	13,588.			DESIGNATION
NATIONAL MULTIPLE SCLEROSIS SOCIETY - 29777 TELEGRAPH ROAD, SUITE 1651 - SOUTHFIELD, MI 48034	13-5661935	501(C)(3) PUBLIC	0.	20,956.			DESIGNATION
NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CTR DR RESTON, VA 20190	53-0204616	501(C)(3) PUBLIC	0.	10,676.			DESIGNATION
NEIGHBORHOOD SERVICE ORGANIZATION 882 OAKMAN BLVD, STE C DETROIT, MI 48238-4019	38-1561624	501(C)(3) PUBLIC	0.	90,000.			GRANT
NEUTRAL ZONE THE 310 E WASHINGTON ST ANN ARBOR, MI 48104	38-3407568	501(C)(3) PUBLIC	0.	16,799.			DESIGNATION
NEW COVENANT MISSIONARY BAPTIST CHURCH, INC - PO BOX 980745 - YPSILANTI, MI 48198	38-2171552	501(C)(3) PUBLIC	0.	6,814.			DESIGNATION

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
NEW DAWN ACADEMY OF WARREN 8200 ORVOMG RD STERLING HEIGHTS, MI 48312	20-0114589	SCHOOL	0.	218,000.			GRANT
NEW PARADIGM COLLEGE PREP 4001 29TH ST DETROIT, MI 48210	45-1842786	SCHOOL	0.	201,600.			GRANT
NEW PARADIGM GLAZER-LOVING ACADEMY 2001 LABELLE ST DETROIT, MI 48238	45-2966960	SCHOOL	0.	201,600.			GRANT
NONPROFIT ENTERPRISE AT WORK INC 1100 N MAIN ST STE 100 ANN ARBOR, MI 48104	38-2825019	501(C)(3) PUBLIC	0.	25,000.			GRANT
OAK PARK SCHOOL DIST 13900 GRANZON OAK PARK, MI 48237	38-6003091	SCHOOL	0.	1,360,000.			GRANT
OAK PARK SERVICE LEARNING 21700 MARLOW ST OAK PARK, MI 48237	38-3478684	SCHOOL	0.	184,000.			GRANT
OAKLAND FAMILY SERVICES 114 ORCHARD LAKE RD. PONTIAC, MI 48235-2507	38-1358388	501(C)(3) PUBLIC	0.	124,334.			GRANT/DESIGNATION
OAKLAND HOPE OF OAKLAND CTY 20 E. WALTON BLVD PONTIAC, MI 48340	30-0761243	501(C)(3) PUBLIC	0.	35,000.			GRANT
OAKLAND INTERNATIONAL ACADEMY 8228 CONANT ST DETROIT, MI 48211	38-3478770	SCHOOL	0.	294,000.			GRANT

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OAKLAND LIVINGSTON HUMAN SVD AGENCY - PO BOX 430598 - PONTIAC, MI 48343-0598	38-1785665	501(C)(3) PUBLIC	0.	75,000.			GRANT
OAKLAND UNIVERSITY GIFT ACCOUNTING DEPARTMENT - 3151 UNIVERSITY DR - AUBURN HILLS, MI 48326	38-1714400	501(C)(3) PUBLIC	0.	48,125.			GRANT
OAKSIDE PREP ACADEMY 355 SUMMIT DR WATERFORD, MI 48328	20-0114589	SCHOOL	0.	625,600.			GRANT
ON MY OWN OF MICHIGAN, INC. 1250 KIRTS BLVD, SUITE 300 TROY, MI 48084	38-3366049	501(C)(3) PUBLIC	0.	8,592.			GRANT
OPERATION REFUGE 27717 CARLYSLE INKSTER, MI 48141	26-1752073	501(C)(3) PUBLIC	0.	230,000.			GRANT
ORANGE COUNTY UNITED WAY (CA) 18012 MITCHELL AVE S. IRVINE, CA 92614	33-0047994	501(C)(3) PUBLIC	0.	6,393.			DESIGNATION
OSBORN NEIGHBORHOOD ALLIANCE 13560 E. MCNICHOLS DETROIT, MI 48205	81-4399151	501(C)(3) PUBLIC	0.	39,754.			GRANT
OZONE HOUSE ANN ARBOR 1600 N HURON RIVER DR YPSILANTI, MI 48197	38-1916505	501(C)(3) PUBLIC	0.	22,675.			GRANT/DESIGNATION
PACKARD HEALTH 5200 VENTURE DR ANN ARBOR, MI 48108	38-2269817	501(C)(3) PUBLIC	0.	45,558.			DESIGNATION

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PAWS WITH A CAUSE 4646 S DIVISION WAYLAND, MI 49348	38-2370342	501(C)(3) PUBLIC	0.	137,713.			DESIGNATION
PEACE NEIGHBORHOOD CENTER 1111 N. MAPLE RD ANN ARBOR, MI 48103	27-7437867	501(C)(3) PUBLIC	0.	99,187.			GRANT/DESIGNATION
PEACE PLAYERS INTERNATIONAL 1100 15TH ST 4TH FLOOR WASHINGTON , DC 20005	52-2272092	501(C)(3) PUBLIC	0.	1,049,000.			GRANT
PEMBROKE ACADEMY 19940 MANFIELD ST DETROIT, MI 48235	47-1511271	SCHOOL	0.	224,000.			GRANT
PIKES PEAK UNITED WAY 518 N. NEVADA AVE COLORADO SPRINGS, CO 80903	84-0511799	501(C)(3) PUBLIC	0.	9,703.			DESIGNATION
PLANNED PARENTHOOD FEDERATION OF AMERICA - PO BOX 97166 - WASHINGTON , DC 20077	13-1644147	501(C)(3) PUBLIC	0.	11,320.			DESIGNATION
PLANNED PARENTHOOD OF MICHIGAN PO BOX 3673 ANN ARBOR, MI 48106	38-1707521	501(C)(3) PUBLIC	0.	52,317.			DESIGNATION
PLAYWORKS EDUCATION ENERGIZED 380 WASHINGTON ST OAKLAND , CA 94607	94-3251867	501(C)(3) PUBLIC	0.	22,500.			GRANT
PLYMOUTH COMMUNITY UNITED WAY PO BOX 6356 PLYMOUTH, MI 48170	23-7327248	501(C)(3) PUBLIC	0.	31,838.			DESIGNATION

