

PUBLIC DISCLOSURE COPY

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2023

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

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

A For the 2023 calendar year, or tax year beginning JUL 1, 2023 and ending JUN 30, 2024

Form header section containing organization name (UNITED WAY SUNCOAST, INC.), address (4925 INDEPENDENCE PKWY, TAMPA, FL), identification number (59-3725701), and other details.

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include mission statement, governance metrics, revenue (Total: 17,275,064), expenses (Total: 21,817,175), and net assets (Total: 42,259,723).

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.

Signature block containing officer signature (JESSICA MUROFF, CEO), preparer signature (LISA BURKE), and firm information (CBIZ ADVISORS, LLC).

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

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 ETERNALLY LEAD, CONVENE AND COLLABORATE OUR COMMUNITIES AS WE'VE DONE FOR MORE THAN 100 YEARS TO MEET THE MOST PRESSING ISSUES OF THE DAY, CREATING BETTER TOMORROWS. (CONTINUED ON SCHEDULE O)

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [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 \$ 7,389,989. including grants of \$ 5,778,435.) (Revenue \$) EARLY LEARNING AND YOUTH SUCCESS: CONDITIONS - CHALLENGES CONTINUED TO PERSIST FOR STAKEHOLDERS ENGAGING IN EARLY LEARNING AND LITERACY EDUCATION. IN THE SUNCOAST FIVE-COUNTY REGION, 46% OF STUDENTS ENTERING SCHOOL ARE NOT READY FOR KINDERGARTEN AS MEASURED BY THE STATE KINDERGARTEN READINESS (FLKRS (FLORIDA KINDERGARTEN READINESS)) ASSESSMENT. PRE-KINDERGARTEN ENROLLMENT HAS DECREASED FROM 80% IN 2014 TO AROUND 65% TODAY. CHILDCARE COSTS ARE A PREVALENT FACTOR IN THIS AREA. MEANWHILE, WHEN COMPARED TO FLORIDA'S FOUR LARGE METRO REGIONS, TAMPA BAY RANKS LAST IN THIRD GRADE READING SCORES. UNITED WAY SUNCOAST IS WORKING WITH 36 SCHOOLS OF FOCUS IN THE SUNCOAST REGION TO IMPROVE READING LEVELS. (CONTINUED ON SCHEDULE O)

4b (Code:) (Expenses \$ 5,862,644. including grants of \$ 3,877,065.) (Revenue \$) FINANCIAL STABILITY: CONDITIONS - ECONOMIC CHALLENGES PERSIST ACROSS THE SUNCOAST REGION, WITH THE TAMPA BAY PARTNERSHIP REVEALING THAT THE AREA RANKS LAST (20TH OUT OF 20) IN MEDIAN HOUSEHOLD INCOME (MHI) COMPARED TO SIMILAR METRO REGIONS NATIONWIDE. RISING COSTS OF LIVING, COUPLED WITH STAGNANT WAGES, EXACERBATE THESE STRUGGLES. HOUSING AND TRANSPORTATION EXPENDITURES ACCOUNT FOR NEARLY 60% OF HOUSEHOLD INCOMES IN THE REGION, FAR ABOVE THE 40% THRESHOLD RECOMMENDED BY FINANCIAL PROFESSIONALS. THESE FINANCIAL STRAINS ARE EVEN MORE PRONOUNCED IN UNITED WAY SUNCOAST'S ZIP CODES OF FOCUS, WHERE THE WEIGHTED AVERAGE MHI IS 15.4% LOWER THAN THE BROADER SUNCOAST REGION. (CONTINUED ON SCHEDULE O)

4c (Code:) (Expenses \$ 2,094,131. including grants of \$ 398,060.) (Revenue \$ 225,553.) COMMUNITY SUPPORT SERVICES: UNITED WE SERVE (VOLUNTEERS) - VOLUNTEER ACTION IS A KEY PART OF UNITED WAY'S MISSION, AND WITH UNITED WE SERVE, OUR PHILANTHROPIC ENGAGEMENT TEAM CREATES OPPORTUNITIES THROUGHOUT THE YEAR WITH ITS MONTHLY ENGAGEMENT OPPORTUNITIES.

WE STARTED THE FISCAL YEAR WITH OPPORTUNITIES TO SUPPORT OUR LOCAL SCHOOLS AND THE COMMUNITY JUMPED TO ACTION, COLLECTIVELY DONATING OVER 6,300 SCHOOL SUPPLIES THAT OUR UWS EDUCATION TEAM HAS DISTRIBUTED IN OUR FIVE-COUNTY REGION.

(CONTINUED ON SCHEDULE O)

4d Other program services (Describe on Schedule O.) (Expenses \$ 1,566,965. including grants of \$ 1,566,965.) (Revenue \$ 138,370.)

4e Total program service expenses 16,913,729.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Yes, No. Rows include questions 1 through 21 regarding organizational requirements and schedules A through I.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Yes, No. Rows include questions 22 through 38 regarding grants, compensation, tax-exempt bonds, excess benefit transactions, and other IRS requirements.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with 3 columns: Question ID, Yes, No. Rows include questions 1a, 1b, and 1c regarding Form 1096, Forms W-2G, and backup withholding rules.

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

Table with columns for question number, question text, and Yes/No columns. Includes rows 2a through 17 with various tax-related questions and answers.

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

Table with 3 columns: Question, Yes, No. Rows include 1a (35), 1b (35), 2, 3, 4, 5, 6, 7a, 7b, 8a, 8b, 9.

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

Table with 3 columns: Question, Yes, No. Rows include 10a, 10b, 11a, 11b, 12a, 12b, 12c, 13, 14, 15a, 15b, 16a, 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed FL
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.
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
KELLY KAVANAUGH, CFIO - 813-274-0900
4925 INDEPENDENCE PKWY, STE 120, TAMPA, FL 33634

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) JESSICA MUROFF CEO	45.00			X			251,542.	0.	23,998.	
(2) KELLY KAVANAUGH CHIEF FINANCIAL & INVESTMENT OFFICER	45.00			X			164,776.	0.	17,591.	
(3) JENNIFER MCINTOSH CHIEF TALENT OFFICER	45.00					X	153,373.	0.	18,603.	
(4) MARIA BRONWYN BEIGHTOL CHIEF IMPACT OFFICER	45.00					X	145,928.	0.	25,580.	
(5) KARI GOETZ CHIEF MARKETING & ADVANCMENT OFFICER	45.00					X	133,526.	0.	17,882.	
(6) ERNEST HOOPER CHIEF COMMUNICATIONS OFFICER	45.00					X	117,792.	0.	18,922.	
(7) GINA PRZETOCKI VP, FINANCE	45.00					X	104,115.	0.	24,261.	
(8) JAMES CAMP CHAIR	1.00	X		X			0.	0.	0.	
(9) SARA NICHOLS VICE CHAIR	0.25	X		X			0.	0.	0.	
(10) TRACI LARSEN TREASURER/FINANCE CHAIR	1.00	X		X			0.	0.	0.	
(11) LORI BAGGETT SECRETARY	0.25	X		X			0.	0.	0.	
(12) DAVID PIZZO PAST CHAIR (TERM END 2/8/24)	1.00	X					0.	0.	0.	
(13) ROBBIE ARTZ MEMBER (TERM START 1/1/24)	0.25	X					0.	0.	0.	
(14) SAM BLATT MEMBER	0.25	X					0.	0.	0.	
(15) BRUCE BODY MEMBER (TERM START 1/1/24)	0.25	X					0.	0.	0.	
(16) CHERI CORYEA MEMBER (TERM START 1/1/24)	0.25	X					0.	0.	0.	
(17) SCOTT CURTIS MEMBER	0.25	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) MICHAEL DAIGLE MEMBER	1.00	X						0.	0.	0.
(19) TAMMY DAVIS MEMBER	0.25	X						0.	0.	0.
(20) JACKI DEZELSKI MEMBER	0.50	X						0.	0.	0.
(21) J.P. DUBUQUE MEMBER	0.25	X						0.	0.	0.
(22) JAMIE EGASTI MEMBER	0.25	X						0.	0.	0.
(23) MICHELLE GRIMSLEY MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(24) CARL HARNESS MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(25) LAURA HURD MEMBER (TERM START 1/1/24)	0.50	X						0.	0.	0.
(26) DEVANEY IGLESIAS MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
1b Subtotal								1,071,052.	0.	146,837.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,071,052.	0.	146,837.

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

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? 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
STRATUS LIVE, LLC, 6465 COLLEGE ARK SQUARE, VIRGINIA BEACH, VA 23464	IT DATA SYSTEM INTEGRATION AND SUPP	484,882.
SIXWATCH 1646 W. SNOW AVE, TAMPA, FL 33606	MANAGTED IT SERVICES	315,563.
BOB CARTER COMPANIES, LLC, 2145 14TH AVENUE, SUITE 26, VERO BEACH, FL 32960	CONSULTING - CAPITAL CAMPAIGN	130,738.
RSA CONSULTING GROUP, LLC, 235 W BRANDON BLVD SUITE 640, BRANDON, FL 33511	PUBLIC POLICY CONSULTANT	130,000.
KOESTER CONSULTING GROUP 5855 HELICON PLACE, SARASOTA, FL 34238	CONSULTING	125,000.

