Form **990**

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

A F	or the	2023 calendar year, or tax year beginning $$ JUL 1 , $$	2023 and	ending J	UN 30, 2024							
B C	heck if oplicable:	C Name of organization UNITED WAY OF GREATER RICHMON	ND		D Employer identifie	cation number						
	Address	a DEMED CRIDG										
	Name change	22 7275246										
	Initial return	nn Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number										
	Final return/	7814 CAROUSEL LANE	804-771-									
	termin- ated Amende	City or town, state or province, country, and ZIP or foreig	n postal code		G Gross receipts \$	13,434,446.						
	return Applica	KICHMOND, VA 23234	OTTEO GERE		H(a) Is this a group re							
	_tion pending	F Name and address of principal officer. DANDANA C	OUTO SIPE		for subordinates							
		SAME AS C ABOVE	- \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		H(b) Are all subordinates in							
		mpt status: X 501(c)(3) 501(c)() (insert no e: WWW.YOURUNITEDWAY.ORG	o.) 4947(a)(1)	or 527		list. See instructions						
	Vebsite	organization: X Corporation Trust Association	Other	I Voor	H(c) Group exemption	A State of legal domicile: VA						
		Summary	Other	L rear	or formation. TOTAL	A State of legal dofficile. VA						
	27 7 27 7 7 7	Briefly describe the organization's mission or most significant a	octivities: ΙΝΙΤΤ	ED WAY	OF GREATER	RICHMOND &						
င့		PETERSBURG IS A NONPROFIT ORGANI										
Governance	-	Check this box if the organization discontinued its o										
Veri		Number of voting members of the governing body (Part VI, line			3	17						
Ĝ		Number of independent voting members of the governing body	,			17						
<u>ಇ</u>		Fotal number of individuals employed in calendar year 2023 (Pa				39						
Activities &		Total number of volunteers (estimate if necessary)				2384						
cŧi		Fotal unrelated business revenue from Part VIII, column (C), line			7a	0.						
Ř		Net unrelated business taxable income from Form 990-T, Part I				0.						
					Prior Year	Current Year						
4	8 (Contributions and grants (Part VIII, line 1h)			14,509,316.	12,177,864.						
Revenue	9 F	Program service revenue (Part VIII, line 2g)			0.	0.						
eve	10 I	nvestment income (Part VIII, column (A), lines 3, 4, and 7d)			456,194.	392,915.						
Œ	11 (Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, an	nd 11e)		1,192,813.	863,667.						
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, co	lumn (A), line 12)		16,158,323.	13,434,446.						
	13 (Grants and similar amounts paid (Part IX, column (A), lines 1-3)			12,532,099.	9,769,774.						
	14	Benefits paid to or for members (Part IX, column (A), line 4)			0.	0.						
S		Salaries, other compensation, employee benefits (Part IX, colu			2,090,973.	2,269,858.						
Expenses	I	Professional fundraising fees (Part IX, column (A), line 11e) $$			0.	0.						
ă		Total fundraising expenses (Part IX, column (D), line 25)	1,259,2		1 566 251	1 400 710						
ш		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			1,566,371.							
		Total expenses. Add lines 13-17 (must equal Part IX, column (A			16,189,443. -31,120.							
- No		Revenue less expenses. Subtract line 18 from line 12			eginning of Current Year	-87,898. End of Year						
		Tatal accets (Dort V. line 10)			14,760,688.	13,129,182.						
Assets	20 - 21 -	Fotal assets (Part X, line 16) Total liabilities (Part X, line 26)		·····	6,774,796.	4,598,554.						
Net /	22	Net assets or fund balances. Subtract line 21 from line 20			7,985,892.	8,530,628.						
	art II	Signature Block			7750570520	0,550,020.						
		ties of perjury, I declare that I have examined this return, including acc	companying schedule	s and statem	ents, and to the hest of my	v knowledge and belief, it is						
		t, and complete. Declaration of preparer (other than officer) is based or				,,						
		May Conto San		, , , , , , , , , , , , , , , , , , , ,		2025						
Sig	n İ	Signature of officer			Date							
Here BARBARA COUTO SIPE, CHIEF EXECUTIVE OFFICER												
Type or print name and title												
		Print/Type preparer's name Preparer's s	signature		Date Check	PTIN						
Paid		JAYME MIKA	Y		self-emplo							
Prep	oarer	Firm's name KEITER, STEPHENS, HURST	, GARY & S	SHREAV	ES Firm's EIN 5	4-1631262						
Use	Only	Firm's address 4401 DOMINION BLVD										
		GLEN ALLEN, VA 23060			Phone no. (8	04) 747-0000						
May	the IF	S discuss this return with the preparer shown above? See inst	tructions			X Yes No						

& PETERSBURG

Par	t III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	UNITED WAY OF GREATER RICHMOND & PETERSBURG IS A NONPROFIT
	ORGANIZATION THAT EXISTS TO MOBILIZE THE CARING POWER OF OUR LOCAL
	COMMUNITIES TO HELP THOSE IN NEED AND TO CREATE OPPORTUNITIES FOR ALL
	PEOPLE TO THRIVE.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	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 \$ 9,769,774. including grants of \$ 9,769,774.) (Revenue \$)
	THANKS TO THE GENEROUS SUPPORT FROM OUR DONORS, CORPORATE PARTNERS, AND
	VOLUNTEERS, IN FY24 WE PROUDLY INVESTED \$4.2 MILLION INTO THE GREATER
	RICHMOND AND PETERSBURG REGION, SUPPORTING OUR COMMUNITY THROUGH
	GRANTS, DIRECT SERVICES, AND STRATEGIC INITIATIVES TO ENSURE ALL
	RESIDENTS HAVE THE OPPORTUNITY TO THRIVE. PREVIOUSLY, OUR FOCUS AREAS
	INCORPORATED NINE MILESTONES CALLED STEPS TO SUCCESS THAT COVERED THREE
	MAIN CATEGORIES: "EDUCATION, INCOME & HEALTH". WE'VE INCORPORATED THESE
	MILESTONES INTO THREE NEWLY NAMED FOCUS AREAS WITH THE FOLLOWING
	ACCOMPLISHMENTS:
	YOUTH OPPORTUNITY-APPROXIMATELY 79% OF MIDDLE-SCHOOL STUDENTS IMPROVED
	IN ACADEMIC PERFORMANCE. KINDERGARTEN COUNTDOWN CAMP: IN THIS PILOT
4b	(Code:) (Expenses \$ 495,544. including grants of \$) (Revenue \$)
	FINANCIAL SECURITY-122 HOUSEHOLDS MOVED INTO PERMANENT HOUSING THROUGH
	CRISIS HOTLINE SUPPORT. HOME REPAIR, ADULT DAY SERVICES, AND HOME CARE
	PROGRAMS RESULTED IN SAVINGS OF \$21,490,863 FOR FAMILY CAREGIVERS AND
	TAXPAYERS. UNITED WAY TAX ASSISTANCE PROGRAM ASSISTED 3,200 FILERS FOR
	A TOTAL ECONOMIC IMPACT OF \$3.6 MILLION. \$3.6 MILLION IN TAX REFUNDS
	AND \$937,873 IN EARNED INCOME TAX CREDIT REFUNDS. THIS PROGRAM SAVED
	FILERS \$815,500 IN TAX PREP FEES WOMENRISE CHILDCARE SCHOLARSHIPS
	SUPPORT SINGLE MOMS WORKING TOWARD A POST-SECONDARY DEGREE OR
	CREDENTIAL, 84% OF WHOM ARE FIRST GENERATION COLLEGE STUDENTS. IN ITS
	THIRD YEAR, THE WOMEN RISE GRADUATION RATE HAS GROWN TO 48% WITH NEARLY
	HALF OF THE NEW PARTICIPANTS SUCCESSFULLY COMPLETING THE PROGRAM SO FAR
	(15 OF 31). \$400,000 AWARDED IN SCHOLARSHIPS TO DATE. ENERGYSHARE: FOR
4c	(Code:) (Expenses \$1, 168, 002. including grants of \$) (Revenue \$)
	HEALTHY COMMUNITY-99% OF CHILDREN WERE REGULARLY SCREENED FOR
	DEVELOPMENTAL MILESTONES AND REFERRED TO RELEVANT SERVICES, IF NEEDED.
	1,387 PEOPLE TRAINED IN EVERYDAY STRONG, YOUTH RESILIENCY SUPPORT MODEL
	IN PARTNERSHIP WITH 30 COMMUNITY- BASED PARTNERS.
4d	Other program services (Describe on Schedule O.)
_	(Expenses \$ including grants of \$) (Revenue \$) Total program service expenses 11,433,320.
_4e	Total program service expenses 11,433,320.

332002 12-21-23

UNITED WAY OF GREATER RICHMOND

Form 990 (2023) & PETERSBURG
Part IV Checklist of Required Schedules

	r		Yes	No_
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		77	
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	^	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	ا ہ		х
	public office? If "Yes," complete Schedule C, Part I	3		
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	,		х
_	during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	5		Х
c	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III			
6	· · · · · · · · · · · · · · · · · · ·	6		Х
7	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I Did the organization receive or hold a conservation easement, including easements to preserve open space,	-		
7	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	- 1		
٥		8		X
9	Schedule D, Part III			
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			-
10	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,	3333		
• •	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes." complete Schedule D.			
-	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b				
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	1		177
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	ļ	X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			7.7
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	<u> </u>	X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			₩.
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		х
40	1c and 8a? If "Yes," complete Schedule G, Part II	18	 	122
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		x
00	complete Schedule G, Part III	19 20a	-	X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		**
b or	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	х	
	domostio government out i di tur, colonia y y, inte i : Il 1es, complete schedule I, Parts i alto II			(2022)

Form **990** (2023)

Form 990 (2023) & PETERSBURG

Part IV | Checklist of Required Schedules (continued)

			Yes	No		
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on					
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current					
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete					
	Schedule J	23	X			
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the					
	ast day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete					
	Schedule K. If "No," go to line 25a	24a		X		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b				
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease					
	any tax-exempt bonds?	24c				
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d				
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			-U-		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and					
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	054		х		
	Schedule L, Part I	25b				
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current					
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		x		
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	20				
27	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled					
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		х		
28	Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV,					
20	instructions for applicable filing thresholds, conditions, and exceptions):					
а	and the second s			1		
_	"Yes," complete Schedule L, Part IV	28a		X		
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X		
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If					
	"Yes," complete Schedule L, Part IV	28c		X		
29	Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M	29	X	ļ		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation					
	contributions? If "Yes," complete Schedule M	30	-	X		
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes, " complete Schedule N, Part I	31	-	X		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			77		
	Schedule N, Part II	32	-	X		
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			x		
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	 	 ^		
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and	1 04		x		
	Part V, line 1	34 35a	 	X		
	Did the organization have a controlled entity within the meaning of section 512(b)(13)? If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	33a	 	1		
b	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b				
26	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	1000	1	1		
36	If "Yes," complete Schedule R, Part V, line 2	36		X		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization					
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X		
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?					
	Note: All Form 990 filers are required to complete Schedule O	38	X			
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
	Check if Schedule O contains a response or note to any line in this Part V					
			Yes	No		
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	- 100				
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	4				
c	: Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1 5500		M KAN		
	(gambling) winnings to prize winners?	1c	<u> </u>	<u> </u>		
33200	04 12-21-23	For	n 990	(2023		

