

PUBLIC DISCLOSURE COPY

October 30, 2023

United Way of Southeast Louisiana
2401 Canal St
New Orleans, LA 70119

United Way of Southeast Louisiana:

Enclosed are the original and one copy of the 2022 Exempt Organization return, as follows...

2022 Form 990

Each original should be dated, signed and filed in accordance with the filing instructions. The copy should be retained for your files.

Sincerely,

EAG Gulf Coast, LLC

TAX RETURN FILING INSTRUCTIONS

FORM 990

FOR THE YEAR ENDING

June 30, 2023

Prepared For:

United Way of Southeast Louisiana
2401 Canal St
New Orleans, LA 70119

Prepared By:

EAG Gulf Coast, LLC
One Galleria Blvd., Ste 2100
Metairie, LA 70001

Amount Due or Refund:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

Not applicable

Return Must be Mailed On or Before:

Not applicable

Special Instructions:

This copy of the return is provided ONLY for Public Disclosure purposes. Any confidential information regarding large donors has been removed.

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

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

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

2022

Open to Public Inspection

A For the 2022 calendar year, or tax year beginning **JUL 1, 2022** and ending **JUN 30, 2023**

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization UNITED WAY OF SOUTHEAST LOUISIANA		D Employer identification number 72-0471369
	Doing business as		E Telephone number 504-822-5540
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	2401 CANAL ST		G Gross receipts \$ 14,257,952.
	City or town, state or province, country, and ZIP or foreign postal code NEW ORLEANS, LA 70119		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: MICHAEL WILLIAMSON SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			If "No," attach a list. See instructions
J Website: UNITEDWAYSELA.ORG			H(c) Group exemption number
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		L Year of formation: 1952	M State of legal domicile: LA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO ERADICATE POVERTY IN SOUTHEAST LOUISIANA.		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	34
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	34
	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	58
	6 Total number of volunteers (estimate if necessary)	6	1704
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	12,936,053.	13,557,597.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	103,923.	85,851.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,050,938.	516,733.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,747,502.	9,127.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	17,838,416.	14,169,308.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	6,457,143.	9,060,923.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	4,468,748.	4,819,441.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	1,407,693.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,937,548.	2,605,287.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,863,439.	16,485,651.	
19 Revenue less expenses. Subtract line 18 from line 12	3,974,977.	-2,316,343.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	29,969,457.	29,408,603.
	22 Net assets or fund balances. Subtract line 21 from line 20	4,919,656.	5,908,163.
22 Net assets or fund balances. Subtract line 21 from line 20	25,049,801.	23,500,440.	

Part II Signature Block

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

Sign Here	Signature of officer		Date		
	DEBRA MODLIN, CFO				
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN
	SHARON CASSIERE				P00543368
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	EAG GULF COAST, LLC	92-3320348		(504) 837-5990	
	Firm's address				
	ONE GALLERIA BLVD., STE 2100				
	METAIRIE, LA 70001				

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: UNITED WAY OF SOUTHEAST LOUISIANA (UWSELA) IS A NOT-FOR-PROFIT 501(C)(3) CHARITABLE ORGANIZATION FOUNDED IN 1952 SERVING RESIDENTS OF JEFFERSON, ORLEANS, PLAQUEMINES, ST. BERNARD, ST. TAMMANY, TANGIPAHOA AND WASHINGTON PARISHES AND GOVERNED BY A VOLUNTEER BOARD. UWSELA'S

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 7,536,632. including grants of \$ 6,023,087.) (Revenue \$ 136,059.) COMMUNITY IMPACT - STRATEGIC PLANNING & FUND DISTRIBUTION:

UNITED WAY OF SOUTHEAST LOUISIANA (UWSELA) HAS A BOLD VISION FOR ERADICATING POVERTY IN SELA. GRANT-MAKING SUPPORTS THE VISION OF "EQUITABLE COMMUNITIES WHERE ALL INDIVIDUALS ARE HEALTHY, EDUCATED AND ECONOMICALLY STABLE." THIS MEANS BOTH A SHARPENED FOCUS ON POVERTY THROUGH SUPPORTING THE CRITICAL PROGRAMS THAT FORM THE BEDROCK OF SERVING OUR POPULATION, AND A SYSTEMS CHANGE APPROACH CENTERED ON COLLABORATION. OUR GRANT-MAKING IS ROOTED IN ADDRESSING THE COMPLEX INTERPLAY OF SYMPTOMS AND DRIVERS OF POVERTY IN THE REGION. IN 2016, UNITED WAY LAUNCHED ITS FIRST CYCLE OF GRANTS TO SUPPORT PROGRAMS AND GROUPS WORKING TOGETHER IN A COLLABORATIVE WAY TO ADDRESS THE OUTCOMES

4b (Code:) (Expenses \$ 2,045,005. including grants of \$ 1,939,200.) (Revenue \$) ENTERGY UTILITY ASSISTANCE:

ENTERGY CUSTOMERS WHO APPLIED FOR THE CREDIT FOR THEIR ENERGY BILL FROM ENTERGY RECEIVED A ONE-TIME CREDIT OF \$150.