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PONTIAC MEALS ON WHEELS 248 S. TELEGRAPH RD. PONTIAC, MI 48341	83-1595183	501(C)(3) PUBLIC	0.	30,000.			GRANT
POPE FRANCIS CENTER 438 ST. ANTOINE DETROIT, MI 48226	81-2516039	501(C)(3) PUBLIC	0.	30,000.			GRANT
QUEST CHARTER ACADEMY 24745 VANBORN RD. TAYLOR, MI 48180	27-0181765	SCHOOL	0.	201,600.			GRANT
RACQUET UP DETROIT P.O. BOX 11404 DETROIT, MI 48211	27-2620275	501(C)(3) PUBLIC	0.	121,360.			GRANT
REDFORD INTERFAITH RELIEF 18499 BEECH DALY RD REDFORD, MI 48240-1804	38-3390350	501(C)(3) PUBLIC	0.	75,000.			GRANT
REDFORD SERVICE LEARNING ACADEMY 21605 W SEVEN MILE RD. DETROIT, MI 48219	38-3478684	SCHOOL	0.	193,000.			GRANT
REDFORD UNION SCHOOL 17715 BRADY ST. REDFORD, MI 48240	38-6004188	SCHOOL	0.	427,500.			GRANT
REGENT PARK SCHOLARS ACADEMY 15865 EAST 7 MILE DETROIT, MI 48205	45-1148496	SCHOOL	0.	208,000.			GRANT
REGENTS OF THE UNIVERSITY OF MICHIGAN - 3003 SOUTH STATE ST. SUITE 9000 - ANN ARBOR, MI 48109-1288	38-6006309	501(C)(3) PUBLIC	0.	63,286.			GRANT/DESIGNATION

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RIVER ROUGE SCHOOL DISTRICT 1460 W. COOLIDGE HWY RIVER ROUGE, MI 48218	38-6004161	SCHOOL	0.	650,000.			GRANT
ROMULUS COMMUNITY SCHOOLS 36540 GRANT ROAD ROMULUS, MI 48174	38-6004189	SCHOOL	0.	801,000.			GRANT
RONALD MCDONALD HOUSE OF ANN ARBOR 1600 WASHINGTON HGTS DR ANN ARBOR, MI 48104	38-2473817	501(C)(3) PUBLIC	0.	5,954.			DESIGNATION
RUTH ELLIS CENTER 95 VICTOR ST. HIGHLAND PARK, MI 48203-3129	38-3501697	501(C)(3) PUBLIC	0.	105,213.			GRANT/DESIGNATION
RUTHERFORD WINANS AC 16411 CURTIS DETROIT, MI 48235	46-0606205	SCHOOL	0.	400,000.			GRANT
SAFEHOUSE CENTER 4100 CLARK RD ANN ARBOR, MI 48105	38-2121751	501(C)(3) PUBLIC	0.	80,977.			GRANT/DESIGNATION
SALINE AREA SOCIAL SERVICE 1259 INDUSTRIAL DR SALINE, MI 48176	23-7134646	501(C)(3) PUBLIC	0.	9,658.			DESIGNATION
SALVATION ARMY EASTERN MICHIGAN DIVISIONAL HQT. - 16130 NORTHLAND DR. - SOUTHFIELD, MI 48075	38-1370971	501(C)(3) PUBLIC	0.	54,623.			GRANT/DESIGNATION
SALVATION ARMY OF WASHTENAW COUNTY 100 ARBANA DR ANN ARBOR, MI 48103	38-1370971	501(C)(3) PUBLIC	0.	7,375.			DESIGNATION

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SAMARITAS LUTHERAN SOCIAL SERVICES OF MICHIGAN 8131 E. JEFFERSON AVE. - DETROIT, MI 48	38-1360553	501(C)(3) PUBLIC	0.	11,583.			DESIGNATION
SAY DETROIT 29836 TELEGRAPH RD SOUTHFIELD, MI 48034	20-4786626	501(C)(3) PUBLIC	0.	1,249,592.			GRANT
SCHOOL DISTRICT OF THE CITY OF PONTIAC - 47200 WOODWARD AVE - PONTIAC, MI 48342	38-6003035	SCHOOL	0.	99,063.			GRANT
SER METRO DETROIT - JOBS FOR PROGRESS, INC. - 9301 MICHIGAN AVENUE - DETROIT, MI 48210	38-2080820	501(C)(3) PUBLIC	0.	120,000.			GRANT
SHELTER ASSOCIATION OF WASHTENAW CTY - PO BOX 7370 - ANN ARBOR, MI 48107	38-2533030	501(C)(3) PUBLIC	0.	40,137.			GRANT/DESIGNATION
SICKLE CELL DISEASE ASSOCIATION 18516 JAMES COUZENS DETROIT, MI 48235	38-1963640	501(C)(3) PUBLIC	0.	15,085.			DESIGNATION
SINGLE FAMILY LIVING 1420 WASHINGTON BLVD STE 301 DETROIT, MI 48226	46-2223901	501(C)(3) PUBLIC	0.	7,000.			GRANT
SOS COMMUNITY SERVICE 101 S. HURON YPSILANTI, MI 48197	38-2037588	501(C)(3) PUBLIC	0.	115,136.			GRANT/DESIGNATION
SOUND MIND SOUND BODY FOUNDATION 5575 CONNER ST. SUITE 205 DETROIT, MI 48213	47-3868584	501(C)(3) PUBLIC	0.	500,000.			GRANT