Par	Statements Regarding Other Ind Fillings and Tax Compliance (continued)		·····						
		garaja si	Yes	No					
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return.								
	mice for the defender year origing with or within the year obtained by the total.	1 1	х						
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Λ						
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a							
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b							
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	4.		Х					
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	Di VA	-21					
	If "Yes," enter the name of the foreign country								
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).	F-	1.1.4.4.4.4.4	Х					
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a 5b		- <u>X</u>					
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c							
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit	6a		х					
	any contributions that were not tax deductible as charitable contributions?	- Oa							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		ĺ					
	were not tax deductible?	OD	3133	255334					
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	223444753	х					
a		7b							
	If "Yes," did the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	10							
С		7c		х					
		10							
	If "Yes," indicate the number of Forms 8282 filed during the year <u>7d</u> Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		1,-1-1111					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7f	-	Ī					
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g							
g h	If the organization received a contribution of qualified intellectual property, and the organization file refinesses de required If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h							
h 8	the contract of the contract o								
0	sponsoring organization have excess business holdings at any time during the year?	8							
9	Sponsoring organizations maintaining donor advised funds.	Marin	8000						
	a Did the sponsoring organization make any taxable distributions under section 4966?								
b	a manage of the state of the st								
10	Section 501(c)(7) organizations. Enter:	9b							
а	Initiation fees and capital contributions included on Part VIII, line 12								
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b								
11	Section 501(c)(12) organizations. Enter:								
	Gross income from members or shareholders								
	Gross income from other sources. (Do not net amounts due or paid to other sources against								
~	amounts due or received from them.)								
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a							
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	Turker Village		Transaction of the second					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1886							
	Is the organization licensed to issue qualified health plans in more than one state?	13a							
	Note: See the instructions for additional information the organization must report on Schedule O.								
b	Enter the amount of reserves the organization is required to maintain by the states in which the								
	organization is licensed to issue qualified health plans								
С	Enter the amount of reserves on hand	6.000							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X					
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b							
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or								
	excess parachute payment(s) during the year?	15		X					
	If "Yes," see the instructions and file Form 4720, Schedule N.	1300		1 West					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	_	X					
	If "Yes," complete Form 4720, Schedule O.								
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities	1							
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		ļ					
	If "Yes." complete Form 6069.	1 489							

UNITED WAY OF GREATER RICHMOND 23-7375346 & PETERSBURG Form 990 (2023) Part VI | Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management 17 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 17 Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 of officers, directors, trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or 7b persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х 8a The governing body? X a8 Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes." provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe 12c on Schedule O how this was done X 13 13 Did the organization have a written whistleblower policy? X Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? X 15a a The organization's CEO, Executive Director, or top management official X 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure NONE List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply

State the name, address, and telephone number of the person who possesses the organization's books and records BARBARA COUTO SIPE - (804) 771-5843

7814 CAROUSEL LANE, SUITE 400, RICHMOND, VA 2329

X Another's website

statements available to the public during the tax year.

Form 990 (2023)

X Upon request

Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial

Other (explain on Schedule O)

X Own website

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& PETERSBURG

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 n (A)	(B)			10	2)			(D)	(E)	(F)
Name and title	Average hours per		not c		nore	than c s both		Reportable compensation	Reportable compensation	Estimated amount of
	week (list any hours for related organizations	stee or director	nstitutional trustee	d a di	recto	Highest compensated A	ee)	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related
	below line)	Individua	Institutio	Officer	Key employee	Highest of employer	Former			organizations
(1) ANGELA OTTO	40.00									
VP OF PROGRAMS & ADMIN		<u> </u>	ļ	X	ļ		L	173,904.	0.	20,367
(2) JOSHUA EPPS	40.00							110 000		16 005
VP OF RESOURSE DEVELOPMENT	1.000	<u> </u>	<u> </u>	Х				119,992.	0.	16,895.
(3) BARBARA COUTO SIPE	40.00	\blacksquare		-		ĺ		100 000	0.	15 172
PRESIDENT & CEO - STARTED 7/2023	40.00	├	ļ	X	_	-	<u> </u>	100,032.	0.	15,473
(4) PAUL HUNTER	40.00	Ì		х				87,377.	0.	14,325
CONTROLLER (5) KATINA F. WILLIAMS	40.00	\vdash	-	┝≏	<u> </u>	┢	<u> </u>	01,311.	0.	14,525
VP OF COM IMPACT - STARTED 10/2023	40.00			X				22,762.	0.	3,091
(6) SHERRIE ARMSTRONG	1.00	1		122	├	 		22,702.		3,052
DIRECTOR	1.00	x						0.	0.	0
(7) CINDY BUCKLER	1.00	ᢡ			\vdash					
DIRECTOR		x						0.	0.	0
(8) THERESA CHAMBLESS	1.00									
DIRECTOR		X						0.	0.	0
(9) JOSH DARE	1.00									
DIRECTOR		X						0.	0.	0
(10) TAMMY HORNSBY-FINK	1.00									
DIRECTOR		X	<u> </u>		<u> </u>		<u> </u>	0.	0.	0
(11) SANDRA ONYIUKE	1.00	_								
DIRECTOR	1 00	X		<u> </u>	<u> </u>	<u> </u>		0.	0.	0
(12) DIERDRE PEARSON	1.00	١								
DIRECTOR	1 00	X		-	┼	╁	<u> </u>	0.	0.	0
(13) ASHANTE SMITH	1.00	٠,						0.	0.	0
DIRECTOR	1 00	X	-	┼	╁	╂	├	0.	U •	- 0
(14) KELLY TILL	1.00	$ _{\mathbf{x}}$						0.	0.	0
DIRECTOR (15) SUSAN TRIGGS	1.00	┼≏	╁	\vdash	-	╂	┼─	0.	J	0
DIRECTOR	1.00	x						0.	0.	0
(16) LYNN WHITE	1.00	 ^	+	+	1		\vdash		1	
DIRECTOR	1.00	$ _{x}$						0.	0.	0
	1.00	+*	T	T	T		t			
(17) TONY WITHERSPOON										

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Form 990 (2023)

& PETERSBURG

Part VII Section A. Officers, Directors, Trust	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)											
(A)	(B)	(B) (C)						(D)	(E)		(F)	
Name and title	Average	Position (do not check more than one						Reportable	Reportable	Estimated		
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of		of
	week		cer an	d a di	irecto	r/trus	tee)	from	from related		other	
	(list any	ector						the	organizations		npensat	
	hours for	or dir	يو			ated		organization	(W-2/1099-MISC/	1	rom the	
	related	stee	ruste			bensa		(W-2/1099-MISC/	1099-NEC)		ganizati	
	organizations below	nal tru	onal 1		loye	COM		1099-NEC)		i	nd relate	
	line)	Individual trustee or director	nstitutional trustee	Officer	key employee	Highest compensated employee	Former			org	anizatio	JIIS
(18) CORYNNE ARNETT	1.00	드		jo	<u>\$</u>	王 5	윤			<u> </u>		
	1.00	77		v				0.	0.			0.
IMMEDIATE PAST CHAIR	1 00	Х	-	X		-	-	0.	U •	<u> </u>		<u> </u>
(19) LAKSHMI ALGAPPAN	1.00	7.7		,,					0			0
CHAIR	1 00	X		X		ļ	<u> </u>	0.	0.	-		0.
(20) BOBBY COWGILL	1.00								_			0
FIRST VICE CHAIR	1 00	X	ļ	X	<u> </u>	<u> </u>	<u> </u>	0.	0.	ļ		0.
(21) MIKE BRUCE	1.00								_			^
SECOND VICE CHAIR		X	<u> </u>	X	<u> </u>		<u> </u>	0.	0.			0.
(22) PETER PERKINS	1.00							_	_			_
TREASURER		X		X	L	<u> </u>	<u> </u>	0.	0.	ļ		0.
			<u></u>									
						T						
1b Subtotal	<u> </u>	·		·				504,067.	0.	-	0,1	$\overline{51}$.
c Total from continuation sheets to Part VI								0.	0.			0.
								504,067.	0.		70,1	
d Total (add lines 1b and 1c)											0, =	
	ot iimited to tri	OSE	แรเซ	iu ai	JOVE	;) WI	10 16	sceived more than \$100	ooo oi reportable			3
compensation from the organization											Yes	No
O Dilli					1		. 1		laura an	400	100	3833
3 Did the organization list any former officer,											7,774410	v
line 1a? If "Yes," complete Schedule J for s										3	2 2033 G	X
4 For any individual listed on line 1a, is the su										MARRIE	7	sanital s
and related organizations greater than \$156										4	X	125500
5 Did any person listed on line 1a receive or a	•							•		131137		
rendered to the organization? If "Yes." con	nplete Schedul	e J	for st	uch.	pers	on				5		X
Section B. Independent Contractors												
1 Complete this table for your five highest co										ation 1	rom	
the organization. Report compensation for	the calendar y	ear	endi	ng w	vith (or w	ithir	the organization's tax y	rear.			
(A)								(B)			(C)	
Name and business	address	N	ONI	E				Description of	services	Comp	ensatio	n

-												
2 Total number of independent contractors (i	ncluding but n	ot li	mite	d to	tho	se lis	sted	above) who received m	ore than			
\$100,000 of compensation from the organi						0		,				
T. Componential from the organi										Far	990/	(2022)