TO QUALIFY, CUSTOMERS MUST HAVE A TOTAL HOUSEHOLD INCOME OF UP TO 250% OF THE FEDERAL POVERTY LEVEL, WHICH EQUATES TO \$69,000 FOR A FAMILY OF FOUR.

UWSELA SERVED 12,928 ENTERGY CUSTOMERS IN JEFFERSON, ORLEANS, PLAQUEMINES, WASHINGTON, TANGIPAHOA AND ST. TAMMANY PARISH.

4c (Code:) (Expenses \$ 1,503,667. including grants of \$ 321,627.) (Revenue \$) DISASTER RELIEF:

IN AUGUST 2021, HURRICANE IDA MADE LANDFALL IN SOUTHEAST LOUISIANA AS ONE OF THE STRONGEST STORMS TO EVER HIT OUR STATE. UNITED WAY OF SOUTHEAST LOUISIANA (UWSELA) COORDINATED IMMEDIATE RELIEF EFFORTS, AND CONTINUES TO INVEST IN LONG-TERM RECOVERY WITH OVER \$1.3 MILLION COMMITTED TO THE WORK TO DATE. THROUGHOUT THE SEVEN PARISHES WE SERVE, WE CONTINUE TO WORK IN CONCERT WITH PARTNERS TO SUPPORT LONG-TERM RECOVERY GROUPS (LTRG), INCLUDING KEY NONPROFITS, FAITH-BASED, BUSINESS, AND GOVERNMENT PARTNERS. EACH PARISH'S GROUP REFLECTS THE UNIQUE NATURE OF ITS COMMUNITIES WHILE MAINTAINING A SHARED GOAL: IDENTIFY LOCAL DISPARITIES AND GAPS IN SERVICES AND PROVIDE UNMET

4d Other program services (Describe on Schedule O.) (Expenses \$ 3,118,948. including grants of \$ 777,009.) (Revenue \$)

4e Total program service expenses 14,204,252.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

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

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a	51
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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

Table with columns for question number, question text, and Yes/No response boxes. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 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.		
	1a 34		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 34		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?	X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed NONE
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records
DEBRA MODLIN - 504-822-5540
2401 CANAL ST, NEW ORLEANS, LA 70119

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
 - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
 - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
 - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- See the instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MICHAEL WILLIAMSON PRESIDENT/CEO	37.50			X				301,654.	0.	51,923.
(2) CHARMAINE CACCIOPPI EVP/COO	37.50			X				235,732.	0.	29,382.
(3) DEBRA MODLIN CHIEF FINANCIAL OFFICER	37.50			X				140,547.	0.	41,911.
(4) MARY AMBROSE CHIEF EQUITY & IMPACT OFFICER	37.50					X		130,456.	0.	21,629.
(5) JAMENE DAHMER SR. VP, STRATEGIC WORKFORCE PARTNERS	37.50					X		117,510.	0.	20,695.
(6) MICHELLE PAYNE CHIEF STRATEGY OFFICER	37.50					X		107,952.	0.	27,678.
(7) CAROL GSTOHL CHIEF HUMAN RESOURCE OFFICER	37.50					X		116,159.	0.	18,899.
(8) CHIQUITA LATTIMORE SR. VP, CI-FINANCIAL CAPABILITY	37.50					X		102,196.	0.	20,619.
(9) JAMIE ALLEN TRUSTEE	4.00	X						0.	0.	0.
(10) DR. TOYA BARNES-TEAMER TRUSTEE	4.00	X						0.	0.	0.
(11) MATT BRADY TRUSTEE	4.00	X						0.	0.	0.
(12) JASON BYRD TRUSTEE	4.00	X						0.	0.	0.
(13) ELWOOD CAHILL TRUSTEE	4.00	X						0.	0.	0.
(14) LACEY CONWAY TRUSTEE	4.00	X						0.	0.	0.
(15) AYAME DINKLER TRUSTEE	4.00	X						0.	0.	0.
(16) ELIZABETH ELLISON-FROST TRUSTEE	4.00	X						0.	0.	0.
(17) KEN FLOWER TRUSTEE	4.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) BEATRICE FORLANO TRUSTEE	4.00	X					0.	0.	0.	
(19) NORMA GRACE TRUSTEE	4.00	X					0.	0.	0.	
(20) ROBERT KIMBRO AT-LARGE	4.00	X					0.	0.	0.	
(21) ATIM KAVI TRUSTEE	4.00	X					0.	0.	0.	
(22) TANDRA LEMAY AT-LARGE	4.00	X					0.	0.	0.	
(23) GARY LORIO TRUSTEE	4.00	X					0.	0.	0.	
(24) DR. ANNA MAHONEY TRUSTEE	4.00	X					0.	0.	0.	
(25) PAUL MATTHEWS TRUSTEE	4.00	X					0.	0.	0.	
(26) RON MCCLAIN AT-LARGE	4.00	X					0.	0.	0.	
1b Subtotal							1,252,206.	0.	232,736.	
c Total from continuation sheets to Part VII, Section A							0.	0.	0.	
d Total (add lines 1b and 1c)							1,252,206.	0.	232,736.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization 8