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SOUTH OAKLAND SHELTER LIGHTHOUSE MI 46156 WOODWARD AVE PONTIAC, MI 48243	38-2847849	501(C)(3) PUBLIC	0.	90,000.			GRANT
SOUTH REDFORD SCHOOL 26141 SCHOOLCRAFT RD REDFORD, MI 48239	38-6004188	SCHOOL	0.	617,533.			GRANT
SOUTHFIELD PUBLIC SCHOOLS 24661 LAHSER ROAD SOUTHFIELD, MI 48033	38-6003094	SCHOOL	0.	1,930,564.			GRANT
SOUTHGATE COMMUNITY SCHOOLS 13940 LEROY SOUTHGATE, MI 48195	38-6004164	SCHOOL	0.	700,000.			GRANT
SOUTHWEST DETROIT IMMIGRANT AND REFUGEE CTR - 174 RIDGE RD - GROSSE POINTE FARMS, MI 48236	47-3832575	501(C)(3) PUBLIC	0.	50,000.			GRANT
SOUTHWEST ECONOMIC SOLUTIONS 2835 BAGLEY STE# 800 DETROIT, MI 48216	46-2252476	501(C)(3) PUBLIC	0.	90,000.			GRANT
SPHINX ORGANIZATION, INC 2200 HURON ST STE 461 DETROIT, MI 48207	38-3283759	501(C)(3) PUBLIC	0.	10,000.			DESIGNATION
ST PATRICK SENIOR CENTER, INC. 58 PARSONS DETROIT, MI 48201	38-2953534	501(C)(3) PUBLIC	0.	85,000.			GRANT
ST. LOUIS CENTER 16195 OLD U.S. 12 CHELSEA, MI 48118	38-6038121	501(C)(3) PUBLIC	0.	7,900.			DESIGNATION

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ST. VINCENT & SARAH FISHER CENTER 14061 LAPPIN ST. DETROIT, MI 48205	38-1359589	501(C)(3) PUBLIC	0.	11,134.			DESIGNATION
STARFISH FAMILY SERVICES 30000 HIVELEY INKSTER, MI 48141	38-2230416	501(C)(3) PUBLIC	0.	113,184.			GRANT/DESIGNATION
STEWARDSHIP NETWORK 416 LONGSHORE DR ANN ARBOR, MI 48105	56-2471470	501(C)(3) PUBLIC	0.	8,647.			DESIGNATION
STUDENT ADVOCACY CENTER OF MICHIGAN - 124 PEARL ST. SUITE 504 - YPSILANTI, MI 48197	38-2058667	501(C)(3) PUBLIC	0.	117,351.			GRANT/DESIGNATION
SUMMIT ACADEMY NORTH 18601 MIDDLEBELT RD ROMULUS, MI 48174	38-3399067	SCHOOL	0.	725,760.			GRANT
THE ARTHRITIS FOUNDATION 1355 PEACHSTREE ST., STE. 600 ATLANTA, GA 30309-3234	58-1341679	501(C)(3) PUBLIC	0.	7,643.			DESIGNATION
THE DETROIT INSTITUTE FOR CHILDREN 2045 E. WEST MAPLE RD STE D407 COMMERCE TWP, MI 48390-3801	38-1359511	501(C)(3) PUBLIC	0.	9,711.			DESIGNATION
THE ENERGY OVERFLOW ORG. 2027 E MCNICHOLS DETROIT, MI 48212	92-0359761	501(C)(3) PUBLIC	0.	84,138.			GRANT
THE KIND THERAPY 22333 LEEWRIGHT SOUTHFIELD, MI 48033	87-4394105	501(C)(3) PUBLIC	0.	5,216.			DESIGNATION

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THE KONNECTION 19736 WESTMORELAND DETROIT, MI 48219	84-2853022	501(C)(3) PUBLIC	0.	96,334.			GRANT
THE PURPLE ROSE THEATRE COMPANY 137 PARK ST CHELSEA, MI 48118	38-2946466	501(C)(3) PUBLIC	0.	6,066.			DESIGNATION
THE YUNION, INC 1129 OAKMAN BLVD DETROIT, MI 48238	81-2507397	501(C)(3) PUBLIC	0.	811,826.			GRANT
THRIFT SHOP ASSOCIATIAN OF ANN ARBOR - 3500 WASHTENAW AVE STE K - ANN ARBOR, MI 48104	38-6099708	501(C)(3) PUBLIC	0.	5,549.			DESIGNATION
TRANSFORMATION LIFE 3232 JOY RD DETROIT, MI 48206	83-3355586	501(C)(3) PUBLIC	0.	268,800.			GRANT
TRINITY HEALTH SE MICHIGAN 5301 MCAULEY DR YPSILANTI, MI 48197	38-2113393	501(C)(3) PUBLIC	0.	5,455.			DESIGNATION
TURNING POINT INC 158 S. MAIN P O BOX 1123 MT CLEMENS, MI 48043	38-2292020	501(C)(3) PUBLIC	0.	85,322.			GRANT/DESIGNATION
U OF M ALUMNI ASSOCIATION LEAD SCHOLARS - 3003 S. STATE ST STE 8000 - ANN ARBOR, MI 48109	38-6006309	SCHOOL	0.	8,492.			DESIGNATION
U OF M SCHOOL OF PUBLIC HEALTH 3003 S. STATE ST STE 8000 ANN ARBOR, MI 48109	38-6006309	SCHOOL	0.	18,702.			DESIGNATION