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) ROB LANE MEMBER	0.50	X						0.	0.	0.
(28) MARY LIFLAND MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(29) CHAD LOAR MEMBER	0.25	X						0.	0.	0.
(30) MELVA MCKAY BASS MEMBER	0.25	X						0.	0.	0.
(31) ASENA MOTT MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(32) CANDY OLSON MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(33) BECKY PICKETT MEMBER	0.25	X						0.	0.	0.
(34) THOMAS RAMETTA MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(35) THAIS RODRIGUEZ-CAEZ MEMBER	0.25	X						0.	0.	0.
(36) ANTHONY ROLLE MEMBER	0.25	X						0.	0.	0.
(37) SONJA ROSARIO MEMBER	0.25	X						0.	0.	0.
(38) EMILY SCOTT MEMBER	0.25	X						0.	0.	0.
(39) ALEX SINK MEMBER	0.25	X						0.	0.	0.
(40) MICHAEL SMITH MEMBER	0.25	X						0.	0.	0.
(41) ROBERT THOMPSON MEMBER	0.25	X						0.	0.	0.
(42) GERHARD TOTH MEMBER (TERM START 1/1/24)	0.25	X						0.	0.	0.
(43) SEAN WILKINSON MEMBER	0.25	X						0.	0.	0.
(44) ERIC BAILEY MEMBER (TERM END 12/31/23)	0.25	X						0.	0.	0.
(45) KIMBERLY CRUM MEMBER (TERM END 12/31/23)	0.25	X						0.	0.	0.
(46) BRIAN DEMING MEMBER (TERM END 12/31/23)	0.25	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) ESTELLA GRAY MEMBER (TERM END 12/31/23)	0.25	X						0.	0.	0.
(48) KIMBERLY HOPPER MEMBER (TERM END 12/31/23)	0.25	X						0.	0.	0.
(49) LAURA SCHMIDT MEMBER (TERM END 12/31/23)	0.25	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)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	236,350.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e	429,971.				
	f All other contributions, gifts, grants, and similar amounts not included above ...	1f	13,729,308.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 665,065.				
	h Total. Add lines 1a-1f			14,395,629.			
Program Service Revenue	2 a FUNDRAISING FEES	Business Code					
		561000	225,553.	225,553.			
	b SERVICE FEES	561000	138,370.	138,370.			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f			363,923.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,234,659.			1234659.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses ...	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	20,173,840.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	18,932,254.				
	c Gain or (loss)	7c	1,241,586.				
	d Net gain or (loss)			1,241,586.		1241586.	
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue	624100	39,267.			39,267.	
	e Total. Add lines 11a-11d			39,267.			
12 Total revenue. See instructions			17,275,064.	363,923.	0.	2515512.	

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	11,558,160.	11,558,160.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	62,365.	62,365.		
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	469,393.	178,510.	192,022.	98,861.
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	4,486,986.	2,437,617.	839,696.	1,209,673.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	129,040.	66,906.	33,416.	28,718.
9 Other employee benefits	668,612.	337,881.	141,670.	189,061.
10 Payroll taxes	381,677.	193,853.	87,055.	100,769.
11 Fees for services (nonemployees):				
a Management				
b Legal	34,209.	14,938.	11,717.	7,554.
c Accounting	79,780.	41,776.	16,318.	21,686.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	123,238.		123,238.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	558,492.	207,245.	135,294.	215,953.
12 Advertising and promotion	166,990.	20,079.	144,334.	2,577.
13 Office expenses	811,847.	604,867.	113,094.	93,886.
14 Information technology	1,162,845.	597,848.	360,695.	204,302.
15 Royalties				
16 Occupancy	320,173.	187,049.	70,090.	63,034.
17 Travel	104,209.	61,500.	10,418.	32,291.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	83,054.	28,554.	27,948.	26,552.
20 Interest	12,082.	6,303.	2,513.	3,266.
21 Payments to affiliates	186,403.	97,265.	38,642.	50,496.
22 Depreciation, depletion, and amortization	275,961.	141,913.	65,128.	68,920.
23 Insurance	75,533.	39,984.	15,526.	20,023.
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 _____				
b _____				
c _____				
d _____				
e All other expenses _____	66,126.	29,116.	20,377.	16,633.
25 Total functional expenses. Add lines 1 through 24e	21,817,175.	16,913,729.	2,449,191.	2,454,255.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	729,558.	1	1,548,852.
	2 Savings and temporary cash investments		2	
	3 Pledges and grants receivable, net	3,644,074.	3	3,413,163.
	4 Accounts receivable, net	1,357,130.	4	1,528,720.
	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	532,390.	9	413,510.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 3,923,424.		
	b Less: accumulated depreciation	10b 1,671,049.	10c	2,252,375.
	11 Investments - publicly traded securities	39,931,366.	11	35,363,308.
	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	7,610,831.	15	8,315,251.
16 Total assets. Add lines 1 through 15 (must equal line 33)	55,507,110.	16	52,835,179.	
Liabilities	17 Accounts payable and accrued expenses	592,987.	17	560,090.
	18 Grants payable	6,971,915.	18	7,456,906.
	19 Deferred revenue	363,661.	19	547,224.
	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	1,875,754.	25	2,011,236.
	26 Total liabilities. Add lines 17 through 25	9,804,317.	26	10,575,456.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	35,303,946.	27	32,526,208.
	28 Net assets with donor restrictions	10,398,847.	28	9,733,515.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	45,702,793.	32	42,259,723.
	33 Total liabilities and net assets/fund balances	55,507,110.	33	52,835,179.

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	17,275,064.
2	Total expenses (must equal Part IX, column (A), line 25)	2	21,817,175.
3	Revenue less expenses. Subtract line 2 from line 1	3	-4,542,111.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	45,702,793.
5	Net unrealized gains (losses) on investments	5	1,867,156.
6	Donated services and use of facilities	6	-13,455.
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-754,660.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	42,259,723.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	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?	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?		X
3b	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		

Form 990 (2023)

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

2023

Open to Public Inspection

Name of the organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
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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?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	18979073.	38846249.	16849785.	15422035.	14395629.	104492771
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	18979073.	38846249.	16849785.	15422035.	14395629.	104492771
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)						21219643.
6 Public support. Subtract line 5 from line 4.						83273128.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7 Amounts from line 4	18979073.	38846249.	16849785.	15422035.	14395629.	104492771
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	600,396.	510,672.	859,160.	1179757.	1234659.	4384644.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						108877415
12 Gross receipts from related activities, etc. (see instructions)					12	1,715,866.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f))	14	76.48 %
15 Public support percentage from 2022 Schedule A, Part II, line 14	15	74.89 %
16a 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2022. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2023. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions		<input type="checkbox"/>

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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 2023 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2022 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2022 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2023. 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 - 2022. 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? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer 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).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove 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.</i>		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
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?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
3 By reason of the relationship described 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
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 <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
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? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No	
b Did the activities described 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? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
3 Parent of Supported Organizations. Answer 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? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
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 (<i>explain in detail in Part VI</i>):		
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	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	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 - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). 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 (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2023 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-2023	(iii) Distributable Amount for 2023
1 Distributable amount for 2023 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2023 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2023			
a From 2018			
b From 2019			
c From 2020			
d From 2021			
e From 2022			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2023 distributable amount			
i Carryover from 2018 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2023 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2023 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2024. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2019			
b Excess from 2020			
c Excess from 2021			
d Excess from 2022			
e Excess from 2023			

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.)

Horizontal lines for supplemental information input.

Schedule B
(Form 990)

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

2023

Name of the organization

UNITED WAY SUNCOAST, INC.

Employer identification number

59-3725701

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).

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

Schedule B (Form 990) (2023)

Name of organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
--	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	_____ _____ _____	\$ <u>2,227,446.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	_____ _____ _____	\$ <u>1,972,735.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	_____ _____ _____	\$ <u>300,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
--	---

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
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____
		\$ _____	_____

Name of organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2023

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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.

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

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

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

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

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

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

Name of organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
--	---

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

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

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

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

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

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

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

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

- A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	0.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	0.													
c Total lobbying expenditures (add lines 1a and 1b)	0.													
d Other exempt purpose expenditures	21,817,175.													
e Total exempt purpose expenditures (add lines 1c and 1d)	21,817,175.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000,</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000,</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000,</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000,</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000,</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	not over \$500,000,	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000,	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
not over \$500,000,	20% of the amount on line 1e.													
over \$500,000 but not over \$1,000,000,	\$100,000 plus 15% of the excess over \$500,000.													
over \$1,000,000 but not over \$1,500,000,	\$175,000 plus 10% of the excess over \$1,000,000.													
over \$1,500,000 but not over \$17,000,000,	\$225,000 plus 5% of the excess over \$1,500,000.													
over \$17,000,000,	\$1,000,000.													
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.													
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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) 2020	(b) 2021	(c) 2022	(d) 2023	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures					
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures					

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)		(b)
	Yes	No	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.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Name of the organization UNITED WAY SUNCOAST, INC. Employer identification number 59-3725701

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 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?, 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?

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 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, 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?, 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)?, 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.

Table with 2 columns: \$. Rows include: 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. 1b 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.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule D (Form 990) 2023

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	26,374,985.	24,814,615.	29,853,345.	24,484,184.	24,105,009.
b Contributions			7,619.	57,999.	41,374.
c Net investment earnings, gains, and losses	3,046,740.	2,518,333.	-4,255,366.	6,212,365.	801,501.
d Grants or scholarships					
e Other expenditures for facilities and programs	1,694,460.	957,963.	790,983.	901,203.	463,700.
f Administrative expenses					
g End of year balance	27,727,265.	26,374,985.	24,814,615.	29,853,345.	24,484,184.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 69.9393 %
 - b Permanent endowment 13.5037 %
 - c Term endowment 16.5570 %
- 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? | X | |
| (ii) Related organizations? | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		276,459.		276,459.
b Buildings		1,300,878.	511,001.	789,877.
c Leasehold improvements		1,381,338.	619,613.	761,725.
d Equipment		877,031.	518,505.	358,526.
e Other		87,718.	21,930.	65,788.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				2,252,375.

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) ACCRUED INTEREST RECEIVABLE	71,930.
(2) CASH SURRENDER VALUE - LIFE INSURANCE	85,051.
(3) GIFTED FACILITY	120,176.
(4) COMMUNITY FOUNDATION INVESTMENTS	7,020,665.
(5) DEPOSITS	21,317.
(6) RIGHT OF USE ASSET	995,548.
(7) DUE FROM AFFILIATES	564.
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	8,315,251.

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) ANNUITIES PAYABLE	134,556.
(3) LEASE LIABILITIES	1,872,415.
(4) OBLIGATION UNDER REMAINDER TRUST	
(5) AGREEMENT	4,265.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	2,011,236.

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	16,643,955.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
	a Net unrealized gains (losses) on investments	2a	1,867,156.	
	b Donated services and use of facilities	2b	58.	
	c Recoveries of prior year grants	2c		
	d Other (Describe in Part XIII.)	2d	-808,120.	
	e Add lines 2a through 2d	2e	1,059,094.	
3	Subtract line 2e from line 1		3	15,584,861.
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	123,238.	
	b Other (Describe in Part XIII.)	4b	1,566,965.	
	c Add lines 4a and 4b	4c	1,690,203.	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	17,275,064.