Form 990 (2023) & PETERSBURG
Part VIII | Statement of Revenue

Contributions, Gifts, Grants and Other Similar Amounts	l a	Check if Schedule O contains a respor		(A)	(B) Related or exempt	(C)	(D)
Gifts, Grants ilar Amounts	a			Total revenue		Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
Gifts, Grar ilar Amoun		Federated campaigns1a	26,852.				
Giffs, G ilar Am	b	Membership dues 1b					
ia Fig		Fundraising events 1c					
		Related organizations 1d	450.000				
ns,		Government grants (contributions) 1e	150,000.				
er S	f	All other contributions, gifts, grants, and	12,001,012.				
i di	_	similar amounts not included above 1f Noncash contributions included in lines 1a-1f 1g \$					
i d	_			12,177,864.			
0 %	- 11	Total, Add lines 1a-1f	Business Code	year warman			
0 2	2 a						
Program Service Revenue	b						
Ser	С						
am	d						
B	е						
4		All other program service revenue					
		Total. Add lines 2a-2f					
3	3	Investment income (including dividends, in		155 407			155,497.
		other similar amounts)		155,497.			133,437.
	4 -	Income from investment of tax-exempt bo	,				
5	5	Royalties(i) Real					
	3 a	Gross rents 6a	.,,				
'		Less: rental expenses 6b					
		Rental income or (loss) 6c					
		NI-1 wastal bases as desay					
7	7 a	Gross amount from sales of (i) Securit	ies (ii) Other				
		assets other than inventory 7a 237,4	18.				
i i	b	Less: cost or other basis					
ige		and sales expenses 7b	0.				
y er		Gain or (loss) 7c 237, 4					027 410
Other Revenue		Net gain or (loss)		237,418.			237,418.
the	8 a	Gross income from fundraising events (not					
0		including \$ of					
		contributions reported on line 1c). See Part IV, line 18	8a				
	h	Less: direct expenses	8b				
		Net income or (loss) from fundraising ever					
		Gross income from gaming activities. See					
`	_	Part IV, line 19	9a				
	b	Less: direct expenses	9b				
	С	Net income or (loss) from gaming activitie	s				
10	0 a	Gross sales of inventory, less returns					
		and allowances	10a				
		Less: cost of goods sold	10b				
\perp	С	Net income or (loss) from sales of invento					
2		HERG 2DD DADWY DDGG	Business Code 900099	275 000	275 000	g and the walk (MARK)	2)
Teg 1	1 a	FEES - 3RD PARTY PROC.	900099	375,000. 271,844.			
ellanec exenue	b	ENDOWMENT INCOME MISCELLANEOUS	900099	188,645.			
Miscellaneous Revenue	q C			28,178.			
Σ		All other revenue		863,667.		Market Harris	
	<u>е</u> 2	Total revenue. See instructions	WL 2013 MM	13,434,446.		. 0	392,915.

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Form **990** (2023)

Form 990 (2023) & PETERSBURG
Part IX Statement of Functional Expenses

	Check if Schedule O contains a respons				
	include amounts reported on lines 6b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	rants and other assistance to domestic organizations	0 000 004	0 500 554		
an	nd domestic governments. See Part IV, line 21	9,769,774.	9,769,774.		
	rants and other assistance to domestic				
	dividuals. See Part IV, line 22				
	rants and other assistance to foreign				
	ganizations, foreign governments, and foreign				
	dividuals. See Part IV, lines 15 and 16				
	enefits paid to or for members				
	ompensation of current officers, directors,	700 050	270 277	201 117	234,426.
	ustees, and key employees	788,950.	270,377.	284,147.	234,420.
	ompensation not included above to disqualified	:			
	ersons (as defined under section 4958(f)(1)) and				
	ersons described in section 4958(c)(3)(B)	1,155,707.	481,111.	258,863.	415,733.
	ther salaries and wages	1,133,707	#01,111.	230,003	413,733.
	ension plan accruals and contributions (include				
	ection 401(k) and 403(b) employer contributions)	188,842.	70,336.	40,177.	78,329.
	ther employee benefits	136,359.	52,998.	36,326.	47,035.
	ayroll taxes	130,339.	34,330.	30,320.	47,033.
	ees for services (nonemployees):				
	lanagement				
	egal				
	ccounting				
	obbying				
	rofessional fundraising services. See Part IV, line 17	14,429.		14,429.	
	nvestment management fees	14,449.		14,447.	
	Other. (If line 11g amount exceeds 10% of line 25,	224 660	105,993.	60,005.	158,662.
	olumn (A), amount, list line 11g expenses on Sch O.)	324,660.	103,993.	00,003.	130,002.
	dvertising and promotion				
	Office expenses				
	nformation technology				
	Royalties	192,828.	83,489.	48,373.	60,966.
	Occupancy	9,620.	3,824.	630.	5,166.
	ravel	9,040.	3,024.	030.	3,100.
	Payments of travel or entertainment expenses				
_	or any federal, state, or local public officials	48,733.	28,900.	6,984.	12,849.
	Conferences, conventions, and meetings	40,733.	20,900	0,004.	14,045
	nterest	149,212.	64,161.	38,198.	46,853.
	Payments to affiliates	34,892.	15,004.	8,932.	10,956.
	Depreciation, depletion, and amortization	34,092.	13,004.	0,332.	10,330.
	nsurance	Alteria de la companya de la company			
al Ii	other expenses. Itemize expenses not covered bove. (List miscellaneous expenses on line 24e. If ne 24e amount exceeds 10% of line 25, column (A),				
-	mount, list line 24e expenses on Schedule 0.) PROGRAM EXPENSES	408,741.	408,741.	100 p. 100 p	
	EQUIPMENT MAINTENANCE	204,829.	51,717.	25,121.	127,991.
	PRINTING AND PUBLICATIO	38,432.	3,742.	403.	34,287
_	SUPPLIES	33,986.	15,400.	1,787.	16,799.
-		22,350.	7,753.	5,424.	9,173.
	All other expensesOther expenses. Add lines 1 through 24e	13,522,344.	11,433,320.	829,799.	1,259,225
	otal functional expenses. Add lines 1 through 24e loint costs. Complete this line only if the organization		11,100,000	020,1001	_,,
	eported in column (B) joint costs from a combined				
е	ducational campaign and fundraising solicitation. Check here fifollowing SOP 98-2 (ASC 958-720)		1		

Part	990 (2 L X	Balance Sheet			7373340 Page 11
		Check if Schedule O contains a response or note to any line in this Part X		·····	
			(A) Beginning of year		(B) End of year
T	1	Cash - non-interest-bearing		1	
	2	Savings and temporary cash investments	5,199,302.	2	3,202,545.
	3	Pledges and grants receivable, net	1,055,909.	3	1,000,703.
	4	Accounts receivable, net	345,803.	4	126,030.
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%		William	
		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	
Assets	8	Inventories for sale or use		8	
As	9	Prepaid expenses and deferred charges	33,113.	9	19,249
		Land, buildings, and equipment: cost or other			
	104	basis. Complete Part VI of Schedule D 10a 531, 243.			
	h	Less: accumulated depreciation 10b 418,773.	142,127.	10c	112,470
	11	Investments - publicly traded securities	5,756,339.	11	7,177,602
	12	Investments - other securities. See Part IV, line 11	1,718,209.	12	1,158,066
1	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	509,886.	15	332,517
	16	Total assets. Add lines 1 through 15 (must equal line 33)	14,760,688.	16	13,129,182
	17	Accounts payable and accrued expenses	57,792.	17	65,250
	18		4,450,707.	18	4,156,639
	19	Grants payable		19	
		Deferred revenue		20	
	20	Tax-exempt bond liabilities Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	21				
ies	22	Loans and other payables to any current or former officer, director,			
<u></u>		trustee, key employee, creator or founder, substantial contributor, or 35%		22	
Liabilities		controlled entity or family member of any of these persons		23	
_	23	Secured mortgages and notes payable to unrelated third parties		24	
l	24	Unsecured notes and loans payable to unrelated third parties		2.7	
	25	Other liabilities (including federal income tax, payables to related third			
Ì		parties, and other liabilities not included on lines 17-24). Complete Part X	2,266,297.	25	376,665
		of Schedule D	6,774,796.	20	4,598,554
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here	0,774,750.	26	1 2,350,332
s		,			
ည		and complete lines 27, 28, 32, and 33.	6,736,795.	27	7,329,004
alar	27	Net assets without donor restrictions	1,249,097.	28	1,201,624
B	28	Net assets with donor restrictions	1,240,007.	28	1 1,201,024
Ĕ.		Organizations that do not follow FASB ASC 958, check here			
된		and complete lines 29 through 33.	Approximation of the Administration of the A	00	
ţ	29	Capital stock or trust principal, or current funds		30	
sse	30	Paid-in or capital surplus, or land, building, or equipment fund		 	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated income, or other funds	7,985,892.	31	8,530,628
ž	32	Total net assets or fund balances	14,760,688.	32	13,129,182
	33	Total liabilities and net assets/fund balances	14,700,000.	33	Form 990 (202

Par	t 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	13,43						
2	Total expenses (must equal Part IX, column (A), line 25)	2		13,522,344 -87,898					
3	Revenue less expenses. Subtract line 2 from line 1								
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))								
5									
6	Donated services and use of facilities	6							
7	Investment expenses	7							
8	Prior period adjustments	8							
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,								
	column (B))								
Pai	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII				<u>Ш</u>				
			,	Yes	No				
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_						
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.								
2a	2a Were the organization's financial statements compiled or reviewed by an independent accountant?								
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a							
	separate basis, consolidated basis, or both:								
	Separate basis Consolidated basis Both consolidated and separate basis								
b	Were the organization's financial statements audited by an independent accountant?		2b_	X	<u> </u>				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,							
	consolidated basis, or both:								
	X Separate basis Consolidated basis Both consolidated and separate basis				Take 1				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,							
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X					
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch		THE		P. Said				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the								
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		X				
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ								
~	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b						
	Manual Ma		Form	990	(2023)				

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

Name of the organization

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.

UNITED WAY OF GREATER RICHMOND

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

23-7375346 & PETERSBURG Reason for Public Charity Status. (All organizations must complete this part.) See instructions. Part I The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from 10 activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. ____ Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed in your governing document? (vi) Amount of other (iii) Type of organization (v) Amount of monetary (i) Name of supported (ii) EIN (described on lines 1-10 support (see instructions) support (see instructions) organization Nο Yes above (see instructions))

Schedule A (Form 990) 2023

& PETERSBURG

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

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

Sec	tion A. Public Support						
Cale	ndar 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.")	16156621.	24234241.	21100474.	14509316.	12177864.	88178516.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	16156621.	24234241.	21100474.	14509316.	12177864.	88178516.
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)						
	Public support. Subtract line 5 from line 4.						88178516.
Sec	ction B. Total Support						1
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	<u>16156621.</u>	<u>24234241.</u>	21100474.	<u> 14509316.</u>	<u> 12177864.</u>	88178516.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	79,997.	90,378.	124,343.	135,479.	155,497.	585,694.
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.)	483,581.	536,915.	925,994.	1192813.	863,667.	
11	Total support. Add lines 7 through 10						92767180.
	Gross receipts from related activities					12	
13	First 5 years. If the Form 990 is for the	he organization's fi	irst, second, third,	fourth, or fifth tax	year as a section 5	i01(c)(3)	r
_	organization, check this box and sto						
-	ction C. Computation of Publ						05 05
	Public support percentage for 2023 (14	95.05 %
	Public support percentage from 2022					15	95.71 %
16a	33 1/3% support test - 2023. If the	•					/
	stop here. The organization qualifies						
k	33 1/3% support test - 2022. If the						
	and stop here. The organization qua						
172	10% -facts-and-circumstances tes						
	and if the organization meets the fac						
_	meets the facts-and-circumstances to	-		*	-		
k	o 10% -facts-and-circumstances tes		-				10% or
	more, and if the organization meets t						
40	organization meets the facts-and-circ		-				
18	Private foundation. If the organization	он ава пот спеск а	nox on line 13, 16	oa, 100, 17a, 0r 17	n, check this box a		(Form 990) 2023
						Golledule F	t (i oilli oooj koko

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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.)