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UNITED COMMUNITY HOUSING COALITION 2727 2ND AVE. STE. # 313 DETROIT, MI 48201-2657	38-2142140	501(C)(3) PUBLIC	0.	50,000.			GRANT
UNITED HIV HEALTH AND BEYOND 3968 MT. ELLIOT DETROIT, MI 48207	38-2464851	501(C)(3) PUBLIC	0.	9,261.			DESIGNATION
UNITED NEGRO COLLEGE FUND 18701 GRAND RIVER AVE. #329 DETROIT, MI 48223	13-1624241	501(C)(3) PUBLIC	0.	46,228.			DESIGNATION
UNITED WAY BLACKHAWK REGION 205 N. MAIN ST STE 101 JANESVILLE, WI 53545	39-6006734	501(C)(3) PUBLIC	0.	17,200.			DESIGNATION
UNITED WAY OF BOONE COUNTY (IL) 220 W. LOCUST ST BELVIDERE, IL 61008	36-2700861	501(C)(3) PUBLIC	0.	12,099.			DESIGNATION
UNITED WAY OF BUFFALO & ERIE COUNTY - 742 DELAWARE AVE - BUFFALO, NY 14209	16-0743969	501(C)(3) PUBLIC	0.	25,702.			DESIGNATION
UNITED WAY OF CENTRAL OHIO 360 S. 3RD ST COLUMBUS, OH 43215	31-4393712	501(C)(3) PUBLIC	0.	7,152.			DESIGNATION
UNITED WAY OF DEKALB COUNTY 307 E. 9TH ST AUBURN , IN 46706	35-1065714	501(C)(3) PUBLIC	0.	7,356.			DESIGNATION
UNITED WAY OF GENESEE COUNTY 111 E. COURT ST. STE. #3 FLINT, MI 48502	38-1359516	501(C)(3) PUBLIC	0.	19,741.			DESIGNATION

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UNITED WAY OF GREATER CINCINNATI PO BOX 632711 CINCINNATI, OH 45263	31-0537502	501(C)(3) PUBLIC	0.	91,751.			DESIGNATION
UNITED WAY OF GREATER CLEVELAND 1331 EUCLID AVE CLEVELAND, OH 44115	34-6516654	501(C)(3) PUBLIC	0.	31,283.			DESIGNATION
UNITED WAY OF GREATER HOUSTON PO BOX 3247 HOUSTON, TX 77253	74-1167964	501(C)(3) PUBLIC	0.	5,561.			DESIGNATION
UNITED WAY OF GREATER KANSAS CITY PO BOX 871400 KANSAS CITY, MO 64187	44-0545812	501(C)(3) PUBLIC	0.	68,465.			DESIGNATION
UNITED WAY OF GREATER LIMA INC 616 S. COLLETT ST LIMA, OH 45805	34-4466356	501(C)(3) PUBLIC	0.	34,728.			DESIGNATION
UNITED WAY OF GREATER LORAIN COUNTY - 642 BROADWAY AVE - LORAIN, OH 44052	34-1011104	501(C)(3) PUBLIC	0.	41,702.			DESIGNATION
UNITED WAY OF GREATER PLYMOUTH CNTY - 928 W CHESNUT ST 2ND FL - BROCKTON, MA 02301	04-2103940	501(C)(3) PUBLIC	0.	9,598.			DESIGNATION
UNITED WAY OF GREATER TOLEDO 1001 MADISON AVE., STE. 100 TOLEDO, OH 43604	34-4427947	501(C)(3) PUBLIC	0.	138,920.			DESIGNATION
UNITED WAY OF HOWARD COUNTY 210 W. WALNUT ST. KOKOMO, IN 46901	35-0877579	501(C)(3) PUBLIC	0.	386,447.			DESIGNATION

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UNITED WAY OF LAPEER COUNTY (MI) 3333 JOHN CONLEY DRIVE LAPEER, MI 48446	38-3509445	501(C)(3) PUBLIC	0.	25,366.			DESIGNATION
UNITED WAY OF LEE COUNTY, INC - IL PO BOX 382 DIXON, IL 61021	36-6009288	501(C)(3) PUBLIC	0.	8,443.			DESIGNATION
UNITED WAY OF METROPOLITAN CHICAGO 333 S. WABASH AVE. FLOOR # 30 CHICAGO, IL 60604	30-0200478	501(C)(3) PUBLIC	0.	42,393.			DESIGNATION
UNITED WAY OF METROPOLITAN NASHVILLE - 250 VENTURE CIRCLE - NASHVILLE, TN 37228	62-0533104	501(C)(3) PUBLIC	0.	12,913.			DESIGNATION
UNITED WAY OF MONROE COUNTY (MI) 216 NORTH MONROE STREET MONROE, MI 48162	38-1437937	501(C)(3) PUBLIC	0.	180,843.			DESIGNATION
UNITED WAY OF NORTHWEST MICHIGAN 4075 COPPER RIDGE DR TRAVERSE CITY, MI 49684	38-1679060	501(C)(3) PUBLIC	0.	10,418.			DESIGNATION
UNITED WAY OF ROCK RIVER VALLEY 612 N MAIN ST SUITE 200 ROCKFORD, IL 61103-6921	36-2167843	501(C)(3) PUBLIC	0.	82,915.			DESIGNATION
UNITED WAY OF SAGINAW COUNTY 100 S. JEFFERSON AVE 3RD FLOOR SAGINAW, MI 48607	38-1358215	501(C)(3) PUBLIC	0.	12,438.			DESIGNATION
UNITED WAY OF ST CLAIR COUNTY 1723 MILITARY STREET PORT HURON, MI 48060	38-1357996	501(C)(3) PUBLIC	0.	111,879.			DESIGNATION