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	20,090,899.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
	a Donated services and use of facilities	2a	13,513.	
	b Prior year adjustments	2b		
	c Other losses	2c		
	d Other (Describe in Part XIII.)	2d		
	e Add lines 2a through 2d	2e	13,513.	
3	Subtract line 2e from line 1		3	20,077,386.
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	123,238.	
	b Other (Describe in Part XIII.)	4b	1,616,551.	
	c Add lines 4a and 4b	4c	1,739,789.	
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	21,817,175.

Part XIII Supplemental Information

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

PART V, LINE 4:

THE ENDOWMENT FUNDS WERE ESTABLISHED TO PROVIDE FUTURE SUPPORT FOR THE ORGANIZATION'S MISSION. THE ORGANIZATION'S INTERNALLY-CONTROLLED ENDOWMENT NET ASSETS ARE COMPRISED OF INVESTMENTS HELD IN VARIOUS DONOR ENDOWMENTS, INVESTMENTS HELD UNDER A CHARITABLE REMAINDER UNITRUST AGREEMENT, AND FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS.

PART X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES UNDER THE PROVISIONS OF THE FLORIDA STATUTES. THE INTERNAL REVENUE CODE PROVIDES FOR TAXATION OF UNRELATED BUSINESS INCOME UNDER CERTAIN CIRCUMSTANCES. THE

Part XIII Supplemental Information (continued)

ORGANIZATION REPORTS NO UNRELATED BUSINESS TAXABLE INCOME; HOWEVER, SUCH STATUS IS SUBJECT TO FINAL DETERMINATION UPON EXAMINATION OF THE RELATED INCOME TAX RETURNS BY THE APPROPRIATE TAXING AUTHORITIES. THE ORGANIZATION HAS ADOPTED THE PROVISIONS OF ASC TOPIC 740 RELATING TO ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES AND DOES NOT BELIEVE IT HAS ANY MATERIAL INCOME TAX EXPOSURE RELATING TO UNCERTAIN TAX POSITIONS. THE INCOME TAX FILINGS FOR UNITED WAY SUNCOAST, INC. FOR THE YEAR ENDED JUNE 30, 2021 AND THEREAFTER REMAIN SUBJECT TO EXAMINATION.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

PROVISION FOR UNCOLLECTIBLE PLEDGES	-758,534.
FUNDRAISING EXPENSES NET WITH REVENUE IN FINANCIAL STATEMENTS	-49,586.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	-808,120.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED CONTRIBUTIONS	1,566,965.
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED CONTRIBUTIONS	1,566,965.
FUNDRAISING EXPENSES NET WITH REVENUE IN FINANCIAL STATEMENTS	49,586.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	1,616,551.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **UNITED WAY SUNCOAST, INC.** Employer identification number **59-3725701**

Part I General Information on Grants and Assistance

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

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
211 TAMPA BAY CARES 13921 ICOT BLVD. SUITE 700 CLEARWATER, FL 33760	59-3355555	501(C)(3)	153,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
ACADEMY PREP CENTER OF ST PETERSBURG - 2301 22ND AVE S - ST. PETERSBURG, FL 33712 ACADEMY PREP CENTER OF TAMPA 1407 E. COLUMBUS DRIVE TAMPA, FL 33605 USA - TAMPA, FL 33605	59-3623000	501(C)(3)	23,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
AFTER-SCHOOL ALL-STARS 145 S. FAIRFAX AVE, SUITE 200 LOS ANGELES, CA 90036	95-4441208	501(C)(3)	30,636.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
ALL FAITHS FOOD BANK 8171 BLAIKIE COURT SARASOTA, FL 34240 AMSKILLS, INC. 7825 CAMPUS DR, BUILDING 6 NEW PORT RICHEY, FL 34653 - NEW PORT RICHEY, FL 34	65-0115814	501(C)(3)	134,757.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
	82-3888203	501(C)(3)	106,389.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **125.**