Sec	tion A. Public Support						
Caler	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, 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 bus-	j					
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
	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						
	Public support. (Subtract line 7c from line 6.)	valuation ((AND AND AND AND AND AND AND AND AND AND				
	ction B. Total Support	<u></u>		•			
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
9	Amounts from line 6						
	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						
	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						
13	assets (Explain in Part VI.)						
	First 5 years. If the Form 990 is for the	ne organization's f	irst, second, third,	fourth. or fifth tax	vear as a section	501(c)(3) organizati	on,
•	check this box and stop here					(- _/ / ₋ / ₋ ,g	
Sec	ction C. Computation of Publ						
	Public support percentage for 2023 (column (f))		15	%
16	Public support percentage from 2022					16	%
-	ction D. Computation of Inves						
	Investment income percentage for 20			ine 13, column (fl)		17	%
18	Investment income percentage from					18	%
	33 1/3% support tests - 2023. If the					termina in the second	
150	more than 33 1/3%, check this box a						
ı	33 1/3% support tests - 2022. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						
		circon a		,			

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Voc No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

	Yes	No_
1	Vestil AVIII AVIII	
2 3a		W.
3b		CHARLE .
3c 4a		ANN
4b		
46		
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9b		: NEED
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10a 10b	N. S.	4872
ule A (For	m 990) 2023

Part IV Supporting Organizations is continued Yes No.			3/334	U Pa	age 5
11. Has the arganization accepted a gift or contribution from any of the following persons? A A person who directly or infinently controls, where does not together with persons described on lines 11b and 11c below, the governing body of a supported organization? A A family member of a person described on line 11a above? If Yes' to line 11a, 11b, or 11c, provide deals of part VI. A 35th controlled entity of a person described on line 11a above? If Yes' to line 11a, 11b, or 11c, provide deals of part VI. Did the governing body, members of the governing body, officers acting in their cificial capacity, or membership of one or more supported organizations have the power to regularly appoint or effect at least a majority of the organization's officers, effectively generated; supported or controlled the appoint inside it is unappoint or her, at least a majority of the organization's Different organization, describe how the nowers to appoint and for convove officers, directly, or membership of one or more supported organization, describe how the nowers to appoint and for convove officers, directly, or membership of one or more supported organization, describe how the nowers to appoint and for convove officers, directly, or membership or one supported organization, describe how the nowers to appoint and for convove officers, directly, or membership or one supported organization, describe how the powership or appoint and for convove officers, directly appointed organization and the supported organization of the transition of the than the supported organization of the thing of the organization of the powership organization of the powership organization of the powership organization of the purposes of the supported organization of the powership organization of the purposes of the supported organization provide to each of its supported organization of the powership organization was vested in the same persons that controlled or managed the supported organization provide to each of its supported organization, to the orga	Par	t IV Supporting Organizations (continued)			
A person who directly or indirectly controls, either alone or together with persons described on line s 11b and 11b lobow. If the powering body of a supported organization? A 33% controlled entity of a person described on line 11a above? A 33% controlled entity of a person described on line 11a above? A 33% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide degla in Part VI. Section B. Type I Supporting Organizations Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or mere supported organizations have the power to regularly appoint or effectively operated, supervised, or controlled the angularity appoint or effectively operated, supervised, or controlled the angularity appoint or effectively operated, supervised, or controlled the angularity appoint or effectively operated, supervised, or controlled the angularity appoint or effectively operated, supervised, or controlled the supported organization operated or the benefit of any supported organization operated organization operated or the benefit of any supported organization operated organization operated organization operated organization operated organization operated organization operated organizations or estiticions, it any, applied to such powers during the tax year. Did the organization operated organizations or restrictions, it any, applied to such powers during the tax year. Part VI have providing such benefit carried and the purposes of the supported organizations? If "Nes," explain in Part VI have control organizations and controlled the supported organizations? If "Nes," describe in Part VI how control or management of the supporting Organizations as well of the surported organizations and the supported organizations and provided the complex provided organization and provided the supported			A USANASI	Yes	No
11 bid the operating body of a supported organization? A family member of a person described on line 11a at above? A 58% controlled entity of a person described on line 11a or 11b above? If "yes" to line 11a, 11b, or 11c, provide stall in Part VI. Section B. Type I Supporting Organizations 1 Did the governing body, mombers of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly support or select at least a majority of the organization's officers, directors, or fursions appointed or controlled the organizations. If the organization have from the supported organization of the flat organization or appoint or a feet flat flat organization and the foreign appointed organization, describe how the powers to appoint or a feet flat, if the organization has flore of the supported organization or an appoint or a feet flat organization or appoint or a feet flat organization or an appoint or a feet flat organization organization or appoint or a feet flat organization organi	11	•			
b A family member of a person described on line 11a above? A 3356 controlled entity of a person described on line 11a above? A 3356 controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described by the supported organization of the property of the person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide described on line 11a, or 11a, 11b, or 11c, provide described on line 11a, 11b, or 11c, provide described or 11a, 11b, or 11c, provide described on line 11a, 11b, or 11a, provided or 11a, 11b, or 11a, 11b	а		446	14., 54.3	
c A 35% controlled entity of a person described on line 11a or 11b above? (/*Yes* (o line 11a, 11b, or 11c, provide digital h Part VI. Section B. Type I Supporting Organizations 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 mijority of the organizations officers, directors, or trustees at all times during the tax years (**/*/*/*/*/*/*/*/*/*/*/*/*/*/*/*/*/*/*					
11c			11D	3333	78155
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more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If I'No, 'expect the I'No with supported organization's different powers to appoint and/or remove offices, directors, or trustees were all facetaled among the supported organization, describe how the powers to appoint and/or remove offices, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 2 Did the organization operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supported organizations? 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 directors or trustees of each of the organization's use year, (in a written notice describing the tax year also a majority of the directors or trustees of each of the organization's use year, (in a written notice describing the type and amount of support provided during the prior tax year, (in a written notice describing the type and amount of support provided during the prior tax year, (in a copy of the Form 804 that was most recently filed as of the date of notification, and (in popies 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 differently with the supported organization's as significant voice in the organization's investment policies and in directing the use of the organization's as significant voice in the organization's investment policies and in directing the use of the organization's as supported organization's as use provided organization's activities and the policy				Yes	No
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UNITED WAY OF GREATER RICHMOND

23-7375346 Page 6 Schedule A (Form 990) 2023 & PETERSBURG Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations Part V 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. (B) Current Year (A) Prior Year Section A - Adjusted Net Income (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 4 Add lines 1 through 3. 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) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year (A) Prior Year Section B - Minimum Asset Amount (optional) 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 b Average monthly cash balances 1b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI): Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 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 Minimum Asset Amount (add line 7 to line 6) 8 Current Year Section C - Distributable Amount Adjusted net income for prior year (from Section A, line 8, column A) 2 Enter 0.85 of line 1. Minimum asset amount for prior year (from Section B, line 8, column A) 3 Enter greater of line 2 or line 3. 4 5 Income tax imposed in prior year Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions). Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990) 2023

instructions).

Schedule A (Form 990) 2023 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) **Current Year** Section D - Distributions 1 Amounts paid to supported organizations to accomplish exempt purposes 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported 2 organizations, in excess of income from activity Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 4 Amounts paid to acquire exempt-use assets 5 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 6 Other distributions (describe in Part VI). See instructions. Total annual distributions. Add lines 1 through 6. Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 9 Distributable amount for 2023 from Section C, line 6 10 Line 8 amount divided by line 9 amount (iii) (i) Underdistributions Distributable **Excess Distributions** Section E - Distribution Allocations (see instructions) Pre-2023 Amount for 2023 Distributable amount for 2023 from Section C, line 6 Underdistributions, if any, for years prior to 2023 (reasonable cause required - explain in Part VI). 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 Carryover from 2018 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. 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, explain in Part VI. See instructions. Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2024. Add lines 3j and 4c. Breakdown of line 7: a Excess from 2019 b Excess from 2020 c Excess from 2021 d Excess from 2022 e Excess from 2023

UNITED WAY OF GREATER RICHMOND

Schedule A	(Form 990) 2023	& PETERSBUF	₹G		23-	/375346 Page 8
Part VI	Supplemental Inforr Part IV, Section A, lines 1, line 1; Part IV, Section D, I Section D, lines 5, 6, and 8 (See instructions.)	nation Provide the	ovnlanations requi	red by Part II, line 10; P 11b, and 11c; Part IV, S 2a, 2b, 3a, and 3b; Par Also complete this par	art II, line 17a or 17b; Par ection B, lines 1 and 2; P t V, line 1; Part V, Section t for any additional inforn	t III, line 12; art IV, Section C, B, line 1e; Part V, aation.
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Schedule B

(Form 990)

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

Department of the Treasury Internal Revenue Service Name of the organization

UNITED WAY OF GREATER RICHMOND & PETERSBURG

Employer identification number

23-7375346

Organization type (chec	sk one):
Filers of:	Section:
Form 990 or 990-EZ	X 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
	on is covered by the General Rule or a Special Rule. 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
sections 509(a contributor, du	ation described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under ()(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 uring 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; D-EZ, line 1. Complete Parts I and II.
contributor, du literary, or edu	ation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one uring the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, cational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering nn (b) instead of the contributor name and address), II, and III.
year, contribu is checked, er purpose. Don'	tation described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the tions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ster here the total contributions that were received during the year for an exclusively religious, charitable, etc., t complete any of the parts unless the General Rule applies to this organization because it received nonexclusively itable, etc., contributions totaling \$5,000 or more during the year
answer "No" on Part IV	on that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must , 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 filing requirements of Schedule B (Form 990).