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UNITED WAY OF THE LAKESHORE PO BOX 207 MUSKEGON, MI 49443	38-1426895	501(C)(3) PUBLIC	0.	7,301.			DESIGNATION
UNITED WAY OF THE MID SOUTH 1005 TILLMAN ST MEMPHIS, TN 38112	56-1010742	501(C)(3) PUBLIC	0.	6,276.			DESIGNATION
UNITED WAY OF THE MIDLANDS 2201 FARNAM ST. OMAHA, NE 68102	47-0376605	501(C)(3) PUBLIC	0.	24,073.			DESIGNATION
UNITED WAY OF THE NATL CAPITAL AREA - 8614 WESTWOOD CENTER DR STE 300 - VIENNA, VA 22182	53-0234290	501(C)(3) PUBLIC	0.	6,567.			DESIGNATION
UNITED WAY OF TUSCOLA COUNTY PO BOX 51 CASS CITY, MI 48726	38-3004648	501(C)(3) PUBLIC	0.	9,540.			DESIGNATION
UNIVERSITY MUSICAL SOCIETY 881 N UNIVERSITY AVE. ANN ARBOR, MI 48109	38-1545881	SCHOOL	0.	19,611.			DESIGNATION
UNIVERSITY OF MICHIGAN 3003 S. STATE ST STE 8000 ANN ARBOR, MI 48109	38-6006309	SCHOOL	0.	37,356.			DESIGNATION
UNIVERSITY PREPARATORY ACADEMY 600 ANTOINETTE DETROIT, MI 48202	30-0573793	SCHOOL	0.	842,400.			GRANT
UNIVERSITY YES ACADE 14669 CURTIS ST DETROIT, MI 48235	27-1837383	SCHOOL	0.	394,177.			GRANT

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URBAN LEAGUE OF DETROIT 208 MACK AVE DETROIT, MI 48201	38-1358387	501(C)(3) PUBLIC	0.	13,876.			GRANT/DESIGNATION
URBAN NEIGHBORHOOD INITIATIVES 8300 LONGWORTH DETROIT, MI 48209	38-3417161	501(C)(3) PUBLIC	0.	25,000.			DESIGNATION
VALLEY OF THE SUN UNITED WAY 3115 N 3RD AVE STE G130 PHOENIX, AZ 85013	86-0104419	501(C)(3) PUBLIC	0.	5,771.			DESIGNATION
VIDANT HEALTH FOUNDATION PO BOX 8489 BREENVILLE, NC 27835	56-2003393	501(C)(3) PUBLIC	0.	6,800.			DESIGNATION
VISTA MARIA 20651 W WARREN AVE DEARBORN HEIGHTS, MI 48127	38-1359262	501(C)(3) PUBLIC	0.	31,553.			DESIGNATION
WALTON CHARTER ACADEMY 744 E. WALTON BLVD PONTIAC, MI 48340	38-3479189	SCHOOL	0.	453,886.			GRANT
WARRENDALE CHARTER ACADEMY 19400 SAWYER RD DETROIT, MI 48228	38-1684280	SCHOOL	0.	256,000.			GRANT
WARRIOR ACADEMY 149 N PERRY PONTIAC, MI 48342	92-0863414	SCHOOL	0.	600,000.			GRANT
WASHTEAN HEALTH PLAN 555 TOWNER ST YPSILANTI, MI 48198	02-0585175	501(C)(3) PUBLIC	0.	70,000.			GRANT

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
WASHTENAW COMMUNITY COLLEGE FOUNDATION - 4800 E. HURON DR - ANN ARBOR, MI 48105	38-2575395	501(C)(3) PUBLIC	0.	20,258.			DESIGNATION
WASHTENAW HOUSING ALLIANCE PO BOX 7993 ANN ARBOR, MI 48107	38-3551639	501(C)(3) PUBLIC	0.	50,000.			GRANT
WASHTENAW INTERMEDIATE SCHOOL DISTRICT - 1819 S WAGNER RD - ANN ARBOR, MI 48106	38-1717462	SCHOOL	0.	10,000.			GRANT
WAYNE METROPOLITAN COMMUNITY ACTION AGENCY - 7310 WOODWARD, STE. 800 - DETROIT, MI 48202	38-1976979	501(C)(3) PUBLIC	0.	190,000.			GRANT
WELLSPRING LUTHERAN SERVICES C&F PO BOX 48 BAY CITY, MI 48707-0048	38-1359524	501(C)(3) PUBLIC	0.	61,313.			GRANT/DESIGNATION
WEST BLOOMFIELD SCHOOL DISTRICT 5810 COMMERCE RD WEST BLOOMFIELD, MI 48324	38-6007700	SCHOOL	0.	27,100.			GRANT
WESTFIELD CHARTER ACADEY 23750 ELMIRA ST REDFORD, MI 48239	83-3353326	SCHOOL	0.	336,000.			GRANT
WINNING FUTURES 27500 COSGROVE WARREN, MI 48092	20-2263860	501(C)(3) PUBLIC	0.	24,380.			DESIGNATION
WOMEN'S CENTER OF SOUTHEASTERN MICHIGAN - 1100 VICTORY WAY #10 - ANN ARBOR, MI 48108	36-4338567	501(C)(3) PUBLIC	0.	10,000.			GRANT