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

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

Schedule I (Form 990) 2023

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
ARTZ 4 LIFE ACADEMY 1751 KINGS HIGHWAY CLEARWATER, FL 33755	59-3483799	501(C)(3)	56,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BAY AREA LEGAL SERVICES 1302 N 19TH ST., STE 400 TAMPA, FL 33605	59-1171886	501(C)(3)	172,149.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BE SMART TUTORING COMPANY 608 31ST AVE N ST. PETERSBURGH, FL 33704	85-1344252	501(C)(3)	38,220.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BESS THE BOOK BUS 2316 E. 3RD AVE TAMPA, FL 33605	51-0518142	501(C)(3)	14,934.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BIG BROTHERS BIG SISTERS OF TAMPA BAY, INC. - 3001 EXECUTIVE DR - CLEARWATER, FL 33762	59-2173085	501(C)(3)	197,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BIG BROTHERS BIG SISTERS OF THE SUN COAST, INC. - 1000 S. TAMIAMI TRAIL, SUITE C - VENICE, FL 34285	59-1361826	501(C)(3)	105,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BOYS & GIRLS CLUBS OF MANATEE COUNTY - PO BOX 280 - BRADENTON, FL 34206	59-0675141	501(C)(3)	75,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BOYS & GIRLS CLUBS OF SARASOTA AND DESOTO COUNTIES - 3100 FRUITVILLE RD - SARASOTA, FL 34237	59-6211876	501(C)(3)	100,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BOYS & GIRLS CLUBS OF TAMPA BAY 1307 N MACDILL AVE TAMPA, FL 33607	59-0624368	501(C)(3)	156,933.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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 CLUBS OF THE SUNCOAST 4625 E BAY DRIVE SUITE 103 CLEARWATER, FL 33764	59-1566799	501(C)(3)	257,633.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
BROOKWOOD FLORIDA, INC. 901 7TH AVE. S. ST. PETERSBURG, FL 33705	59-0624387	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CATHOLIC CHARITIES DIOCESE OF ST PETERSBURG - 1213 16TH STREET NORTH - ST. PETERSBURG, FL 33705	59-0875805	501(C)(3)	58,071.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CATHOLIC CHARITIES DIOCESE OF VENICE - 1000 PINEBROOK RD - VENICE, FL 34285	59-2473176	501(C)(3)	15,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CHAMPIONS FOR CHILDREN 3108 W AZEELE ST TAMPA, FL 33609	59-1807551	501(C)(3)	105,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CHARLOTTE BEHAVIORAL HEALTH 1700 EDUCATION AVENUE PUNTA GORDA, FL 33983	59-1234922	501(C)(3)	116,018.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CHILDREN FIRST, INC. 1723 N ORANGE AVE SARASOTA, FL 34234	59-0968249	501(C)(3)	100,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CHILDREN'S HOME NETWORK 10909 MEMORIAL HWY. TAMPA, FL 33615	59-0696284	501(C)(3)	51,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CHILDREN'S HOME SOCIETY OF FLORIDA, SUNCOAST REGION - 482 S. KELLER ROAD - ORLANDO, FL 32810	59-0192430	501(C)(3)	32,690.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
C.N.A. TECHNICAL CENTER 7614 N. 56TH STREET TAMPA, FL 33617	82-3634252	501(C)(3)	14,720.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
COLONY COVE HELPING HANDS INC. P.O. BOX 1153 ELLENTON, FL 34222	88-1357934	501(C)(3)	32,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CORPORATION TO DEVELOP COMMUNITIES OF TAMPA - 1907 E. HILLSBOROUGH AVE., STE 100 - TAMPA, FL 33610	59-3150608	501(C)(3)	169,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
CRISIS CENTER OF TAMPA BAY ONE CRISIS CENTER PLAZA TAMPA, FL 33613	59-1785265	501(C)(3)	60,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
DAWNING FAMILY SERVICES (FORMERLY ALPHA HOUSE OF TAMPA) - 6718 N. ARMENIA AVE - TAMPA, FL 33604	59-2655523	501(C)(3)	55,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
DAYSTAR LIFE CENTER 226 6TH ST. S. ST. PETERSBURG, FL 33701	65-0523539	501(C)(3)	95,571.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
DREAMERS ACADEMY, INC 1050 S. TURTLE AVE SARASOTA, FL 34237	82-2813068	501(C)(3)	30,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
DRESS FOR SUCCESS TAMPA BAY INC. 1705 N. HOWARD AVE TAMPA, FL 33607	59-2542254	501(C)(3)	20,625.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
EARLY CHILDHOOD COUNCIL OF HILLSBOROUGH COUNTY - 4210 W BAY VILLA AVE - TAMPA, FL 33611	59-2998189	501(C)(3)	81,524.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
EARLY LEARNING COALITION OF FLORIDA'S HEARTLAND, INC. - 2886 TAMiami TRAIL STE 1 - PORT CHARLOTTE, FL 33952	64-1047991	501(C)(3)	20,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
EARLY LEARNING COALITION OF HILLSBOROUGH COUNTY - 6800 N DALE MABRY HWY, SUITE 158 - TAMPA, FL 33614	59-3626765	501(C)(3)	35,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
EARLY LEARNING COALITION OF MANATEE COUNTY - 600 8TH AVE W STE 100 - PALMETTO, FL 34221	65-0811318	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
EARLY LEARNING COALITION OF PINELLAS COUNTY - 2536 COUNTRYSIDE BVD., #500 - CLEARWATER, FL 33763	53-3726679	501(C)(3)	15,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
EARLY LEARNING COALITION OF SARASOTA COUNTY - 1750 17TH STREET, BLDG L - SARASOTA, FL 34234	65-1110174	501(C)(3)	95,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
ECHO OF BRANDON 507 N. PARSONS AVENUE BRANDON, FL 33510	59-3051533	501(C)(3)	38,796.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
ECKERD COLLEGE 4200 54TH AVENUE, SOUTH ST. PETERSBURG, FL 33716	59-0859121	501(C)(3)	32,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
EDUCATIONAL CONSULTANTS CONSORTIUM PO BOX 1222 BRADENTON, FL 34206	65-0612497	501(C)(3)	55,065.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
ENTERPRISING LATINAS, INC. 18238 US HWY 301 WIMAUMA, FL 33598	27-1247381	501(C)(3)	87,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
FAMILY STUDIES CENTER - UNIVERSITY OF SOUTH FLORIDA - PO BOX 864571 - ORLANDO, FL 32886	59-3102112	501(C)(3)	63,801.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FEEDING AMERICA TAMPA BAY 4702 TRANSPORT DRIVE BUILDING 6 TAMPA, FL 33602	59-2116576	501(C)(3)	159,873.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FLORIDA CENTER FOR EARLY CHILDHOOD 4620 17TH STREET SARASOTA, FL 34235	59-1947024	501(C)(3)	225,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FLORIDA DREAM CENTER 4017 56TH AVE N ST. PETERSBURG, FL 33714	46-0663472	501(C)(3)	107,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FLORIDA EDUCATION FUND, INC. 201 EAST KENNEDY BLVD SUITE 1525 TAMPA, FL 33602	59-2783821	501(C)(3)	48,334.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FLORIDA INSTITUTE FOR COMMUNITY STUDIES - 6704 HANLEY RD - TAMPA, FL 33634	59-3712006	501(C)(3)	13,959.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FRAMEWORKS OF TAMPA BAY, INC 402 E. OAK AVENUE TAMPA, FL 33602	20-8776228	501(C)(3)	105,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
FRIENDS OF THE CHILDREN, TAMPA BAY 2655 ULMERTON RD CLEARWATER, FL 33762	82-5141973	501(C)(3)	28,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GENTLEMEN'S QUEST OF TAMPA, INC. 2631 EAST LAKE AVE TAMPA, FL 33610	83-0687250	501(C)(3)	66,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
GIRL SCOUTS OF WEST CENTRAL FLORIDA - 4610 EISENHOWER BLVD - TAMPA, FL 33634	59-0624454	501(C)(3)	19,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GIRLS EMPOWERED MENTALLY FOR SUCCESS, INC. (GEMS) - PO BOX 292814 - TAMPA, FL 33687	20-2375049	501(C)(3)	13,167.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GLASSER / SCHOENBAUM HUMAN SERVICES CENTER - 1750 17TH STREET, BLDG J-1 - SARASOTA, FL 34234	59-2707877	501(C)(3)	57,480.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GOLDEN GENERATIONS, INC. 2900 PALLANZA DRIVE S. ST. PETERSBURG, FL 33705	23-2624207	501(C)(3)	42,750.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GOODWILL INDUSTRIES-MANASOTA, INC. 2705 51ST AVE EAST BRADENTON, FL 34203	59-2074391	501(C)(3)	55,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GULF COAST JEWISH FAMILY & COMMUNITY SERVICES - 14041 ICOT BLVD - CLEARWATER, FL 33760	59-1229354	501(C)(3)	170,071.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
GULF COAST LEGAL SERVICES 501 FIRST AVE N STE 420 ST. PETERSBURG, FL 33701	59-1882749	501(C)(3)	115,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HABITAT FOR HUMANITY OF HILLSBOROUGH COUNTY - 509 E JACKSON ST - TAMPA, FL 33602	59-2850410	501(C)(3)	29,896.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HARVEST HOUSE (HARVEST TABERNACLE OF SARASOTA, INC.) - 209 N LIME AVE - SARASOTA, FL 34237	59-2186807	501(C)(3)	46,833.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
HEALTHY START COALITION OF PINELLAS COUNTY, INC. - 4000 GATEWAY CENTRE BLVD STE 200 - PINELLAS PARK, FL 33782	59-3109517	501(C)(3)	90,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HEART OF FLORIDA UNITED WAY, INC 1940 TRAYLOR BLVD ORLANDO, FL 32804	59-0808854	501(C)(3)	301,506.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HILLSBOROUGH COUNTY PUBLIC SCHOOLS 901 E KENNEDY BLVD TAMPA, FL 33602	59-6000660	501(C)(3)	316,112.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HILLSBOROUGH EDUCATION FOUNDATION 2306 N. HOWARD AVE TAMPA, FL 33607	59-2883361	501(C)(3)	24,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HISPANIC SERVICES COUNCIL, INC. 7825 N DALE MABRY HWY SUITE 102 TAMPA, FL 33614	59-3198934	501(C)(3)	58,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HOMELESS EMERGENCY PROJECT, INC. D/B/A HOMELESS EMPOWERMENT PROGRAM - 1120 N BETTY LN - CLEARWATER, FL 33755	59-2729694	501(C)(3)	66,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
HOMELESS LEADERSHIP ALLIANCE OF PINELLAS - 647 FIRST AVE N - ST. PETERSBURG, FL 33701	59-2935116	501(C)(3)	60,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
JEWISH FAMILY AND CHILDREN'S SERVICES OF THE SUNCOAST - 2688 FRUITVILLE RD - SARASOTA, FL 34237	59-2693318	501(C)(3)	170,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
LEALMAN AND ASIAN NEIGHBORHOOD FAMILY CENTER, INC. - 4255 56TH AVENUE N. - ST. PETERSBURG, FL 33714	59-3631795	501(C)(3)	12,870.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
LEARNING EMPOWERED, INC. 6801 38TH AVE N ST. PETERSBURG, FL 33710	59-1623437	501(C)(3)	95,250.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
LIONS EYE INSTITUTE FOR TRANSPLANT AND RESEARCH FOUNDATION - 1410 N 21ST ST - TAMPA, FL 33605	59-1458151	501(C)(3)	49,519.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
LUTHERAN SERVICES FLORIDA 3627 W. WATERS AVE. TAMPA, FL 33614	59-2198911	501(C)(3)	33,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
MACDONALD TRAINING CENTER 5420 W. CYPRESS STREET TAMPA, FL 33607	59-0777827	501(C)(3)	40,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
MANASOTA REENTRY PROJECT 308 16TH ST.WEST PALMETTO, FL 34221	88-2526069	501(C)(3)	14,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
MEALS ON WHEELS PLUS MANATEE 811 23RD AVE. EAST BRADENTON, FL 34208	59-1420986	501(C)(3)	13,800.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
METROPOLITAN MINISTRIES 2002 N FLORIDA AVE TAMPA, FL 33602	59-1477007	501(C)(3)	185,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
MOTHERS HELPING MOTHERS 5933 N.WASHINGTON BLVD SARASOTA, FL 34243	65-0416462	501(C)(3)	28,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
MYAKKA CITY COMMUNITY CENTER 37010 SINGLETARY RD MYAKKA CITY, FL 34251	59-1050657	501(C)(3)	63,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
NONPROFIT LEADERSHIP CENTER OF TAMPA BAY - 1408 N WESTSHORE BOULEVARD, SUITE 140 - TAMPA, FL 33607	59-3671047	501(C)(3)	50,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PACE CENTER FOR GIRLS 1933 E HILLSBOROUGH AVE STE 300 TAMPA, FL 33610	59-2414492	501(C)(3)	82,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PALMETTO YOUTH CENTER 501 17TH ST W PALMETTO, FL 34221	59-1090377	501(C)(3)	23,964.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PARENTING MATTERS 602 3RD ST. E BRADENTON, FL 34208	65-0374386	501(C)(3)	61,977.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PEOPLE EMPOWERING AND RESTORING COMMUNITIES (PERC-PINELLAS EX OFFENDER REENTRY C - 12810 US HWY 19N - CLEARWATER, FL 33764	59-3643636	501(C)(3)	133,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PERSONAL ENRICHMENT THROUGH MENTAL HEALTH SERVICES - 11254 58TH ST N - PINELLAS PARK, FL 33782	59-3153549	501(C)(3)	225,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PINELLAS COUNTY EDUCATION FOUNDATION, INC. - 12090 STARKEY ROAD - LARGO, FL 33773-2727	59-2688253	501(C)(3)	105,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PINELLAS COUNTY SCHOOLS PO BOX 2942 LARGO, FL 33779-2942	59-6000799	501(C)(3)	250,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PINELLAS COUNTY URBAN LEAGUE, INC. 333 31ST ST N ST. PETERSBURG, FL 33713	59-1665523	501(C)(3)	100,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
PINELLAS OPPORTUNITY COUNCIL, INC. 501 1ST AVE N STE 517 ST. PETERSBURG, FL 33701	59-1227051	501(C)(3)	60,829.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
POSITIVE SPIN 5118 N 56TH STREET SUITE 224 TAMPA, FL 33610	80-0167391	501(C)(3)	65,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PRESERVE VISION FLORIDA 920 SEMINOLE BOULEVARD, SECOND FLO SEMINOLE, FL 33772	59-6181662	501(C)(3)	111,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
PROJECT PROSPER 13575 58TH ST N CLEARWATER, FL 33760	45-0491407	501(C)(3)	23,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
R'CLUB CHILD CARE, INC. 920 19TH ST S ST. PETERSBURG, FL 33712	27-4826221	501(C)(3)	104,146.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
REACH SERVICES INC. 721 DR. MLK JR ST S ST. PETERSBURG, FL 33705	82-4672063	501(C)(3)	46,250.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
REBUILDING TOGETHER TAMPA BAY 3914 US HWY 301 N STE 700 TAMPA, FL 33619	59-3664580	501(C)(3)	50,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
REDLANDS CHRISTIAN MIGRANT ASSOCIATION, INC. (RCMA) - 402 W MAIN ST - IMMOKALEE, FL 34142	59-1221966	501(C)(3)	175,579.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
RELIGIOUS COMMUNITY SERVICES, INC. DBA HOPE VILLAGES OF AMERICA - 503 S MARTIN LUTHER KING JR AVE - CLEARWATER, FL 33756	59-1309186	501(C)(3)	103,071.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
RESULTS FIRST 1105 3RD AVE EAST #1304 BRADENTON, FL 34208	85-3985131	501(C)(3)	161,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
RUBONIA COMMUNITY CENTER PO BOX 1315 PALMETTO, FL 34220	32-0335871	501(C)(3)	18,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SCHOOL DISTRICT OF DESOTO COUNTY 530 LASOLONA AVENUE ARCADIA, FL 34266	59-6000580	501(C)(3)	102,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SCHOOL DISTRICT OF MANATEE 15 MANATEE AVE W BRADENTON, FL 34205	59-6000728	501(C)(3)	264,400.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SELAH FREEDOM PO BOX 21415 SARASOTA, FL 34276	45-5189165	501(C)(3)	8,580.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SENIORS IN SERVICE OF TAMPA BAY, INC. - 1306 W SLIGH AVE - TAMPA, FL 33604	59-2422975	501(C)(3)	105,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
ST PETERSBURG FREE CLINIC 863 3RD AVE N ST. PETERSBURG, FL 33701	23-7208280	501(C)(3)	69,833.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
STAR WITH ME, INC 3501 BESSIE COLEMAN BLVD, SUITE 207 TAMPA, FL 33630	87-3860497	501(C)(3)	39,560.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
STARTING RIGHT NOW 5328 PRIMROSE LAKE CIRCLE, SUITE A TAMPA, FL 33647	26-3725699	501(C)(3)	81,918.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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
STEP UP SUNCOAST, INC. 6428 PARKLAND DRIVE SARASOTA, FL 34243	59-6208766	501(C)(3)	50,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SULPHUR SPRINGS NEIGHBORHOOD OF PROMISE - 8117 N. 13TH STREET - TAMPA, FL 33604	59-1742909	501(C)(3)	6,250.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SUNCOAST VOICES FOR CHILDREN FOUNDATION - 8550 ULMERTON ROAD, SUITE 255 - LARGO, FL 33771	20-1133518	501(C)(3)	84,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
SUNRISE CHILDREN'S SERVICES, INC 2215 E HENRY AVE TAMPA, FL 33610	59-0714818	501(C)(3)	134,744.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
TAMPA BAY PARTNERSHIP FOUNDATION 4300 W. CYPRESS ST. STE. 875 TAMPA, FL 33607	59-3414776	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
TAMPA BAY WORKFORCE ALLIANCE INC. DBA CAREERSOURCE TAMPA BAY - 4902 EISENHOWER BLVD., SUITE 250 - TAMPA, FL 33634	59-3655316	501(C)(3)	111,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
TAMPA HOUSING FUNDING CORPORATION, AKA TAMPA HOUSING AUTHORITY - 5301 W CYPRESS ST - TAMPA, FL 33607	20-3350724	501(C)(3)	35,981.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
TAMPA JEWISH FAMILY SERVICES 13009 COMMUNITY CAMPUS DRIVE, SUITE TAMPA, FL 33625	59-1549670	501(C)(3)	15,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
TAMPA METROPOLITAN AREA YMCA, INC. 110 E. OAK AVENUE TAMPA, FL 33602	59-1742909	501(C)(3)	123,750.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CYPRESS INITIATIVE, INC. DBA THE SPARK INITIATIVE - 913 S PARSONS AVE STE C - BRANDON, FL 33511	20-8378337	501(C)(3)	13,333.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
THE D. L. RANDALL FOUNDATION, INC. 1523 72ND ST. EAST RUBONIA, FL 34221	47-4988613	501(C)(3)	10,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
THE SALVATION ARMY 1204 14TH ST W BRADENTON, FL 34205	58-0660607	501(C)(3)	30,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
THE SHIRLEY PROCTOR PULLER FOUNDATION - 4133 CORTEZ WAY S - ST. PETERSBURG, FL 33712	46-4930592	501(C)(3)	126,300.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
THE SKILLS CENTER 5470 E. BUSCH BLVD. #132 TAMPA, FL 33617	26-0631467	501(C)(3)	45,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
UNITED COMMUNITY CENTERS, INC. PO BOX 1683 BRADENTON, FL 34206	65-0282384	501(C)(3)	50,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
UNITED FOOD BANK AND SERVICES OF PLANT CITY - 702 E ALSOBROOK ST SUITE H - PLANT CITY, FL 33563	59-3069728	501(C)(3)	81,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
UNIVERSITY AREA COMMUNITY DEVELOPMENT CENTER - 14013 N 22ND STREET - TAMPA, FL 33613	31-1624121	501(C)(3)	156,667.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING
WOMEN'S RESOURCE CENTER, INC OF MANATEE - 1926 MANATEE AVE W - BRADENTON, FL 34205	59-3034653	501(C)(3)	167,500.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