Name of organization

Employer identification number

UNITED WAY OF GREATER RICHMOND & PETERSBURG

23-7375346

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RECO FOUNDATION 710 HOSPITAL STREET RICHMOND, VA 23219	\$500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DOMINION ENERGYSHARE PROGRAM 120 TREDEGAR STREET RICHMOND, VA 23219	\$375,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

UNITED WAY OF GREATER RICHMOND & PETERSBURG

23-7375346

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

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

Name of organization

Employer identification number

	RSBURG	U	23-7375346
art III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) to completing Part III, enter the total of exclusively religious, charitants.	hrough (e) and the following line entry. aritable, etc., contributions of \$1,000 or les	on 501(c)(7), (8), or (10) that total more than \$1,000 for the yea For organizations s for the year. (Enter this info. once.)
) No.	Use duplicate copies of Part III if additional sp	pace is needed.	
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
21 1			
		William To Control of the Control of	
F		(e) Transfer of gift	
F	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
) No.			
) No. rom 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, an	d 7IP + 4	Relationship of transferor to transferee
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Part I	(b) Purpose of gift	(c) use of gift	(a) Description of now girt is not
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
Part I	(2,7,2,7,2,7,2,2,2,2,2,2,2,2,2,2,2,2,2,2		
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		(e) Transfer of gift	
		(o) Handion of gire	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	NAME OF TAXABLE PARTY O		

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 OF GREATER RICHMOND & PETERSBURG

Employer identification number 23-7375346

Par	t I Organizations Maintaining Donor Advise	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	e 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	ed funds
_	are the organization's property, subject to the organization's		
6	Did the organization inform all grantees, donors, and donor a		
-	for charitable purposes and not for the benefit of the donor of		
	impermissible private benefit?		
Par			
1	Purpose(s) of conservation easements held by the organizati	on (check all that apply).	
	Preservation of land for public use (for example, recrea		f a historically important land area
	Protection of natural habitat		f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included on line 2a	2c
d	Number of conservation easements included on line 2c acqu	ired after July 25, 2006, and not	
	on a historic structure listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation ea	sement is located	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con-	servation easements during the year
	ALLES MANAGEMENT AND ADMINISTRATION OF THE PARTY OF THE P		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2d above		
	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservat		
	balance sheet, and include, if applicable, the text of the foot	note to the organization's financial statem	ents that describes the
- D-	organization's accounting for conservation easements. III Organizations Maintaining Collections o	f Art Historical Treasures or O	ther Similar Assets
Pa	Complete if the organization answered "Yes" on Form		uici olilliai Assotsi
			and halanca sheat works
1a	If the organization elected, as permitted under FASB ASC 98		
	of art, historical treasures, or other similar assets held for pu		
_	service, provide in Part XIII the text of the footnote to its fina		
b	If the organization elected, as permitted under FASB ASC 9		
	art, historical treasures, or other similar assets held for publi	c exhibition, education, or research in lun	rierance 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 tre		ai gairi, provide
	the following amounts required to be reported under FASB		¢
a	Revenue included on Form 990, Part VIII, line 1		
h	Assets included in Form 990, Part X		Φ

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Schedule D (Form 990) 2023

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

UNITED WAY OF GREATER RICHMOND

	dule D (Form 990) 2023 & PETER.	SBURG	1111111111111			3/5346 Page 2
Par						
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that make	significant use of its	
	collection items (check all that apply).					
а	Public exhibition	d	Loan or exc	change program		
b	Scholarly research	е	Other			
С	Preservation for future generations					
4	Provide a description of the organization's co					t XIII.
	During the year, did the organization solicit o					
	to be sold to raise funds rather than to be ma					Yes No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered "Yes" o	on Form 990, Part IV,	line 9, or
	reported an amount on Form 990, Par	·····				
1a	Is the organization an agent, trustee, custodi	an, or other intermed	diary for contribution	ns or other assets n	ot included	
	on Form 990, Part X?				L	Yes No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table:			
						Amount
С	Beginning balance				1c	
d	Additions during the year				1d	
е	Distributions during the year				1 1	
	Ending balance					
	Did the organization include an amount on F					Yes No
<u>b</u>	If "Yes," explain the arrangement in Part XIII.	Check here if the ex	planation has been	provided in Part XI	<u> </u>	
Par	t V Endowment Funds Complete if			orm 990, Part IV, line	e 10.	
		(a) Current year	(b) Prior year	(c) I wo years back	(d) Three years bac	k (e) Four years back
1a	Beginning of year balance					
b	Contributions					
С	Net investment earnings, gains, and losses					
d	Grants or scholarships					
е	Other expenditures for facilities		1			
	and programs					
f	Administrative expenses					
g	End of year balance					
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1g, column (a)) held as:		
а	Board designated or quasi-endowment		%			
b	Permanent endowment	%				
С	Term endowment	_%				
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.				
За	Are there endowment funds not in the posse	ession of the organiz	ation that are held a	and administered fo	r the	<u> </u>
	organization by:					Yes No
	(i) Unrelated organizations?					3a(i)
b	If "Yes" on line 3a(ii), are the related organiza	ations listed as requi	red on Schedule R'	?		3b
4	Describe in Part XIII the intended uses of the		owment funds.			
Pa	rt VI Land, Buildings, and Equipn					
	Complete if the organization answere	ed "Yes" on Form 99	0, Part IV, line 11a.	See Form 990, Parl	t X, line 10.	
	Description of property	(a) Cost or	1 , ,) Accumulated	(d) Book value
		basis (invest	ment) basi	s (other)	depreciation	
1a	Land			3530		
b	Buildings					EF BOO
С	Leasehold improvements			85,736.	30,008.	55,728.
d	Equipment		4	45,507.	388,765.	56,742.
е	Other					440 450
Tota	I. Add lines 1a through 1e. (Column (d) must	egual Form 990. Pan	X. line 10c. colum	n (B))		112,470.

& PETERSBURG

Complete if the organization answered "Yes" or		1b. See Form 990, Part X, line 12. (c) Method of valuation: Cost or end-of-year market	at value
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market	et value
1) Financial derivatives			
2) Closely held equity interests			
3) Other		The state of the s	
(A) BENEFICIAL INTEREST IN	1 150 066	COOM	
(B) TRUST	1,158,066.	COST	
(C)			
(D)		Control of the Contro	
(E)			
(F)			
(G)			
(H)	1,158,066.		
otal. (Col. (b) must equal Form 990, Part X, line 12, col. (B)) Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" of			at value
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year mark	et value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			Vita (BANASAR)
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))		The first production of the first state of the firs	- Charles and American
Part IX Other Assets	on Form 000 Dort IV line	11d Son Form 990 Part Y line 15	
Complete if the organization answered "Yes" (Description		k value
(a)	Description	(2)	.,,
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(8) (9)	(7)		
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, co.	'. (B))		
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, column Y Other Liabilities			
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, co. Part X Other Liabilities Complete if the organization answered "Yes"		11e or 11f. See Form 990, Part X, line 25.	ok value
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col Part X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability		11e or 11f. See Form 990, Part X, line 25.	ok value
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, col Part X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes		11e or 11f. See Form 990, Part X, line 25.	
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, content in the complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (c) Part X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITII	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280 28,679
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (c) Part X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITIES (4) FINANCE LEASE LIABILITIES	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280 28,679
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, content X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITIS (4) FINANCE LEASE LIABILITIES (5)	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280 28,679
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, content X Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITIS (4) FINANCE LEASE LIABILITIES (5) (6)	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280 28,679
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (c) Part X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITIS (4) FINANCE LEASE LIABILITIES (5) (6) (7)	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	ok value 14,280 28,679 33,706
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (c) Part X Other Liabilities Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITIS (4) FINANCE LEASE LIABILITIES (5) (6) (7) (8)	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280 28,679
(8) (9) Total. (Column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (b) must equal Form 990, Part X, line 15, column (c) Complete if the organization answered "Yes" 1. (a) Description of liability (1) Federal income taxes (2) FUNDS HELD FOR OTHERS (3) OPERATING LEASE LIABILITIS (4) FINANCE LEASE LIABILITIES (5) (6) (7)	on Form 990, Part IV, line	11e or 11f. See Form 990, Part X, line 25. (b) Bo	14,280 28,679

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organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

L	econciliation of Revenue per Audited Financial Statemer		Jevellue het Liet	uiii	
	mplete if the organization answered "Yes" on Form 990, Part IV, line 12a.			1	6,327,073.
	11 1			A BESS	0,327,073.
	included on line 1 but not on Form 990, Part VIII, line 12:	2a	632,634.		
	lized gains (losses) on investments		44,196.		
	services and use of facilities		44,450.		
	s of prior year grants				
•	scribe in Part XIII.)			2e	676 830.
	2a through 2d			3	676,830. 5,650,243.
	line 2e from line 1			3	3,030,1131
	included on Form 990, Part VIII, line 12, but not on line 1:		14,429.		
-	nt expenses not included on Form 990, Part VIII, line 7b	F	7,769,774.		
•	scribe in Part XIII.)			4.5	7,784,203.
	4a and 4b			4c	13,434,446.
5 Total revo	nue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) econciliation of Expenses per Audited Financial Stateme	ents With	Expenses per F		
	omplete if the organization answered "Yes" on Form 990, Part IV, line 12a.				
	enses and losses per audited financial statements			1	5,782,337.
	included on line 1 but not on Form 990, Part IX, line 25:			1144	
		2a	44,196.		
	services and use of facilities		22,2300		
	r adjustments				
	ses				
`	escribe in Part XIII.)			2e	44,196.
	2a through 2d			3	5,738,141.
	line 2e from line 1			3	3,,30,111
•	included on Form 990, Part IX, line 25, but not on line 1:	اما	14,429.		
	nt expenses not included on Form 990, Part VIII, line 7b		7,769,774.	1	
•	escribe in Part XIII.)			4c	7,784,203.
	3 4a and 4b			5	13,522,344.
5 Total exp	enses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) upplemental Information				13,322,311.
Provide the de	scriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part			; Part	X, line 2; Part XI,
lines 2d and 4t	o; and Part XII, lines 2d and 4b. Also complete this part to provide any add	illional imori	пацоп.		
PART X,	TITNE 2:				
111111 11/	And this de T think				
INCOME '	TAX UNCERTAINTIES: THE ORGANIZATION I	HAS ADO	OPTED FINAN	CIA	L
A C C O I INTO	ING STANDARDS BOARD (FASB) GUIDANCE RI	ELATED	TO ACCOUNT	ING	FOR
UNCERTA	INTY IN INCOME TAXES, WHICH CLARIFIES	THE A	CCOUNTING F	OK	TINCOME
TAXES B	Y PRESCRIBING THE MINIMUM RECOGNITION	THRES	HOLD THAT A	AT A	X POSITION
IS REQU	IRED TO MEET BEFORE BEING RECOGNIZED	IN THE	ORGANIZATI	ON'	S
FINANCI	AL STATEMENTS.				
IN ACCO	RDANCE WITH THE GUIDANCE, THE ORGANIZ	ATION :	DISCLOSES T	гне	EXPECTED
FUTURE	TAX CONSEQUENCES OF UNCERTAIN TAX POS	ITIONS	PRESUMING	THE	TAXING
	ries full knowledge of the facts and				
AND REC	ORDS UNRECOGNIZED TAX BENEFITS OR LIA	BILITI	ES FOR KNOV		OR edule D (Form 990) 2023

& PETERSBURG

Part XIII Supplemental Information (continued)
ANTICIPATED, TAX ISSUES BASED ON THE ORGANIZATION'S ANALYSIS OF WHETHER
ADDITIONAL TAXES WOULD BE DUE TO THE AUTHORITIES GIVEN THEIR FULL
KNOWLEDGE OF THE TAX POSITION. THE ORGANIZATION ACCRUES INTEREST AND
PENALTIES RELATED TO UNRECOGNIZED TAX BENEFITS AS OTHER NONCURRENT
LIABILITIES AND RECOGNIZES THE RELATED CHANGES IN THE ORGANIZATION'S
ASSESSMENTS AS A COMPONENT OF INCOME TAX EXPENSE. THE ORGANIZATION HAS
COMPLETED ITS ASSESSMENT AND DETERMINED THAT THERE WERE NO TAX POSITIONS,
WHICH WOULD REQUIRE RECOGNITION UNDER THE GUIDANCE. THE ORGANIZATION IS
NOT CURRENTLY UNDER AUDIT BY ANY TAX JURISDICTION.
PART XI, LINE 4B - OTHER ADJUSTMENTS:
DONOR DESIGNATIONS 7,769,774.
PART XII, LINE 4B - OTHER ADJUSTMENTS:
DONOR DESIGNATIONS 7,769,774.
Schedule D (Form 990) 2023

SCHEDULE I (Form 990)

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.