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 METROPOLITAN DETROIT 1401 BROADWAY SUITE 3A DETROIT, MI 48226	38-1358055	501(C)(3) PUBLIC	0.	55,788.			GRANT/DESIGNATION
YPSILANTI MEALS ON WHEELS 1110 W. CROSS ST YPSILANTI, MI 48197	38-2038528	501(C)(3) PUBLIC	0.	49,399.			GRANT/DESIGNATION
ZAMAN INTERNATIONAL 26091 TROWBRIDGE ST. INKSTER, MI 48141	20-1946065	501(C)(3) PUBLIC	0.	75,000.			GRANT

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
UTILITY ASSISTANCE	10360	8,567,564.	0.	N/A	N/A
RIDE UNITED	1060	611,089.	0.	N/A	N/A
BOOKS	3118	0.	115,079.	PURCHASE PRICE	SCHOLASTIC BOOKS

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

PART I, LINE 2:
THE GRANT AWARD PROCESS BEGINS WITH A REQUEST FOR PROPOSAL PROCESS. BASED ON A REVIEW OF THE PROPOSALS, GRANTS ARE AWARDED TO AGENCIES. THROUGHOUT THE YEAR, AGENCIES ARE REQUIRED TO SUBMIT PROGRESS REPORTS ON THE PROJECTS THAT WERE FUNDED THROUGH THE GRANT AWARD PROCESS. UWSEM ALSO CONFIRMS TAX STATUS (501C3, GOVERNMENTAL, FOR PROFIT), REVIEWS 990 DATA, AND MAY REVIEW AUDITED FINANCIALS OR OTHER SUPPORTING DOCUMENTS. IN ADDITION, UWSEM STAFF CONDUCT ON-SITE VISITS OF AGENCIES TO REVIEW PROGRESS ON GRANT ACTIVITIES DURING THE YEAR. FOR DONOR DESIGNATIONS, UWSEM VERIFIED THAT THE AGENCY IS A 501(C)(3) NON-PROFIT ORGANIZATION AND THAT THE AGENCY IS IN COMPLIANCE WITH THE PROVISIONS OF THE PATRIOT ACT.

SCHEDULE J (Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
Attach to Form 990.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number

20-3099071

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel	☐ Housing allowance or residence for personal use		
	☐ Travel for companions	☐ Payments for business use of personal residence		
	☐ Tax indemnification and gross-up payments	☒ Health or social club dues or initiation fees		
	☐ Discretionary spending account	☐ Personal services (such as maid, chauffeur, chef)		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	X	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	X	
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	☒ Compensation committee	☐ Written employment contract		
	☐ Independent compensation consultant	☒ Compensation survey or study		
	☒ Form 990 of other organizations	☒ Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
a	Receive a severance payment or change-of-control payment?	4a	X	
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		X
c	Participate in or receive payment from an equity-based compensation arrangement?	4c		X
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
a	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III.			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9		

Part II **Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DR. DARIENNE HUDSON	(i)	400,027.	30,508.	1,200.	0.	9,944.	441,679.	0.
CHIEF EXECUTIVE OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) BRANDON LEE	(i)	256,731.	16,461.	2,885.	0.	15,112.	291,189.	0.
CHIEF OPERATING OFFICER & EXECUTIVE	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) TONYA ADAIR	(i)	182,692.	10,765.	79,162.	0.	11,885.	284,504.	0.
FORMER CHIEF PEOPLE, EQUITY & ENG	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) SARAH GRUTZA	(i)	141,346.	6,594.	74,654.	0.	10,940.	233,534.	0.
VP CORPORATE RELATIONS-PART YEAR	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) ASHLEIGH IMERMAN	(i)	200,616.	7,159.	0.	0.	25,174.	232,949.	0.
CHIEF PHILANTHROPY OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LARA KEATHLEY	(i)	184,431.	6,782.	2,077.	0.	22,354.	215,644.	0.
VICE PRESIDENT, PEOPLE, CULUTRE, & G	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) KYLE DUBUC	(i)	179,308.	6,782.	0.	0.	27,477.	213,567.	0.
VICE PRESIDENT, COMMUNICAT	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) JEFFREY MILES	(i)	191,262.	7,242.	1,200.	0.	5,099.	204,803.	0.
VICE PRESIDENT, COMMUNITY	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KAREN LEGENDRE	(i)	126,030.	5,000.	25,480.	0.	4,137.	160,647.	0.
FORMER CHIEF FINANCIAL OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:
THE ORGANIZATION PAYS THE DUES FOR A DETROIT ATHLETIC CLUB MEMBERSHIP FOR THE CEO. THE DETROIT ATHLETIC CLUB'S FACILITIES INCLUDE DINING ROOMS AND MEETING ROOMS AND IS UTILIZED BY MANY INDIVIDUALS AND ORGANIZATIONS IN THE DETROIT BUSINESS COMMUNITY. THE CEO USES THE MEMBERSHIP PRIMARILY TO CONDUCT BUISNESS MEETINGS THROUGHOUT THE YEAR.