Schedule I (Form 990)

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 THE SUNCOAST, INC. 2469 ENTERPRISE RD CLEARWATER, FL 33763	59-0810731	501(C)(3)	25,000.	0.	N/A	N/A	ALLOCATIONS, DESIGNATIONS, DISASTER RELIEF RESPONSE, GRANTS & PROGRAM IMPACT FUNDING

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
INDIVIDUAL SAVINGS ACCOUNT (IDA) PROGRAM MATCHES	20	31,445.	0.	N/A	N/A
TRAINING PROGRAM TUITION PHLEBOTOMY	34	30,920.	0.	N/A	N/A

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:

MONITORING POLICIES FOR ALLOCATED GRANT FUNDING:

ALL ORGANIZATIONS RECEIVING GRANT FUNDING HAVE PASSED AN INITIAL APPLICATION PROCESS THAT DEMANDS QUALIFICATION BASED ON QUALITY AND ACCOUNTABILITY FOR ALL ASPECTS OF THE ORGANIZATION (GOVERNANCE, FISCAL, PERSONNEL MANAGEMENT, AND PROGRAMS). ONCE ELIGIBLE, AGENCIES ARE INVITED TO APPLY ANNUALLY (OR ON A TIMELINE DETERMINED BY THE BOARD, CURRENTLY SET AT 3 YEARS) FOR SUPPORT OF SPECIFIC PROGRAMS ADDRESSING CRITICAL COMMUNITY NEED. PROGRAM APPLICATIONS ARE REVIEWED BY TEAMS OF STAFF AND VOLUNTEERS IN

Part IV Supplemental Information

THE INVESTMENT REVIEW PROCESS. RECOMMENDATIONS FROM THESE TEAMS GO TO THE COMMUNITY AND PARTNERSHIP DEVELOPMENT COMMITTEE FOR APPROVAL BEFORE GOING TO THE BOARD FOR FINAL APPROVAL.

PROGRAM GRANT CRITERIA INCLUDES:

ALIGNMENT WITH UNITED WAY'S IMPACT AGENDA, PROGRAM PERFORMANCE, AND NEED OR AVAILABILITY OF FUNDS FROM OTHER SOURCES. QUALIFYING FOR FUNDING AS AN AGENCY DOES NOT GUARANTEE FUNDING FOR PROGRAM APPLICATIONS. GRANT PERFORMANCE IS REVIEWED EVERY QUARTER OR 6 MONTHS OR AS DETERMINED NECESSARY BY STAFF AND VOLUNTEERS. DATA IS STORED IN A SYSTEM, ECIMPACT, WHICH ANALYZES THE DATA AND CREATES REPORTS THEN UTILIZED BY THE ORGANIZATION IN MAKING DECISIONS ABOUT FUTURE FUNDING.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

UNITED WAY SUNCOAST, INC.

Employer identification number

59-3725701

Part I Questions Regarding Compensation

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

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

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

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

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

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

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

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

Schedule J (Form 990) 2023

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) JESSICA MUROFF CEO	(i)	241,726.	3,300.	6,516.	10,059.	13,939.	275,540.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) KELLY KAVANAUGH CHIEF FINANCIAL & INVESTMENT OFFICER	(i)	161,764.	1,580.	1,432.	6,503.	11,088.	182,367.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) JENNIFER MCINTOSH CHIEF TALENT OFFICER	(i)	150,631.	2,250.	492.	6,232.	12,371.	171,976.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARIA BRONWYN BEIGHTOL CHIEF IMPACT OFFICER	(i)	142,585.	2,485.	858.	5,935.	19,645.	171,508.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) KARI GOETZ CHIEF MARKETING & ADVANCMENT OFFICER	(i)	132,519.	741.	266.	0.	17,882.	151,408.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2023

Open to Public Inspection

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

Name of the organization **UNITED WAY SUNCOAST, INC.** Employer identification number **59-3725701**

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	92	665,065.	STOCK QUOTE
10	Securities - Closely held stock				
11	Securities - Partnership, LLC, or trust interests				
12	Securities - Miscellaneous				
13	Qualified conservation contribution - Historic structures				
14	Qualified conservation contribution - Other				
15	Real estate - Residential				
16	Real estate - Commercial				
17	Real estate - Other				
18	Collectibles				
19	Food inventory				
20	Drugs and medical supplies				
21	Taxidermy				
22	Historical artifacts				
23	Scientific specimens				
24	Archeological artifacts				
25	Other ()				
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** **0**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Schedule M (Form 990) 2023

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):

LINE 9, SECURITIES - PUBLICLY TRADED, REPORTS THE TOTAL NUMBER OF CONTRIBUTIONS.

Multiple horizontal lines for supplemental information input.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2023

Open to Public
Inspection

Name of the organization

UNITED WAY SUNCOAST, INC.

Employer identification number

59-3725701

FORM 990, PART III, LINE 1, MISSION:

UNITED WAY SUNCOAST MOBILIZES COMMUNITIES TO ACTION FOR ALL. WE GIVE
FAMILIES AND COMMUNITY MEMBERS ACROSS OUR FIVE-COUNTY FOOTPRINT THE
"FREEDOM TO RISE." FOUNDED IN 1924, WE ENTER OUR SECOND CENTURY OF
SERVICE WITH A DECIDED FOCUS ON UNITING THE REGION TO GENERATE SUPPORT
FOR HARD-WORKING FAMILIES THAT STAND ONE UNEXPECTED EXPENSE AWAY FROM
DIRE CIRCUMSTANCE. WE ELEVATE EARLY LEARNING, ENERGIZE MIDDLE SCHOOL
AND HIGH SCHOOL YOUTHS, AND EMPOWER COMMUNITY MEMBERS THROUGH FINANCIAL
SECURITY. WE PROUDLY SERVE HILLSBOROUGH, PINELLAS, MANATEE, SARASOTA
AND DESOTO COUNTIES BY INVESTING IN SERVICES AND PROGRAMS THAT HELP
PEOPLE CREATE THE LIVES THEY IMAGINE FOR THEMSELVES. WE ENHANCE THE
COMMUNITY BY ADDRESSING EMERGING NEEDS SUCH AS NATURAL DISASTERS, AND
WE EXPAND THE CAPACITY OF OUR NONPROFITS TO HELP OUR IMPACT RIPPLE
THROUGH THE REGION. ALONG THE WAY, WE LEAD, CONVENE, AND COLLABORATE
WITH CORPORATE SUPPORTERS, INDIVIDUAL DONORS, NONPROFIT PARTNERS, AND
VALUED VOLUNTEERS BECAUSE WE KNOW UNITED WE RISE, UNITED WE WIN.

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

THE FOCUS IS ON THIRD GRADE READING SCORES AS THIS IS WHEN LEARNING
TRANSITIONS TO READING-BASED LEARNING.