Inspection

OMB No. 1545-0047

2023

Open to Public

Department of the Treasury Internal Revenue Service UNITED WAY OF GREATER RICHMOND Employer identification number Name of the organization 23-7375346 & PETERSBURG Part I General Information on Grants and Assistance 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 X Yes ☐ No criteria used to award the grants or assistance? 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. (f) Method of (h) Purpose of grant (d) Amount of (e) Amount of 1 (a) Name and address of organization (c) IRC section (g) Description of (b) EIN valuation (book, noncash assistance (if applicable) cash grant noncash FMV, appraisal, other) assistance ONOR DIRECTS AMERICAS PITTSBURGH UNDS(DESIGNATIONS) FOR P. O. BOX 371473 ENERGY SHARE PITTSBURGH, PA 15250 10,025 0 DONOR DIRECTS APPALACHIAN POWER FUNDS (DESTGNATIONS) FOR P. O. BOX 24401 ENERGY SHARE 90,744 0 CANTON, OH 44701-4401 N/A DONOR DIRECTS ATLANTIC SPRAY SYSTEMS FUNDS(DESIGNATIONS) FOR PO BOX 125 ENERGY SHARE 18,620. 0 LIGHTFOOT, VA 23090 N/A DONOR DIRECTS BARC ELECTRIC COOPERATIVE FUNDS(DESIGNATIONS) FOR P. O. BOX 264 ENERGY SHARE MILLBORO, VA 24460 501(C)(12) 26,286 0 OONOR DIRECTS CENTRAL VIRGINIA ELECTRIC COOP UNDS(DESIGNATIONS) FOR P. O. BOX 247 ENERGY SHARE 32,562 ٥, 501(C)(12) LOVINGSTON, VA 22949 DONOR DIRECTS CITY OF ELIZABETH CITY FUNDS (DESIGNATIONS) FOR P. O. BOX 347 energy share Gov 5,972 0. ELIZABETH CITY, NC 27907 66.

Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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

Schedule I (Form 990) 2023

34.

LHA 332101 11-01-23

UNITED WAY OF GREATER RICHMOND

		TER RICHMONI	0			2	3-7375346 Page 1
Schedule I (Form 990) & PETERSE Part II Continuation of Grants and Other		mestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	art 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
CITY OF FRANKLIN P. O. BOX 179 FRANKLIN, VA 23851		GOV	9,149.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
CITY OF MANASSAS UTILITIES 8500 PUBLIC WORKS DRIVE MANASSAS, VA 20110		goV	9,880.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
COLUMBIA GAS P. O. BOX 910 SMITHFIELD, PA 15478		N/A	46,055.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
DAVENPORT ENERGY 7 EDMUNDS STREET SOUTH BOSTON, VA 24592		N/A	18,839.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
DIVERSIFIED ENERGY NC 409B NORTH MAIN STREET RICH SQUARE, NC 27869		N/A	5,108.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
DOMINION ENERGY POB25339 5000 DOMINION BOULEVARD GLEN ALLEN, VA 23060		N/A	4,695,350.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
FERRELL GAS 3210 RAEFORD ROAD FAYETTEVILLE, NC 28303		N/A	5,694.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
HARRISONBURG ELECTRIC COMMISSI 89 WEST BRUCE STREET HARRISONBURG, VA 22801		N/A	55,797.	0,			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
MECKLENBURG ELEC, COOP 11633 VA-92 CHASE CITY, VA 23924		N/A	66,843.	0,			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE

UNITED WAY OF GREATER RICHMOND & PETERSBURG Schedule I (Form 990)

Schedule I (Form 990) WITED WA		rer Richmon	D			.2	23-7375346 Page 1
Part II Continuation of Grants and Other		nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	art 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
NORTHERN NECK ELECTRIC P. O. BOX 288 WARSAW, VA 22572	:	501(C)(12)	10,869.	0,			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
NORTHERN VIRGINIA ELECTRIC COO P. O. BOX 34795 ALEXANDRIA, VA 22334		501(C)(12)	66,326.	0.		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
PRINCE GEORGE ELECTRIC COOP, P. O. BOX 620 WAVERLY, VA 23890		501(C)(12)	11,451.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
PROJECT: HOMES 88 CARNATION STREET RICHMOND, VA 23225	54-1595851	501(C)(3)	35,314.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
RAPPAHANNOCK ELECTRIC COOPERAT P. O. BOX 34849 ALEXANDRIA, VA 22334		501(C)(12)	176,887.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
REED GAS & OIL/SUPERIOR PLUS 404 NC HIGHWAY 345 MANTEO, NC 27954		N/A	5,433.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
RICHMOND D.P.U 730 E. BROAD STREET RICHMOND, VA 23219		N/A	13,002.	0.	:		DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
ROANOKE ELECTRIC COOPERATIVE P. O. BOX 1326 AHOSKIE, NC 27910		501(C)(12)	37,692.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
ROCKBRIDGE FARMERS COOP. 33 YELLOW RAIL LANE LEXINGTON, VA 24450		501(C)(12)	11,003.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE

UNITED WAY OF GREATER RICHMOND & PETERSBURG

Schedule I (Form 990) WITED WAY Schedule I (Form 990)		rer richmon	D			2	13-7375346 Page 1
Part II Continuation of Grants and Other		nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		
(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
SHENANDOAH VALLEY ELECTRIC P. O. BOX 236 MT. CRAWFORD, VA 22841		501(C)(12)	80,824.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
SOUTHSIDE ELECTRIC COOP, P. O. BOX 7 CREWE, VA 23930		501(C)(12)	77,611.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
THE SALVATION ARMY HAMPTON 5525 RABY ROAD NORFOLK, VA 23501		501(C)(3)	10,000.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
TOWN OF CULPEPER 400 SOUTH MAIN STREET, SUITE 109 CULPEPER, VA 22701		gov	12,047.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
VIRGINIA BEACH COMMUNITY DEV. 2400 POTTERS ROAD VIRGINIA BEACH, VA 23454		501(C)(3)	6,391.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
VIRGINIA NATURAL GAS P. O. BOX 5409 CAROLSTREAM, IL 60197-5409		N/A	14,099.	0.	3		DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
WASHINGTON GAS P, O, BOX 37747 PHILADELPHIA, PA 19101		N/A	38,256.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
WOODFIN OIL CO P.O. BOX 90308 RICHMOND, VA 23230		N/A	8,369.	0.			DONOR DIRECTS FUNDS(DESIGNATIONS) FOR ENERGY SHARE
ACCESS NOW, INC. 2821 EMERYWOOD PARKWAY RICHMOND, VA 23219	26-1695468	501(C)(3)	19,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES Schedule /Form 990)

UNITED WAY OF GREATER RICHMOND & PETERSBURG Schedule I (Form 990)

Schedule I (Form 990) & PETERSBY		TER RICHMONI)			2	3-7375346 Page 1
Part II Continuation of Grants and Other A	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	art 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
ART 180 114 W. MARSHALL STREET RICHMOND, VA 23220	54-1935207	501(C)(3)	20,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES
BETTER HOUSING COALITION P. O. BOX 12117 RICHMOND, VA 23241	54-1479059	501(C)(3)	19,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
BIG BROTHERS BIG SISTERS SERVICES, INC 1707 SUMMIT AVENUE, SUITE 200 - RICHMOND, VA 23230	54-0702502	501(C)(3)	20,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
BOYS & GIRLS CLUBS OF METRO RICHMOND - 5511 STAPLES MILL ROAD, SUITE 301 - RICHMOND, VA 23238	54-0564901	501(C)(3)	91,600.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL FURPOSES
CARITAS P. O. BOX 25790 RICHMOND, VA 23260	54-1441917	501(C)(3)	20,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES
CHILDREN'S HOME SOCIETY OF VIRGINIA - 4200 FITZHUGH AVENUE - RICHMOND, VA 23230	54-0505884	501(C)(3)	19,000.	0,			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
CHILDSAVERS 200 NORTH 22ND STREET RICHMOND, VA 23223	54-0505927	501(C)(3)	69,000.	0.		:	DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
CIRCLE CENTER ADULT DAY SERVICES 4900 WEST MARSHALL STREET RICHMOND, VA 23230	54-0991287	501(C)(3)	19,200.	0.	1		DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
COMMONWEALTH CATHOLIC CHARITIES 1601 ROLLING HILLS DRIVE HENRICO, VA 23229	54-0505877	501(C)(3)	35,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES

UNITED WAY OF GREATER RICHMOND & PETERSBURG

UNITED WAY Schedule I (Form 990) & PETERSBU		TER RICHMONI	D			2	3-7375346 Page 1
Part II Continuation of Grants and Other A		nestic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS OF CHESTERFIELD - P. O. BOX 10 - CHESTERFIELD, VA 23832	46-0651192	501(C)(3)	53,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES
COMMUNITIES IN SCHOOLS OF RICHMOND 2922 WEST MARSHALL STREET 2ND FLOOR RICHMOND, VA 23230	54-1799922	501(C)(3)	41,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
CROSSOVER HEALTHCARE MINISTRY 8600 QUIOCCASIN ROAD, SUITE 102 RICHMOND, VA 23229	54-1371067	501(C)(3)	38,000.	0,			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
DAILY PLANET HEALTH SERVICES 517 WEST GRACE STREET RICHMOND, VA 23220	54-0900368	501(C)(3)	26,700.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
FAMILY LIFELINE 2325 WEST BROAD STREET RICHMOND, VA 23220	54-0737133	501(C)(3)	214,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL FURPOSES
FEED MORE 1415 RHOADMILLER STREET RICHMOND, VA 23220	54-1150923	501(C)(3)	19,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
FRIENDS ASSOCIATION FOR CHILDREN 1004 SAINT JOHN STREET RICHMOND, VA 23220	54-0505899	501(C)(3)	92,800.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
GOOCHLANDCARES P. O. BOX 116 GOOCHLAND, VA 23063	54-1967650	501(C)(3)	19,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
GREATER RICHMOND SCAN (STOP CHILD ABUSE NOW) - 103 EAST GRACE STREET - RICHMOND, VA 23219	54-1584969	501(C)(3)	35,600.	0.	int and		DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES

UNITED WAY OF GREATER RICHMOND

54-1137164 501(C)(3)

23-7375346 Page 1 & PETERSBURG Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (e) Amount of (f) Method of (g) Description of (h) Purpose of grant (c) IRC section if applicable (a) Name and address of (b) EIN (d) Amount of valuation (book, FMV, appraisal, other) noncash or assistance cash grant organization or government assistance OONOR DIRECT FUNDS HANOVER SAFE PLACE (DESIGNATIONS) FOR 629A NORTH WASHINGTON HWY GENERAL PURPOSES 31-1415701 501(C)(3) 38,000 0 ASHLAND, VA 23005 DONOR DIRECT FUNDS HEALTH BRIGADE (DESIGNATIONS) FOR 1010 NORTH THOMPSON STREET GENERAL PURPOSES 54-0927792 501(C)(3) 26,700 0 RICHMOND, VA 23230 OONOR DIRECT FUNDS HIGHER ACHIEVEMENT (DESIGNATIONS) FOR 4009 FITZHUGH AVENUE GENERAL PURPOSES 20,000. 0 52-1383374 501(C)(3) RICHMOND, VA 23230 OONOR DIRECT FUNDS HOMEWARD (DESIGNATIONS) FOR 1125 COMMERCE ROAD GENERAL PURPOSES 05-0606153 501(C)(3) 38,000. 0 RICHMOND, VA 23224 DONOR DIRECT FUNDS HOUSING FAMILIES FIRST (DESIGNATIONS) FOR 3900 NINE MILE ROAD 54,000. GENERAL PURPOSES 54-1995917 501(C)(3) ٥ HENRICO, VA 23223 DONOR DIRECT FUNDS JEWISH FAMILY SERVICES (DESIGNATIONS) FOR P. O. BOX 17128 GENERAL PURPOSES RICHMOND, VA 23226 54-0526201 501(C)(3) 44,200. 0 DONOR DIRECT FUNDS NEXTUP (DESIGNATIONS) FOR 3409 MOORE STREET GENERAL PURPOSES 47-4933093 501(C)(3) 20,000. 0 RICHMOND, VA 23230 OONOR DIRECT FUNDS OAR OF RICHMOND, INC. (DESIGNATIONS) FOR 3111 WEST CLAY STREET ٥. GENERAL PURPOSES 54-0974305 501(C)(3) 53,000. RICHMOND, VA 23230 DONOR DIRECT FUNDS PETER PAUL DEVELOPMENT CENTER (DESIGNATIONS) FOR 1708 NORTH 22ND STREET

Schedule I (Form 990)

GENERAL PURPOSES

RICHMOND, VA 23223

20,000.

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		rER RICHMONI)			2	3-7375346 Page 1
Schedule I (Form 990) & PETERSBU Part II Continuation of Grants and Other A		noetic Organizations	and Domestic Go	vernments (Sche	edule I (Form 990), Pa		J-7373340 Fage I
Part II Continuation of Grants and Other A (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
PRESBYTERIAN HOMES & FAMILY SERVICES, INC. DBA HUMANKIND - 908 NORTH THOMPSON STREET - RICHMOND, VA 23230	54-0346118	501(C)(3)	18,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
PROGRESSIVE ADULT REHABILITATION CENTER, INC - 114 NORTH UNION STREET - PETERSBURG, VA 23803	54-0836365	501(C)(3)	18,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
PROJECT:HOMES 88 CARNATION STREET RICHMOND, VA 23225	54-1595851	501(C)(3)	19,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
THRIVE VIRGINIA (FORMERLY QUIN RIVERS) - 7911 COURTHOUSE WAY - NEW KENT, VA 23124	54-0880233	501(C)(3)	43,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
READING AND EDUCATION FOR ADULT DEVELOPMENT, INC 4915 RADFORD AVENUE #204 - RICHMOND, VA 23230	54-1364885	501(C)(3)	18,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES
SACRED HEART CENTER, INC 1400 PERRY STREET RICHMOND, VA 23224	54-1590419	501(C)(3)	36,600.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
SENIOR CONNECTIONS 24 EAST CARY STREET RICHMOND, VA 23219	54-0950714	501(C)(3)	19,200.	0.	:		DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
SOAR365 (FORMERLY GREATER RICHMOND ARC) - 3600 SAUNDERS AVENUE - RICHMOND, VA 23227	54-0629691	501(C)(3)	56,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES
SOUTH RICHMOND ADULT DAY CARE CENTER - 1500 HULL STREET - RICHMOND, VA 23224	51-0163293	501(C)(3)	19,200.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES Schedule I (Form 990)

Schedule I (Form 990)

54-0505986 501(C)(3)

23-7375346 Page 1 & PETERSBURG Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (c) IRC section if applicable (e) Amount of (f) Method of (h) Purpose of grant (b) EIN (g) Description of (a) Name and address of (d) Amount of cash grant noncash assistance valuation (book, FMV, non-cash assistance or assistance organization or government appraisal, other) OONOR DIRECT FUNDS SOUTHSTDE COMMUNITY DEVELOPMENT DESIGNATIONS) FOR HOUSING CORPORATION - 1624 HULL 54-1480544 501(C)(3) 28,000. GENERAL PURPOSES STREET - RICHMOND, VA 23224 OONOR DIRECT FUNDS ST. JOSEPH'S VILLA (DESIGNATIONS) FOR 8000 BROOK ROAD GENERAL PURPOSES 39,000. RICHMOND, VA 23227 54-0505950 501(C)(3) 0 OONOR DIRECT FUNDS THE LITERACY LAB (DESIGNATIONS) FOR 2920 WEST BROAD STREET, SUITE 111 0. GENERAL PURPOSES 27-1777117 501(C)(3) 49,800. RICHMOND, VA 23230 DONOR DIRECT FUNDS THE SALVATION ARMY (DESIGNATIONS) FOR 2 WEST GRACE STREET GENERAL PURPOSES RICHMOND, VA 23220 58-0660607 501(C)(3) 45,000 0 OONOR DIRECT FUNDS VIRGINIA DENTAL ASSOCIATION (DESIGNATIONS) FOR FOUNDATION - 3460 MAYLAND COURT, 54-1821602 501(C)(3) 19,200 0 SENERAL PURPOSES SUITE 110 - RICHMOND, VA 23454 DONOR DIRECT FUNDS VIRGINIA LISC (DESIGNATIONS) FOR 413 STUART CIRCLE GENERAL PURPOSES 13-3030229 501(C)(3) 23,000 0 RICHMOND, VA 23220 DONOR DIRECT FUNDS MENTOR VIRGINIA (DESIGNATIONS) FOR 2500 WEST BROAD STREET 20,000. ٥. GENERAL PURPOSES 54-1814823 501(C)(3) RICHMOND, VA 23220 DONOR DIRECT FUNDS VIRGINIA SUPPORTIVE HOUSING (DESIGNATIONS) FOR ENERGY 5008 MONUMENT AVENUE SHARE 54-1444564 501(C)(3) 5,497 0 RICHMOND, VA 23230 DONOR DIRECT FUNDS YMCA OF GREATER RICHMOND (DESIGNATIONS) FOR 2 WEST FRANKLIN STREET, 2ND FLOOR

Schedule I (Form 990)

GENERAL PURPOSES

RICHMOND, VA 23220

60,200.

23-7375346 Page 1 & PETERSBURG Schedule I (Form 990) Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.) (e) Amount of (f) Method of (c) IRC section (d) Amount of (g) Description of (h) Purpose of grant (a) Name and address of (b) EIN valuation (book, FMV, appraisal, other) if applicable cash grant noncash non-cash assistance or assistance organization or government assistance OONOR DIRECT FUNDS YWCA RICHMOND (DESIGNATIONS) FOR 6 NORTH 5TH STREET 54-0506493 501(C)(3) GENERAL PURPOSES 114,800 RICHMOND, VA 23219 DONOR DIRECT FUNDS AMELIA COUNTY DSS (DESIGNATIONS) FOR ENERGY 16360 DUNN ROAD SHARE AMELIA COURT HOUSE, VA 23002 VOE 7,000. 0 DONOR DIRECT FUNDS BUFFALO GAS (DESIGNATIONS) FOR ENERGY 409 MAIN STREET SHARE 6,214 0. BUFFALO, NY 14203 N/A DONOR DIRECT FUNDS CADA COMMUNITY SERVICE CTR INC. (DESIGNATIONS) FOR ENERGY 116 B WEST THIRD STREET SHARE ROANOKE RAPIDS, NC 27870 501(C)(3) 13,000. 0 DONOR DIRECT FUNDS CRAIG-BOTETOURT ELECTRIC (DESIGNATIONS) FOR ENERGY COOPERATIVE - 26198 GRAIG CREEK 10,497 501(C)(3) 0 ROAD - NEW CASTLE, VA 24127 DONOR DIRECT FUNDS D&H CONSTRUCTION SERVICES INC. (DESIGNATIONS) FOR ENERGY 711 HOSPITAL STREET 68,036. 0 SHARE RICHMOND, VA 23219 N/A DONOR DIRECT FUNDS E.M. GRAY & SONS, INC. (DESIGNATIONS) FOR ENERGY 16440 INDUSTRIAL DRIVE 11,183. SHARE 0. MILFORD, VA 22514 N/A DONOR DIRECT FUNDS JAY INVESTMENT CORP (DESIGNATIONS) FOR ENERGY 1504 PINE GROVE LANE 112,062. 0 SHARE CHESAPEAKE, VA 23321 54-1954230 N/A DONOR DIRECT FUNDS NEW DIXIE OIL CORPORATION NC (DESIGNATIONS) FOR ENERGY P.O. BOX 779

Schedule I (Form 990)

ROANOKE RAPIDS, NC 27870

12,495.