PART I, LINE 4A:
THE FOLLOWING INDIVIDUALS RECEIVED SEVERANCE PAYMENTS:

TONYA ADAIR: $79,162
SARAH GRUTZA: $74,654
KAREN LEGENDRE: $25,480

PART I, LINE 7:
BONUSES FOR THE PRESIDENT & CEO ARE SUBJECT TO A COMPENSATION POLICY AND THE APPROVAL OF THE BOARD CHAIR AND VICE CHAIR. BONUSES FOR ALL OTHER OFFICERS, DIRECTORS, AND EMPLOYEES ARE PAID ON A DISCRETIONARY AS DETERMINED BY THE PRESIDENT & CEO.

SCHEDULE L
(Form 990)
(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c; or Form 990-EZ, Part V, line 38a or 40b.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b; or Form 990-EZ, Part V, line 40b.

1 **(a)** Name of disqualified person	**(b)** Relationship between disqualified person and organization	**(c)** Description of transaction	**(d)** Corrected? Yes	No
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 ..... $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ..... $

Part II Loans to and/or From Interested Persons

Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	**(b)** Relationship with organization	**(c)** Purpose of loan	**(d)** Loan to or from the organization? To	From	**(e)** Original principal amount	**(f)** Balance due	**(g)** In default? Yes	No	**(h)** Approved by board or committee? Yes	No	**(i)** Written agreement? Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total						$						

Part III Grants or Assistance Benefiting Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	**(b)** Relationship between interested person and the organization	**(c)** Amount of assistance	**(d)** Type of assistance	**(e)** Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV Business Transactions Involving Interested Persons

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) SUBSTANTIAL CONTRIBUTOR	SUBSTANTIAL CONTRIB	8,062,138.	PAYMENTS FO		X
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V Supplemental Information

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

SCH L, PART IV, BUSINESS TRANSACTIONS INVOLVING INTERESTED PERSONS:
(A) NAME OF PERSON: SUBSTANTIAL CONTRIBUTOR
(B) RELATIONSHIP BETWEEN INTERESTED PERSON AND ORGANIZATION:
SUBSTANTIAL CONTRIBUTOR
(D) DESCRIPTION OF TRANSACTION: PAYMENTS FOR GRANTS AND PROGRAMS FOR INDIVIDUALS

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2024

Open to Public Inspection

Name of the organization

UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number

20-3099071

Part I Types of Property

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1	Art - Works of art				
2	Art - Historical treasures				
3	Art - Fractional interests				
4	Books and publications				
5	Clothing and household goods				
6	Cars and other vehicles				
7	Boats and planes				
8	Intellectual property				
9	Securities - Publicly traded	X	22	361,858.	MARKET 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 - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other (COMPUTER EQUIPM)	X	1	6,815.	FAIR MARKET VALUE
26	Other ( )				
27	Other ( )				
28	Other ( )				

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

			Yes	No
30a	During the year, did the organization receive by contribution any property reported on 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
b	If "Yes," describe the arrangement in Part II.			
31	Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	31	X	
32a	Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a	X	
b	If "Yes," describe in Part II.			
33	If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.			

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

SCHEDULE M, PART I, COLUMN (B):
THE NUMBER REPORTED IS THE NUMBER OF CONTRIBUTORS.

SCHEDULE M, PART I, LINE 32B:
UNITED WAY FOR SOUTHEASTERN MICHIGAN USES THE SERVICES OF A BROKERAGE FIRM TO SELL DONATED SECURITIES.

SCHEDULE O (Form 990)
(Rev. December 2024)
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 instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization
UNITED WAY FOR SOUTHEASTERN MICHIGAN

Employer identification number
20-3099071

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
INDIVIDUAL LIVES IN MEASURABLE AND LASTING WAYS.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
RIGHT RESOURCES AT THE RIGHT TIME WHILE WORKING ALONGSIDE PARTNERS TO BUILD A MORE COORDINATED, PERSON-CENTERED SYSTEM OF CARE. LAST YEAR, OUR 211 CALL CENTER SERVED AS THE FRONT DOOR INTO THE SOCIAL SERVICES ECOSYSTEM HANDLING 148,781 CONNECTIONS.
PRIORITY INITIATIVES & PROGRAMS
211 HELPLINE & SOCIAL NAVIGATION
CONNECT4CARE COMMUNITY INFORMATION EXCHANGE
BASIC NEEDS GRANTS
UTILITY ASSISTANCE

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
COMMUNITY SCHOOLS
MY HOME LIBRARY BOOK FAIRS
BUILDING FOUNDATIONS
SUMMER DISCOVERY
STEM EDUCATION GRANTS
LITTLE FREE LIBRARIES
MAKERSPACES & STEMPOSSIBLE

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:
FINANCIAL COACHING

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:
OTHER: UNITED WAY FOR SOUTHEASTERN MICHIGAN FUNDS, SUPPORTS AND ADMINISTERS SEVERAL ADDITIONAL PROGRAMS THAT SUPPORT THE OVERALL HEALTH, WELL-BEING AND EQUITY OF OUR COMMUNITY AND ITS RESIDENTS. OUR 2-1-1 HELPLINE CONTINUED TO SERVE AS A VITAL RESOURCE FOR THOUSANDS OF COMMUNITY MEMBERS LOOKING FOR ASSISTANCE WITH HOUSING, UTILITY ASSISTANCE, FOOD PANTRIES AND MORE AS THE PANDEMIC CONTINUED AND INFLATION IMPACTED HOUSEHOLD BUDGETS. AS PART OF OUR ONGOING EFFORTS TO ADDRESS RACIAL EQUITY AND OTHER EQUITY-FOCUSED ISSUES, WE CONTINUED TO AWARD RACIAL EQUITY FUND GRANTS, NOW TOTALING $3.2 MILLION SINCE THE PROGRAM'S INCEPTION IN 2022. WE HAVE CONTINUED HOSTING 21-DAY EQUITY CHALLENGE EVENTS AIMED AT ENGAGING AND EDUCATING THE COMMUNITY. WE ALSO MOBILIZED THOUSANDS OF VOLUNTEERS AND ADVOCATES TO ROLL UP THEIR SLEEVES AND HELP THEIR COMMUNITIES AND USE THEIR VOICES TO PUSH FOR POLICIES THAT HELP WORKING FAMILIES. LASTLY, WE PROVIDE GRANTS AND PAY DESIGNATIONS TO MORE THAN 120 NONPROFIT AGENCIES THAT PROVIDE DIRECT SERVICE TO THE COMMUNITIES OF SOUTHEASTERN MICHIGAN. MORE THAN1 MILLION PEOPLE ARE IMPACTED THROUGH THE INVESTMENT OF RESOURCES IN EDUCATION, INCOME, AND BASIC NEEDS.
EXPENSES $ 19,677,053. INCLUDING GRANTS OF $ 19,663,942. REVENUE $ 0.