OUR YOUTH SUCCESS WORK BUILDS ON THE FOUNDATIONAL ELEMENTS OF EARLY
LEARNING. WE SUPPORT YOUTH SUCCESS PROGRAMS FOCUSED ON COLLEGE AND
CAREER READINESS SKILLS AND ON-TIME GRADUATION FOR MIDDLE AND HIGH
SCHOOL STUDENTS. UNITED WAY SUNCOAST REMAINS COMMITTED TO SUPPORTING

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

Schedule O (Form 990) 2023

LHA 332211 11-14-23

Name of the organization

UNITED WAY SUNCOAST, INC.

Employer identification number

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THIS DIVERSE GROUP THAT RANGES IN AGE FROM 10-24: MIDDLE SCHOOL 10-14;
HIGH SCHOOL 14-18; COLLEGE 18-24. WITH A 2023 STUDY REVEALING THAT 58
PERCENT OF YOUNG ADULTS BETWEEN 16 AND 24 ARE NEITHER ENROLLED IN
SCHOOL NOR WORKING, THIS IS AN IMPORTANT EFFORT.

INVESTMENTS - WITH 90 PERCENT OF BRAIN DEVELOPMENT OCCURRING BETWEEN
BIRTH AND 5 YEARS, AND THIRD GRADE READING REPRESENTING AN INDICATOR OF
LONG-TERM ACADEMIC SUCCESS, WE KNOW WE MUST CONTINUE TO FOCUS ON THESE
DEVELOPMENTAL ASPECTS. IN THE FIRST TWO YEARS OF UNITED WAY SUNCOAST'S
INVESTMENT, WE HAVE SEEN NOTABLE PROGRESS IN EARLY LEARNING ACADEMIC
OUTCOMES, INCLUDING GAINS IN EARLY LITERACY AND GRADE-LEVEL READING.
OVERALL, WE INVESTED \$1.8 MILLION INTO IMPROVING KINDERGARTEN
READINESS, INCREASING GRADE LEVEL READING, AND REMOVING BARRIERS TO
EDUCATION ACCESS. OUR ORGANIZATION REAPED BENEFITS FROM 36 STRATEGIC
COMMUNITY PARTNERS FOCUSED ON EARLY LEARNING.

IN FY2024, UNITED WAY SUNCOAST INVESTED \$922,000 IN 22 YOUTH SUCCESS
PROGRAMS. PART OF THE EFFORT INVOLVES INSPIRING AND SOLIDIFYING THE
CAREER ASPIRATIONS OF MIDDLE SCHOOL AND HIGH STUDENTS TO HELP PUT THEM
ON A PATH TO POST-SECONDARY SUCCESS. AT THE SAME TIME, WE LOOK TO
SUPPORT PROGRAMS THAT STRENGTHEN GRADUATION RATES AND PROVIDE
INTERNSHIPS AND CAREER TRAINING. OUR GOAL IS TO GUIDE OUR COMMUNITY
INVESTMENTS, INITIATIVES, AND TARGETS, AND PROVIDE RESOURCES FOR
COMMUNITY AND PARTNERS TO TAKE ACTION INDEPENDENTLY.

IMPACT - EARLY LEARNING AND EDUCATION REMAIN A DYNAMIC TOOL - MAYBE OUR
BEST TOOL - TO HELP CREATE GENERATIONAL WEALTH, LIFT UP FAMILIES AND
CREATE A BETTER WORLD FOR EVERY STUDENT. INCREASING ACCESS AND THE

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EQUITY OF QUALITY CHILDCARE STANDS AS ONE OF THE BEST WAYS TO IMPROVE COMMUNITIES. FOR UNITED WAY SUNCOAST, THAT IMPROVEMENT IS REFLECTED IN THE FACT THAT NEARLY 4,000 CHILDREN BETWEEN THE AGES OF 0-5 DEMONSTRATED AGE-APPROPRIATE COMMUNICATION, VOCABULARY AND/OR OTHER EARLY LITERACY SKILLS OR PROGRESS. MORE THAN 6,000 THIRD GRADE STUDENTS ACHIEVED THE GOAL OF READING ON GRADE LEVEL OR ARE SET ON THE PATH TO ACHIEVE THAT BENCHMARK WITHIN THE NEXT YEAR.

OUR SUMMER CARE PROGRAM ALSO ENJOYED SUCCESS, WHERE 83 PERCENT OF OUR STUDENTS MAINTAINED OR GREW THEIR ACADEMIC SKILLS OVER THE SUMMER THROUGH THESE PROGRAMS.

IN ADDITION, WE TOOK ON BARRIERS TO SCHOOL READINESS BY GENERATING FOOD SUPPORT TO 10,451 HOUSEHOLDS THROUGH OUR SCHOOL-BASED FOOD DISTRIBUTION PARTNERS. WE ALSO HELPED NEARLY 2,700 STUDENTS RECEIVE SUPPORT FOR ASTHMA, DENTAL, VISION AND HEARING LOSS ISSUES.

THROUGH STRONGER CONNECTIONS WITH OUR YOUTH SUCCESS PARTNERS, UNITED WAY SUNCOAST HAS GAINED MORE ACCURATE INSIGHTS INTO THE IMPACT OF OUR INVESTMENTS IN SOCIAL-EMOTIONAL GROWTH AND EDUCATIONAL TRANSITIONS FOR MIDDLE AND HIGH SCHOOL STUDENTS. NOTABLY, 3,633 MIDDLE SCHOOL AND 865 HIGH SCHOOL STUDENTS SHOWED GAINS IN SOCIAL-EMOTIONAL SKILLS, SETTING A SOLID FOUNDATION FOR PERSONAL AND ACADEMIC RESILIENCE. AMONG OTHER POSITIVE RESULTS: OUR PARTNERS HELPED MORE THAN 8,000 STUDENTS GAIN CAREER READINESS SKILLS, MORE THAN TRIPLED THE NUMBER OF HIGH SCHOOL STUDENTS WITH MENTORS AND INCREASED THE NUMBER OF STUDENTS WHO IMPROVED THEIR GPA BY 39.8%. FURTHERMORE, 322 STUDENTS ENROLLED IN COLLEGE WITH A CLEAR MAJOR OR CAREER PATHWAY, POSITIONING THEM FOR LONG-TERM

Name of the organization

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SUCCESS. THESE TARGETED INVESTMENTS CONTINUE TO EMPOWER YOUTH IN OUR COMMUNITY TO THRIVE ACADEMICALLY AND PERSONALLY.

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

FURTHER UNDERSCORING THE REGION'S ECONOMIC DISPARITIES, FLORIDA RANKS FIFTH NATIONALLY IN INCOME INEQUALITY, ACCORDING TO THE CENSUS BUREAU'S GINI INDEX. THIS INEQUALITY CREATES ADDITIONAL BARRIERS FOR FAMILIES STRIVING FOR FINANCIAL STABILITY.

ALTHOUGH RENTAL PRICE INCREASES HAVE SLOWED IN 2024 AND SOME ZIP CODES HAVE SEEN SLIGHT DECREASES, OVERALL RENT PRICES REMAIN HIGH AND UNAFFORDABLE FOR THE AVERAGE WAGE EARNER. WITH AN INADEQUATE SUPPLY OF AFFORDABLE HOUSING, MANY HOUSEHOLDS ARE FORCED TO DEVOTE A DISPROPORTIONATE SHARE OF THEIR INCOME TO BASIC LIVING EXPENSES, LEAVING LITTLE ROOM FOR SAVINGS OR UNEXPECTED COSTS.

ADDRESSING THESE SYSTEMIC CHALLENGES IS VITAL TO EMPOWERING ALICE (ASSET LIMITED, INCOME CONSTRAINED, EMPLOYED) HOUSEHOLDS AND ENSURING THAT ALL FAMILIES IN THE REGION HAVE THE OPPORTUNITY TO ACHIEVE LONG-TERM ECONOMIC STABILITY.

INVESTMENTS - IN FY2023 AND FY2024, UNITED WAY SUNCOAST DISTRIBUTED A COMBINED \$4.3 MILLION TO OUR PARTNER AGENCIES WITHIN THE LAST TWO YEARS OF OUR MULTI-YEAR INVESTMENT. THIS INCLUDES 35 PROGRAMS WORKING TOWARDS FINANCIAL STABILITY GOALS.

THROUGH TARGETED INVESTMENTS IN WORKFORCE DEVELOPMENT, ASSET BUILDING, AND BARRIER REMOVAL, UNITED WAY SUNCOAST CONTINUES TO DRIVE SUSTAINABLE

Name of the organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
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FINANCIAL PROGRESS ACROSS OUR COMMUNITY.

THE EFFORTS INCLUDED:

- VOLUNTEER INCOME TAX ASSISTANCE (VITA) PROGRAM THAT PROVIDES FREE TAX PREPARATION TO QUALIFIED HOUSEHOLDS
- BANK ON, AN INITIATIVE THAT PROVIDES ACCESS TO SAFE AND AFFORDABLE ACCOUNTS TO THE UNBANKED AND THE UNDERBANKED.
- FINANCIAL COACHING, AN INITIATIVE THAT PROVIDES AN EXPERIENCED COACH TO ASSIST INDIVIDUALS IN REACHING THEIR FINANCIAL GOALS.
- MONEY MATTERS, A MONTHLY VIRTUAL FINANCIAL LITERACY SERIES.
- NEIGHBORHOOD RESOURCE CENTER OFFERINGS INCLUDING EMPLOYMENT SERVICES, LEGAL ADVICE, FAMILY SUPPORT, COMPUTER LAB ACCESS, HOMEOWNER AND CONTRACTOR RESOURCES, NOTARY SERVICES, AND CASE MANAGEMENT.

IMPACTS - UNITED WAY SUNCOAST'S FINANCIAL STABILITY INITIATIVES ARE MAKING A PROFOUND IMPACT ON THE LIVES OF COMMUNITY MEMBERS. THROUGH THE VOLUNTEER INCOME TAX ASSISTANCE (VITA) PROGRAM, THEY PROVIDE FREE TAX PREPARATION SERVICES THAT STABILIZE FINANCES IN AN UNCERTAIN ECONOMY. BEYOND TAX ASSISTANCE, UNITED WAY SUNCOAST SUPPORTS FINANCIAL EMPOWERMENT THROUGH PROGRAMS LIKE BANK ON, FINANCIAL COACHING, AND THE NEW FINANCIAL WELLNESS AT WORK INITIATIVE. THESE SERVICES HELP INDIVIDUALS AND FAMILIES BUILD A FOUNDATION FOR LONG-TERM FINANCIAL RESILIENCE, TRANSFORMING LIVES AND CREATING PATHWAYS TO GREATER ECONOMIC SECURITY.