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
SERVPRO OF SAGINAW 407 N. ADAMS STREET, SAGINAW, MI 48604	MITIGATION SERVICES	332,724.
ROOF TECHNOLOGIES, INC. P.O. BOX 1328, HARVEY, LA 70059	CONSTRUCTION SERVICES	185,890.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) CATHY MCRAE TRUSTEE	4.00	X						0.	0.	0.
(28) SHELLY MAYER TRUSTEE	4.00	X						0.	0.	0.
(29) TARA RICHARD TRUSTEE	4.00	X						0.	0.	0.
(30) DEANNA RODRIGUEZ TRUSTEE	4.00	X						0.	0.	0.
(31) TARYN ROGERS TRUSTEE (THRU 10/2022)	4.00	X						0.	0.	0.
(32) TED RUDDOCK TRUSTEE	4.00	X						0.	0.	0.
(33) JENNIFER SABALLOS TRUSTEE	4.00	X						0.	0.	0.
(34) BRYAN SCOFIELD TRUSTEE	4.00	X						0.	0.	0.
(35) RACHEL SHIELDS TRUSTEE	4.00	X						0.	0.	0.
(36) ADRIENNE SLACK TRUSTEE	4.00	X						0.	0.	0.
(37) MICHAEL TODD TRUSTEE	4.00	X						0.	0.	0.
(38) OTIS TUCKER, JR. TRUSTEE	4.00	X						0.	0.	0.
(39) TOD SMITH IMMEDIATE PAST CHAIR	4.00	X		X				0.	0.	0.
(40) DR. TAKEISHA DAVIS CHAIR	4.00	X		X				0.	0.	0.
(41) RONNIE SLONE VICE CHAIR	4.00	X		X				0.	0.	0.
(42) BRAD FLEMING TREASURER	4.00	X		X				0.	0.	0.
(43) DERRICK MARTIN SECRETARY	4.00	X		X				0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a	Federated campaigns	1a				
	b	Membership dues	1b				
	c	Fundraising events	1c	156,124.			
	d	Related organizations	1d				
	e	Government grants (contributions)	1e	1,473,436.			
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	11,928,037.			
	g	Noncash contributions included in lines 1a-1f	1g	\$ 73,199.			
	h	Total. Add lines 1a-1f		13,557,597.			
Program Service Revenue	2 a	SERVICE FEE INCOME	Business Code				
			900099	85,851.	85,851.		
	b						
	c						
	d						
	e						
	f	All other program service revenue					
g	Total. Add lines 2a-2f		85,851.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)		517,189.		517,189.	
	4	Income from investment of tax-exempt bond proceeds					
	5	Royalties					
	6 a	Gross rents	6a	(i) Real			
				(ii) Personal			
	b	Less: rental expenses	6b				
	c	Rental income or (loss)	6c				
	d	Net rental income or (loss)					
	7 a	Gross amount from sales of assets other than inventory	7a	(i) Securities			
				(ii) Other			
	b	Less: cost or other basis and sales expenses	7b		456.		
	c	Gain or (loss)	7c		-456.		
d	Net gain or (loss)		-456.		-456.		
8 a	Gross income from fundraising events (not including \$ 156,124. of contributions reported on line 1c). See Part IV, line 18	8a		43,816.			
				81,301.			
b	Less: direct expenses	8b					
c	Net income or (loss) from fundraising events		-37,485.		-37,485.		
9 a	Gross income from gaming activities. See Part IV, line 19	9a		3,291.			
				6,887.			
b	Less: direct expenses	9b					
c	Net income or (loss) from gaming activities		-3,596.		-3,596.		
10 a	Gross sales of inventory, less returns and allowances	10a					
b	Less: cost of goods sold	10b					
c	Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	REFUNDS/REIMBURSEMENTS	Business Code				
			900099	50,208.	50,208.		
	b						
	c						
	d	All other revenue					
e	Total. Add lines 11a-11d		50,208.				
12	Total revenue. See instructions		14,169,308.	136,059.	0.	475,652.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 ...	5,591,546.	5,591,546.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	3,469,377.	3,469,377.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	818,064.	559,270.	154,077.	104,717.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	3,241,146.	2,173,993.	353,928.	713,225.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	154,578.	95,981.	17,794.	40,803.
9 Other employee benefits	344,684.	219,731.	38,659.	86,294.
10 Payroll taxes	260,969.	173,662.	32,193.	55,114.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	88,543.	48,298.	37,985.	2,260.
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	25,434.	16,034.	3,446.	5,954.
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	923,864.	826,425.	5,172.	92,267.
12 Advertising and promotion	163,126.	101,817.	21,770.	39,539.
13 Office expenses	586,664.	392,523.	26,016.	168,125.
14 Information technology				
15 Royalties				
16 Occupancy	284,278.	254,050.	8,676.	21,552.
17 Travel	107,601.	70,310.	9,148.	28,143.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials ...				
19 Conferences, conventions, and meetings	235,695.	169,542.	27,770.	38,383.
20 Interest				
21 Payments to affiliates	132,443.		132,443.	
22 Depreciation, depletion, and amortization	23,997.	17,260.	2,163.	4,574.
23 Insurance				
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a MEMBERSHIP DUES	23,972.	17,240.	1,646.	5,086.
b MISCELLANEOUS	9,670.	7,193.	820.	1,657.
c _____				
d _____				
e All other expenses _____				
25 Total functional expenses. Add lines 1 through 24e	16,485,651.	14,204,252.	873,706.	1,407,693.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,004,558.	1	401,402.
	2 Savings and temporary cash investments	9,463,875.	2	3,296,073.
	3 Pledges and grants receivable, net	2,798,424.	3	3,049,185.
	4 Accounts receivable, net		4	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges		9	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 522,569.		
	b Less: accumulated depreciation	10b 121,977.	49,058.	10c 400,592.
	11 Investments - publicly traded securities	12,444,354.	11	17,503,170.
	12 Investments - other securities. See Part IV, line 11	3,786,074.	12	3,920,386.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	423,114.	15	837,795.
16 Total assets. Add lines 1 through 15 (must equal line 33)	29,969,457.	16	29,408,603.	
Liabilities	17 Accounts payable and accrued expenses	343,051.	17	390,012.
	18 Grants payable		18	
	19 Deferred revenue	790,151.	19	739,347.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	3,786,454.	25	4,778,804.
	26 Total liabilities. Add lines 17 through 25	4,919,656.	26	5,908,163.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	19,640,177.	27	18,375,590.
	28 Net assets with donor restrictions	5,409,624.	28	5,124,850.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	25,049,801.	32	23,500,440.
33 Total liabilities and net assets/fund balances	29,969,457.	33	29,408,603.	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,169,308.
2	Total expenses (must equal Part IX, column (A), line 25)	2	16,485,651.
3	Revenue less expenses. Subtract line 2 from line 1	3	-2,316,343.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	25,049,801.
5	Net unrealized gains (losses) on investments	5	766,982.
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))	10	23,500,440.