FORM 990, PART VI, SECTION B, LINE 11B:
THE DRAFT FORM 990 IS REVIEWED BY STAFF INTERNALLY BEFORE FINALIZING. THE 990 IS THEN PROVIDED TO THE AUDIT COMMITTEE AND BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING.

Name of the organization: UNITED WAY FOR SOUTHEASTERN MICHIGAN
Employer identification number: 20-3099071

FORM 990, PART VI, SECTION B, LINE 12C:
EACH MEMBER OF THE BOARD OF DIRECTORS COMPLETES A CONFLICT OF INTEREST QUESTIONNAIRE ANNUALLY. WHEN THE BOARD OF DIRECTORS IS VOTING ON SPECIFIC ISSUES WHERE A PARTICULAR DIRECTOR MIGHT HAVE A CONFLICT OF INTEREST, THE DIRECTOR RECUSES HIMSELF FROM VOTING.

FORM 990, PART VI, SECTION B, LINE 15A:
KEY FEATURE OF THE CHIEF EXECUTIVE OFFICER'S COMPENSATION AND BENEFITS

COMPENSATION POLICY & OBJECTIVES

UNITED WAY FOR SOUTHEASTERN MICHIGAN (UWSEM) MAINTAINS THE HIGHEST STANDARDS OF PROFESSIONALISM, ACCOUNTABILITY AND TRANSPARENCY IN ITS STEWARDSHIP OF CONTRIBUTOR DOLLARS AND FINANCIAL MANAGEMENT. IN REGARDS TO ITS EXECUTIVE COMPENSATION PROGRAM, UWSEM'S OBJECTIVES ARE TO:

- ENCOURAGE THE ATTRACTION AND RETENTION OF HIGH CALIBER EXECUTIVES BY PROVIDING A TOTAL COMPENSATION OPPORTUNITY, INCLUDING BENEFITS, THAT IS COMPETITIVE ON A LOCAL AND NATIONAL LEVEL.
- ASSURE THAT THE PROCESS STRONGLY SUPPORTS AND FURTHER TRANSITIONS THE ORGANIZATION TO A "PAY FOR PERFORMANCE" CULTURE THROUGH THE USE OF INCENTIVES ON A LOCAL AND NATIONAL LEVEL.
- REINFORCE THE GOALS OF THE ORGANIZATION BY SUPPORTING TEAMWORK AND COLLABORATION
- DEVELOP COMPENSATION LEVELS THAT ARE CONSISITENT WITH UWSEM'S MISSION
- MAINTAIN A PROCESS THAT IS FREE FROM CONFLICTS OF INTEREST AND IN COMPLIANCE WITH RELEVANT REGULATIONS
- ENSURE TRANSPARENCY IN ITS COMPENSATION DECISIONS

GOVERNANCE & OVERSIGHT

UNITED WAY FOR SOUTHEASTERN MICHIGAN'S BYLAWS PROVIDE FOR THE EXECUTIVE COMMITTEE TO DETERMINE COMPENSATION OF THE CHIEF EXECUTIVE OFFICER. THE COMMITTEE BASES ITS DECISIONS, IN PART, ON APPROPRIATE COMPENSATION COMPARABILITY DATA. COMPARISONS ARE MADE BETWEEN USWEM AND OTHER ORGANIZATIONS BASED ON ORGANIZATION SIZE (REVENUE, ASSETS, NUMBER OF EMPLOYEES, ETC.). IN ADDITION, THE COMMITTEE UTILIZED COMPENSATION STUDIES AND OUTSIDE CONSULTANTS TO REVIEW THE CEO'S COMPENSATION. THE COMMITTEE EVALUATED THE CEO'S GENERAL MANAGEMENT AND LEADERSHIP COMPETENCIES AS WELL AS HER PERFORMANCE AGAINST THE KEY OBJECTIVES SET AT THE BEGINNING OF THE YEAR.

FORM 990, PART VI, SECTION C, LINE 19:
THE GOVERNING DOCUMENTS, CONFLICTS OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE AVAILABLE TO THE PUBLIC AT UWSEM'S OFFICES. IN ADDITION, COPIES OF THESE DOCUMENTS WILL BE PROVIDED BY MAIL OR EMAIL UPON REQUEST. THE AUDITED FINANCIAL STATEMENTS AND FORM 990 ARE ALSO AVAILABLE ON UWSEM'S WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:
FUND BALANCE RELATING TO BALLMER GROUP -1,605,671.

FORM 990, PART XII, LINE 2C:
THE AUDIT PROCESS HAS NOT CHANGED FROM PRIOR YEAR.