THE IMPACT OF UNITED WAY SUNCOAST'S INVESTMENTS IS EVIDENT IN INCREASED JOB RETENTION RATES AND EXPANDED ACCESS TO FINANCIAL STABILITY RESOURCES. YEAR-OVER-YEAR, JOB RETENTION HAS RISEN SIGNIFICANTLY, WITH

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A 27% INCREASE IN INDIVIDUALS STAYING IN JOBS FOR AT LEAST SIX MONTHS AND A REMARKABLE 52% INCREASE FOR THOSE REMAINING EMPLOYED FOR AT LEAST TWELVE MONTHS. ADDITIONALLY, 1,741 INDIVIDUALS WERE PLACED IN JOBS, WITH 1,373 STAYING IN THEIR ROLES FOR AT LEAST SIX MONTHS. HOWEVER, FEWER PARTICIPANTS RECEIVED RAISES, OR INCOME INCREASES DURING THIS PERIOD. OUR INVESTMENT IN FINANCIAL STABILITY PROGRAMS HAS ALSO SHOWN PROMISING RESULTS, WITH A SIGNIFICANT INCREASE IN THE USE AND LONGEVITY OF BANKON ACCOUNTS, A 282% INCREASE IN LEGAL AID CASES SECURED AND RESOLVED (FROM 267 TO 753), AND IMPACTFUL FINANCIAL BEHAVIOR IMPROVEMENTS. NOTABLY, 1,536 INDIVIDUALS DEMONSTRATED BETTER FINANCIAL HABITS, WITH 421 INDIVIDUALS BUILDING SAVINGS BALANCES AND 205 INCREASING THEIR CREDIT SCORES. MOREOVER, LEGAL AID PROVIDERS RESOLVED 175 HOUSING CASES, 77 EMPLOYMENT CASES, AND 146 CONSUMER RIGHTS CASES, ENSURING CRITICAL SUPPORT IN OVERCOMING FINANCIAL AND LEGAL BARRIERS.

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

IN OCTOBER, WE WELCOMED VOLUNTEERS TO STUFF THE BUS IN MANATEE COUNTY IN A PUBLIX PARTNERSHIP THAT PUT FOOD ON THE SHELVES OF THE MEALS ON WHEELS PLUS FOOD PANTRY.

WE CREATED OPPORTUNITIES FOR VOLUNTEERS TO HONOR VETERANS THROUGH OUR ANNUAL VETERANS WEEK OF SERVICE, DISTRIBUTE MEALS DURING THE HOLIDAYS AND SHOWCASE THEIR CARE FOR THE COMMUNITY BY COLLECTING TOYS FOR THE HOLIDAYS.

THROUGHOUT THE YEAR, WE CUSTOMIZED ON-SITE ENGAGEMENT ACTIVITIES FOR CORPORATE PARTNERS TO LEARN ABOUT OUR WORK AND CREATE KITS THAT WE DISTRIBUTED TO OUR NEIGHBORS.

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IN APRIL, WE HELD OUR 32ND ANNUAL WEEK OF CARING, THE REGION'S LARGEST VOLUNTEER INITIATIVE CONNECTING HANDS-ON SERVICE WITH ORGANIZATIONS AND INDIVIDUALS IN NEED. THE CELEBRATION OF COMMUNITY SERVICE INSPIRED 386 VOLUNTEERS TO COMPLETE 59 PROJECTS FOR 29 ORGANIZATIONS. THE WORK EXTENDED TO MORE THAN 1,100 HOURS, DELIVERING A VALUE OF \$39,250. VOLUNTEER ACTION IS A KEY PART OF UNITED WAY'S MISSION, AND WITH UNITED WE SERVE, OUR PHILANTHROPIC ENGAGEMENT TEAM CREATES OPPORTUNITIES THROUGHOUT THE YEAR WITH ITS MONTHLY ENGAGEMENT OPPORTUNITIES.

UNITED WE LEAD - WHEN UNITED WAY SUNCOAST INVESTS IN COMMUNITY, IT INVESTS IN OUTCOMES. WE'RE CURRENTLY FULFILLING A THREE-YEAR, \$18 MILLION COMMITMENT TO 100 PROGRAMS THAT SUPPORT EARLY LEARNING, YOUTH SUCCESS AND FINANCIAL STABILITY. WITH EACH PROGRAM WE'VE IMPLEMENTED ACCOUNTABILITY MEASURES THAT TARGET OBJECTIVES. THERE'S NO BETTER WAY TO STEWARD THE DOLLARS ENTRUSTED TO US, AND THERE'S NO BETTER WAY TO SHOW OUR SUPPORT FOR OUR STRATEGIC COMMUNITY PARTNERS.

HOWEVER, TO ACHIEVE HIGHER QUALITY COMMUNITY IMPACT, OUR INVESTMENT STRATEGY MUST GO FURTHER. IT MUST INCLUDE SUPPORTING THE DEVELOPMENT AND GROWTH OF THE PEOPLE RUNNING OUR PARTNER PROGRAMS AS WELL AS FINDING WAYS TO ELIMINATE THE ADMINISTRATIVE AND KNOWLEDGE BARRIERS THEY FACE. IN FY2024, WE CONTINUED TO INITIATE A VISIONARY PILOT PROGRAM TO INCREASE THE CAPACITY OF NONPROFIT PARTNERS. USING A SERIES OF WORKSHOPS AND MONTHLY COACHING SESSIONS, WE'VE YIELDED REMARKABLE RESULTS. WE'VE ALREADY SEEN PARTNERS LEVERAGE OUR RESOURCES TO WIN NEW GRANTS, REDUCE INEFFICIENCIES, IMPROVE INTERNAL COMMUNICATION AND COLLABORATION, AND IMPACT MORE PEOPLE MORE DEEPLY.

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IN ADDITION, WE LAUNCHED OUR ACE GRANTS IN FY2024, CREATING ACCESS, BUILDING CAPACITY, AND ENSURING EQUITY. MOVING INTO OUR SECOND CENTURY OF SERVICE, CONTINUING TO BUILD TRUST, HONORING DIVERSE THOUGHTS, AND SUPPORTING GOOD IDEAS ARE ESSENTIAL TO CREATING A FOUNDATION FOR GREATER IMPACT. THE ACE GRANT IS AN OPERATIONAL INVESTMENT OF UP TO \$20,000 IN ORGANIZATIONS WITH AN ANNUAL REVENUE OF UP TO \$2.1 MILLION. THE FUNDING IS DESIGNED TO HELP UNLOCK BARRIERS TO INNOVATION AND SPARK PROGRESS. IN FY2025, WE WILL LOOK TO TAKE THE NEXT STEP, BUILD ON THESE PRINCIPLES, AND AMPLIFY THIS GAME-CHANGING EFFORT.

UNITED WE EMERGE - WHEN FAMILIES CAN FOCUS ON BUILDING FOR THE FUTURE INSTEAD OF SIMPLY SURVIVING IN THE PRESENT, THEY CAN OVERCOME UNEXPECTED CHALLENGES SUCH AS A PANDEMIC, HOUSING CRISIS, OR HURRICANE. THROUGH OUR EXPERIENCE, WE KNOW THAT PREPARING FOR A STORM THE DAY BEFORE IT REACHES LANDFALL MAY BE TOO LATE. WE ALSO KNOW THAT WE CAN BUILD UP THE RESILIENCE OF OUR COMMUNITY BY ENSURING PEOPLE HAVE ACCESS TO GOOD JOBS, MONEY IN THEIR SAVINGS, AND RESOURCES TO WEATHER SHORT-TERM NEEDS. FURTHERMORE, WHEN A MAJOR STORM HITS OUR SERVICE AREA, EACH COMMUNITY IS IMPACTED DIFFERENTLY. THIS REALIZATION HAS FUELED UNITED WAY SUNCOAST'S DRIVE TO PREPARE FOR THE CHALLENGE OF EMERGING NEEDS, AND THAT DRIVE HAS NEVER BEEN MORE IMPORTANT AS WE START OUR SECOND CENTURY OF SERVICE. THIS REALIZATION HAS FUELED UNITED WAY SUNCOAST'S DRIVE TO PREPARE FOR THE CHALLENGE OF EMERGING NEEDS, AND THAT DRIVE HAS NEVER BEEN MORE IMPORTANT AS WE START OUR SECOND CENTURY OF SERVICE. UNITED WE EMERGE REPRESENTS THIS EFFORT, BUT IT'S NOT NEW TO UNITED WAY SUNCOAST.

Name of the organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
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DISASTER RESILIENCE IS WHAT WE DO AND HAVE DONE FOR MORE THAN 100 YEARS. AFTER A PARTICULARLY CRIPPLING STORM IN 1926, OUR FIRST EXECUTIVE DIRECTOR, RUTH W. ATKINSON, WROTE, "THERE IS MUCH YET TO DO. THE HERCULEAN TASK OF REHABILITATING FAMILIES, FANNING THE SPARK OF HOPE WHICH HAS ALL BUT DIED IN THEIR HEARTS ... MEANS TAMPA MUST CONTINUE TO SERVE IN EVERY WAY POSSIBLE UNTIL FLOWERS BLOOM AGAIN IN THE DESOLATE WASTE PLACES; UNTIL FAMILIES ARE AGAIN ABLE TO TAKE CARE OF THEMSELVES."

THIS LEGACY OF RESILIENCE CONTINUED IN FY2024 WITH UNITED WAY SUNCOAST INVESTING MORE THAN \$600,000 IN RECOVERY FUNDS TO SUPPORT RELIEF EFFORTS FROM HURRICANES IAN, IDALIA, AND NICOLE.

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

DONOR DESIGNATED CONTRIBUTIONS: CONTRIBUTIONS TO UNITED WAY THAT DONORS DIRECT TO SPECIFIC 501(C)(3) AGENCIES.

EXPENSES \$ 1,566,965. INCL GRANTS OF \$ 1,566,965. REVENUE \$ 138,370.