N/A

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UNITED WAY OF GREATER RICHMOND & PETERSBURG 23-7375346 Page 1

Part II Continuation of Grants and Other /	Assistance to Dor	nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.) T	
(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
PRINCE EDWARD COUNTY DSS 56 SMI WAY, SUITE B FARMVILLE, VA 23901		gov	7,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR ENERG SHARE
SALVATION ARMY-FREDERICKSBURG 2014-C LAFAYETTE BLVD FREDERICKSBURG, VA 22401		501(C)(3)	6,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR ENERG SHARE
TOWN OF FRONT ROYAL 101 NORTH FRONT STREET HAMILTON, NC 27840		gov	10,500.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR ENERG SHARE
VIRGINIA DEPT FOR AGING & REHAB SERVICES - 8004 FRANKLIN FARMS DRIVE - RICHMOND, VA 23229		gov	20,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR ENERG SHARE
WILLIAM NICKERSON		N/A	6,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR ENERG
BOYS TO MEN MENTORING NETWORK OF VIRGINIA - 12311 STANCROFT ROAD - ROCKVILLE, VA 23146	27-2354386	501(C)(3)	20,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
CHESTERFIELD COLONIAL HEIGHTS ALLIANCE - P.O. BOX 1741 - CHESTERFIELD, VA 23832	54-1491582	501(C){3}	19,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
COMMUNITIES IN SCHOOLS OF PETERSBURG - 7911 COURTHOUSE WAY - NEW KENT, VA 23124	54-0880233	501(C)(3)	19,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
PARTNERSHIP FOR HOUSING AFFORDABILITY - 8975 THREE CHOPT ROAD - RICHMOND, VA 23229	80-0099199	501(C)(3)	19,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES

Schedule I (Form 990)

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Schedule I (Form 990) & PETERSE		IER RICHMON				2	3-7375346 Page 1
Part II Continuation of Grants and Other		nestic Organizations	and Domestic Go	vernments (Sch	edule I (Form 990), Pa	rt II.)	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERSHIP FOR THE FUTURE 4521 HIGHWOODS PARKWAY GLEN ALLEN, VA 23060	31-1482889	501(C)(3)	18,800.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
REAL LIFE P.O. BOX 27372 RICHMOND, VA 27372	37-1797980	501(C)(3)	19,000.	0.	,	<u> </u>	DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
VIRGINIA HOME FOR BOYS AND GIRLS 8716 W. BROAD STREET HENRICO, VA 23294	54-0506330	501(C)(3)	19,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR GENERAL PURPOSES
VIRGINIA SUPPORTIVE HOUSING 5008 MONUMENT AVENUE RICHMOND, VA 23230	54-1444564	501(C)(3)	34,000.	0.			DONOR DIRECT FUNDS (DESIGNATIONS) FOR SENERAL PURPOSES

Schedule I (Form 990)

Schedule I (For	m 990) 2023 & PETERSBURG					23-7375346	Page 2
	ants and Other Assistance to Domestic Individuals t III can be duplicated if additional space is needed.	. Complete if the	organization answ	ered "Yes" on Form 9	90, Part IV, line 22.		
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash	assistance
Part IV Su	pplemental Information. Provide the information rec	uired in Part I, lir	ne 2; Part III, column	n (b); and any other ac	ditional information.		
PART I,	LINE 2:						
WE BELII	EVE IN COMPREHENSIVE SOLUTI	ONS TO CO	MBAT OUR I	REGION'S MO	ST PRESSING		
ISSUES.	THROUGH OUR STEPS TO SUCCE	SS GRANTS	s, LOCAL N	ONPROFIT AG	ENCIES CAN		
APPLY FO	OR FUNDING TO HELP US REACH	A COMMON	GOAL OF	BETTERING O	ŪR		
COMMUNIT	ries. Every program funded	THROUGH	A GRANT I	S MONITORED	, EVALUATED		
AND MEAS	SURED FOR EFFECTIVENESS, IN	THIS WAY	, UNITED I	WAY VALIDAT	ES THAT		
INVESTM	ENTS GET RESULTS AND MAKE A	DIFFERE	NCE WHERE	IT MATTERS	MOST. THE		
	ATIONS THAT RECEIVED \$5,000						
	 						

Part IV Supplemental Information
UNITED WAY RELIES ON VOLUNTEERS TO SUPPORT THE FUNDING PROCESS. THE
COMMUNITY IMPACT COMMITTEE IS STAFFED BY A GROUP OF DEDICATED VOLUNTEERS.
THE COMMUNITY IMPACT COMMITTEE, A SUB-COMMITTEE OF UNITED WAY'S BOARD OF
DIRECTORS, UNDERSTANDS BOTH UNITED WAY'S STRATEGIC FRAMEWORK AND THE
EVER-CHANGING NEEDS OF THE REGION. THE GROUP REVIEWS DATA, RESEARCH AND
BEST PRACTICES AND MAINTAIN PERIODIC CONTACT WITH FUNDED PROGRAMS AND
AGENCIES. THE COMMUNITY IMPACT COMMITTEE IS RESPONSIBLE FOR HOLDING MONTHLY
MEETINGS TO MONITOR AND ASSESS COMMUNITY AND HUMAN SERVICE NEEDS AND MAKING
RECOMMENDATIONS THAT ENABLE UNITED WAY TO EFFECTIVELY ALLOCATE RESOURCES.
FUNDING IS MADE POSSIBLE THROUGH THE GENEROUS GIFTS FROM DONORS WHO GIVE
THROUGH WORKPLACE CAMPAIGNS OR MAKE INDIVIDUAL GIFTS.

SCHEDULE J (Form 990)

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.

2023

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

UNITED WAY OF GREATER RICHMOND

& PETERSBURG

Part I Questions Regarding Compensation

Employer identification number 23-7375346

			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			4800
		1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,		NEW Y	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's			
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director, but explain in Part III.			
	Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Independent compensation consultant ☐ Independent compensation consultant			
	X Form 990 of other organizations X Approval by the board or compensation committee			
	The second of the organization of the second			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
•	organization or a related organization:			
а		4a		Х
b	The state of the s	4b		Х
		4c		X
·	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			2012
	11 165 to dity of lifted 42 of list the percent and provide the applicable amounts is: each term in the second and provide the applicable amounts is:			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5				
J	contingent on the revenues of:			
_	· ·	5a		X
a h	Any related organization?	5b		Х
IJ	If "Yes" on line 5a or 5b, describe in Part III.		133	
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
0	contingent on the net earnings of:			
_		6a		X
a	The organization? Any related organization?	6b		X
a	,		14.5	1 1888
.,	If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments			
7		7		X
_	not described on lines 5 and 6? If "Yes," describe in Part III		 	†
8		8		x
_	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		34833	1
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in	9	100000	
	Regulations section 53.4958-6(c)?	<u> </u>	<u> </u>	1

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

Schedule J (Form 990) 2023

Schedule J (Form 990) 2023 & PETERSBURG 23-7375346

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

Page 2

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 (E)(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.

			(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)	
VP OF PROGRAMS & ADMIN (ii) O.	(A) Name and Title		(i) Base compensation	incentive	reportable	compensation			reported as deferred on prior Form 990	
VP OF PROGRAMS & ADMIN (i)	(1) ANGELA OTTO	(i)	148,904.	25,000.	0.	13,203.			0.	
	VP OF PROGRAMS & ADMIN			0.	0.	0.	0.	0.	0.	
		(i)								
									<u> </u>	
		(i)								
		(i)								
						1				
		(i)								
(i) (i) (ii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiiii) (iiiiiiii		(ii)								
		(i)								
(i) (ii) (iii) (ii										
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Schedule J (Form 990) 2023

UNITED WAY OF GREATER RICHMOND & PETERSBURG

UNITED WAY OF GREATER RICHMOND Schedule J (Form 990) 2023 & PETERSBURG	23-7375346	Page 3
	20 ,5,552	1 4930
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also com	plete this part for any additional informat	tion.
ר נטינטס וווס ווווטווומנוטון, פאףומומנוטון, טו טסטווףנוטווס וסקטווסט וטרר שנין ווווסס רם, דט, ט, דמ, דט, טמ, טט, טען טט, די, שוט טן שוט וטרר שני וויריוטט טטווו	,,	
	Schedule J.I.	Form 990) 2023

SCHEDULE M (Form 990)

Noncash Contributions

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

Attach to Form 990.

2023
Open to Public Inspection

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization UNITED

UNITED WAY OF GREATER RICHMOND & PETERSBURG

Employer identification number 23-7375346

Par	ti Types of Property			,		7-13		
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o noncash cont	(d) f determining ribution amo		
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			Laures vinner				
8	Intellectual property							
9	Securities - Publicly traded	X	9	73,228.	NYSE			
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		ļ					
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 (<u> </u>			L			
29	Number of Forms 8283 received by the organi							
	for which the organization completed Form 82	83, Part V,	Donee Acknowled	gement 29		Т	V I	NI-
					1.00 15 11	4000	Yes	No
30a	During the year, did the organization receive b	y contributi	on any property re	oorted in Part I, lines 1 throug	gn 28, that it			
	must hold for at least 3 years from the date of					00-	4241-251	Х
	exempt purposes for the entire holding period	?				30a	Harris	<u> </u>
b	If "Yes," describe the arrangement in Part II.				···0		N/2+1-11	х
31	Does the organization have a gift acceptance					31		
32a	Does the organization hire or use third parties					200		x
	contributions?					32a	AN INC.	- 22
	If "Yes," describe in Part II.	1			alcad			
33	If the organization didn't report an amount in o	column (c) f	or a type of proper	y for which column (a) is che	скеа,			1 Marie 1
	describe in Part II.					5,5,3,5		

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

Schedule M (Form 990) 2023

Schedule M	1 (Form 990) 2023 & PETERSBURG	23-7375346	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33 is reporting in Part I, column (b), the number of contributions, the number of items received, or a comthis part for any additional information.	and whether the organiza	tion
	this part for any additional information.		
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			-WANGE SPIESS
332142 09-1	1-23	Schedule M (For	m 990) 202

SCHEDULE 0 (Form 990)

Department of the Treasury

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.

Open to Public Inspection

Name of the organization

UNITED WAY OF GREATER RICHMOND & PETERSBURG

Employer identification number 23-7375346

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
CARING POWER OF OUR LOCAL COMMUNITIES TO HELP THOSE IN NEED AND TO
CREATE OPPORTUNITIES FOR ALL PEOPLE TO THRIVE.
FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:
PROGRAM, 200 STUDENTS HAVE BENEFITTED SINCE 2019. 81% OF STUDENTS
IMPROVED ACADEMIC SKILLS WHILE AT CAMP. THIS PROGRAM IS NOW A PERMANENT
PART OF DINWIDDIE AND POWHATAN PUBLIC SCHOOLS.
FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
40 YEARS, DOMINION ENERGY HAS PARTNERED WITH UNITED WAY TO PROVIDE
FINANCIAL MANAGEMENT OF THE ENERGY SHARE PROGRAM. SINCE THE PROGRAM'S
INCEPTION, ENERGYSHARE HAS SUPPORTED OVER 908,000 INDIVIDUALS AND
FAMILIES.
FORM 990, PART VI, SECTION A, LINE 2:
JOSH DARE, BOARD MEMBER, IS AN OWNER OF HODGES PARTNERSHIP, WHO IS A
MARKETING AND COMMUNITCATIONS VENDOR OF THE ORGANIZATION
FORM 990, PART VI, SECTION B, LINE 11B:
THE DRAFT OF THE FORM 990 IS PROPOSED TO THE AUDIT COMMITTEE BY MANAGEMENT.
ONCE THE AUDIT COMMITTEE APPROVES IT, THE FORM 990 IS DISTRIBUTED TO THE
BOARD OF DIRECTORS FOR REVIEW. AFTER REVIEW BY THE BOARD OF DIRECTORS, THE
FORM 990 IS FILED WITH THE IRS.

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

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

Schedule O (Form 990) 2023