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

THE EXECUTIVE COMMITTEE SHALL CONSIST SOLELY OF THE CHAIR, VICE CHAIR, IMMEDIATE PAST CHAIR, SECRETARY, AND TREASURER OF THE BOARD OF DIRECTORS. THE CHAIR OF THE BOARD OF DIRECTORS SHALL SERVE AS THE CHAIR OF THE EXECUTIVE COMMITTEE. THE EXECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE SUCH AUTHORITY OF THE BOARD OF DIRECTORS AS SHALL BE DELEGATED TO THE EXECUTIVE COMMITTEE, FROM TIME TO TIME, BY RESOLUTION OF THE FULL BOARD OF DIRECTORS; PROVIDED, HOWEVER, THAT THE EXECUTIVE COMMITTEE SHALL NOT HAVE THE AUTHORITY TO:

(I) FILL VACANCIES ON THE BOARD OF DIRECTORS OR ANY COMMITTEE THEREOF; OR

Name of the organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
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(II) ADOPT, AMEND, OR REPEAL THE BYLAWS; OR

(III) REMOVE A MEMBER OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION A, LINE 4:

PRIOR TO JANUARY 1, 2024, UNITED WAY SUNCOAST HAD THREE CLASSES OF MEMBERS:

THE MEMBERS OF THE MANATEE AREA BOARD (MANATEE MEMBERS), THE MEMBERS OF THE

SARASOTA/DESOTO AREA BOARD (SARASOTA/DESOTO MEMBERS), AND THE MEMBERS OF

THE HILLSBOROUGH/PINELLAS AREA BOARD (HILLSBOROUGH/PINELLAS MEMBERS).

HISTORICALLY, EACH AREA BOARD CONSISTED OF NOT LESS THAN 9 AND NOT MORE

THAN 25 MEMBERS. THE HISTORICAL PURPOSES OF EACH AREA BOARD WERE: (A) TO

LEAD FUNDRAISING IN THE COUNTIES APPLICABLE TO SUCH AREA BOARD; (B) TO HAVE

A SUBSTANTIAL ROLE WITH RESPECT TO THE ALLOCATION OF FUNDS RAISED WITH

RESPECT TO SUCH COUNTIES TO AGENCIES AND INITIATIVES LOCATED IN SUCH

COUNTIES; (C) TO APPOINT THE MEMBERS OF SUCH AREA BOARD; AND (D) TO APPOINT

CERTAIN INDIVIDUALS TO THE BOARD OF DIRECTORS OF THE ORGANIZATION.

EFFECTIVE JANUARY 1, 2024, THE BYLAWS WERE AMENDED TO CONSOLIDATE THE AREA

BOARDS INTO ONE SUNCOAST BOARD ('THE BOARD'). THE AREA BOARDS WERE

ELIMINATED AND UNITED WAY SUNCOAST NO LONGER HAS ANY MEMBERS. GOING

FORWARD, THE BOARD MUST ELECT A MINIMUM OF TWO MEMBERS FROM EACH COUNTY OF

THE UNITED WAY SUNCOAST REGION.

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

FORM 990 IS PRESENTED TO THE FINANCE COMMITTEE AND THE AUDIT AND ETHICS

COMMITTEE IN A JOINT MEETING. THE COMMITTEES VOTE TO APPROVE THE FORM. THE

REPORT IS THEN PRESENTED TO THE BOARD OF DIRECTORS FOR REVIEW AND APPROVAL.

ONCE APPROVED, THE REPORT IS FILED WITH THE IRS.

Name of the organization UNITED WAY SUNCOAST, INC.	Employer identification number 59-3725701
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FORM 990, PART VI, SECTION B, LINE 12C:

ANNUALLY ALL BOARD MEMBERS AND STAFF ARE REQUIRED TO COMPLETE AND SUBMIT A SIGNED CONFLICT OF INTEREST FORM TO THE GOVERNANCE COMMITTEE. THE GOVERNANCE COMMITTEE REVIEWS ALL SUBMISSIONS AND, IF NECESSARY, FOLLOWS UP WITH ANY POSSIBLE CONFLICTS. ANY MEMBERS WITH CONFLICTS MUST RECUSE THEMSELVES FROM ANY RELATED ACTION OR VOTE.

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

THE EXECUTIVE COMPENSATION COMMITTEE IS RESPONSIBLE, SUBJECT TO APPROVAL OF THE BOARD OF DIRECTORS, FOR ESTABLISHING AND MAINTAINING A BROAD COMPETITIVE COMPENSATION PROGRAM TO ATTRACT, RETAIN, AND MOTIVATE UNITED WAY SUNCOAST CEO AND FOR ENSURING THAT THE COMPENSATION PROGRAM MEETS ALL LEGAL REQUIREMENTS UNDER THE IRS INTERMEDIATE SANCTION RULES AND BEST GOVERNANCE PRACTICES FOR TRANSPARENCY AND ACCOUNTABILITY. THE COMMITTEE MAY ALSO MAKE RECOMMENDATIONS WITH RESPECT TO COMPENSATION PROGRAM STRUCTURE, POLICY, PAY LEVELS AND SUCCESSION PLANS FOR OTHER EXECUTIVES. THE BOARD APPROVES THE CEO'S COMPENSATION. THE CEO APPROVES ALL OTHER OFFICER'S COMPENSATION.

THE COMMITTEE REVIEWS COMPENSATION COMPARABILITY DATA FOR THE CEO AND OTHER EXECUTIVES FROM AN ANNUAL COMPENSATION STUDY CONDUCTED BY AN INDEPENDENT CONSULTANT. THE LAST STUDY WAS COMPLETED APRIL 2024.

"EXECUTIVES" REFERS TO THE CHIEF EXECUTIVE OFFICER (CEO), OTHER CHIEF OFFICERS, AND/OR ANY EMPLOYEE WHO HAS SIGNIFICANT MANAGEMENT RESPONSIBILITY FOR A SEGMENT OF THE ORGANIZATION OR WOULD OTHERWISE BE CONSIDERED A "DISQUALIFIED PERSON" UNDER THE INTERMEDIATE SANCTION RULES.

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THE COMMITTEE CONSISTS OF THREE OR MORE MEMBERS, THE MAJORITY (AT LEAST TWO) OF WHICH SHALL BE MEMBERS OF THE BOARD OF DIRECTORS. THE COMMITTEE CHAIR IS APPOINTED BY THE BOARD CHAIR AND MUST BE A MEMBER OF THE BOARD. WHENEVER POSSIBLE, THE BOARD CHAIR WILL SERVE AS THE VICE CHAIR OF THE COMMITTEE IN RECOGNITION OF HIS/HER RELATIONSHIP TO THE CEO AND HIS/HER RESPONSIBILITY IN CARRYING OUT THE CEO PERFORMANCE REVIEW ON BEHALF OF THE BOARD OF DIRECTORS. COMMITTEE MEMBERS ARE RECRUITED BY THE COMMITTEE CHAIR. THE COMMITTEE INCLUDES MEMBERS OF THE COMMUNITY WHO POSSESS EXPERIENCE AND EXPERTISE IN HUMAN RESOURCES, BENEFITS, OR COMPENSATION.

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

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS, ANNUAL REPORT, AND FORM 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE AS WELL AS UPON REQUEST. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

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

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	3,874.
PROVISION FOR UNCOLLECTIBLE PLEDGES	-758,534.
TOTAL TO FORM 990, PART XI, LINE 9	-754,660.

FORM 990, PART XII, LINE 2C:

THE ORGANIZATION'S AUDIT AND ETHICS COMMITTEE (THE COMMITTEE) IS RESPONSIBLE FOR ASSISTING THE BOARD OF DIRECTORS IN FULFILLING ITS OVERSIGHT RESPONSIBILITIES. AMONG THE RESPONSIBILITIES OF THE COMMITTEE IS THE OVERSIGHT OF THE INTEGRITY OF THE ORGANIZATION'S FINANCIAL ACCOUNTING PROCESSES AND SYSTEMS OF INTERNAL CONTROLS REGARDING FINANCE, ACCOUNTING, AND USE OF ASSETS; THE INDEPENDENCE AND

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PERFORMANCE OF THE INDEPENDENT AUDITORS AND STAFF WITH FINANCE
RESPONSIBILITIES; AND THE AUDITOR SELECTION PROCESS.

IN RELATION TO THE ANNUAL AUDIT, THE COMMITTEE:

-MEETS IN EXECUTIVE SESSION WITH THE INDEPENDENT AUDITORS

-OBTAINS A FORMAL STATEMENT FROM THE AUDITORS ANNUALLY REGARDING THEIR
INDEPENDENCE

-OBTAINS A REPORT ANNUALLY REGARDING THE AUDITORS' QUALITY CONTROL
PROCEDURES AND ANY REPORT ISSUED AS A RESULT OF A QUALITY CONTROL
REVIEW OF THE AUDITORS

-OBTAINS AND REVIEWS ANY SIGNIFICANT CORRECTING AUDIT ADJUSTMENTS OR
PASSED CORRECTING AUDIT ADJUSTMENTS

-REVIEWS THE DISPOSITION OF ANY MANAGEMENT LETTER COMMENTS, INTERNAL
CONTROL AND/OR FRAUD RELATED MATTERS THAT ARISE DURING THE COURSE OF
THE ANNUAL AUDIT

-PRE-APPROVES ALL NON-AUDIT SERVICES (OTHER THAN 990 AND 5500
PREPARATION)

-REVIEWS AND DISCUSSES WITH MANAGEMENT AND THE INDEPENDENT AUDITOR ALL
CRITICAL ACCOUNTING POLICIES

-REQUIRES THE INDEPENDENT AUDITING FIRM TO ROTATE AUDIT MANAGER EVERY
3-5 YEARS

-REVIEWS ANNUALLY THE FORM 990 PRIOR TO FILING AND ENSURES THE CEO AND
COO HAVE CERTIFIED THE CONTENTS OF THE FORM

-PROVIDES AN AVENUE OF COMMUNICATION AMONG THE ORGANIZATION'S
INDEPENDENT AUDITORS, MANAGEMENT, STAFF, AND THE BOARD OF DIRECTORS

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships
Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
Attach to Form 990.

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

OMB No. 1545-0047

2023

**Open to Public
Inspection**

Name of the organization **UNITED WAY SUNCOAST, INC.** Employer identification number **59-3725701**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

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

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
CHARITABLE REMAINDER UNITRUST (1)	INVESTMENTS	FL	N/A		N/A	N/A	N/A		X

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

Note: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

	(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

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