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:			
<input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2b	Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:			
<input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis			
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

Form 990 (2022)

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	10274288.	14456408.	20025538.	12936053.	13557597.	71249884.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	10274288.	14456408.	20025538.	12936053.	13557597.	71249884.
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)						18832647.
6 Public support. Subtract line 5 from line 4.						52417237.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7 Amounts from line 4	10274288.	14456408.	20025538.	12936053.	13557597.	71249884.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	395,217.	206,753.	127,831.	496,041.	517,189.	1743031.
9 Net income from unrelated business activities, whether or not the business is regularly carried on			7,583.	565.		8,148.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	18,779.	11,479.	63,358.	1826248.	50,208.	1970072.
11 Total support. Add lines 7 through 10						74971135.
12 Gross receipts from related activities, etc. (see instructions)					12	423,945.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f))	14	69.92 %
15 Public support percentage from 2021 Schedule A, Part II, line 14	15	70.05 %
16a 33 1/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	<input type="checkbox"/>	

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2022 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2021 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2022 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage from 2021 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

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

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

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

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

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (<i>describe in Part VI</i>). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2022 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2022	(iii) Distributable Amount for 2022
1 Distributable amount for 2022 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2022			
a From 2017			
b From 2018			
c From 2019			
d From 2020			
e From 2021			
f Total of lines 3a through 3e			
g Applied to underdistributions of prior years			
h Applied to 2022 distributable amount			
i Carryover from 2017 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2022 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2022 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2023. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2018			
b Excess from 2019			
c Excess from 2020			
d Excess from 2021			
e Excess from 2022			

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

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

INSURANCE/SETTLEMENT PROCEEDS

2020 AMOUNT: \$ 45,141.

2021 AMOUNT: \$ 1,806,073.

REFUNDS/REIMBURSEMENTS

2018 AMOUNT: \$ 18,779.

2019 AMOUNT: \$ 11,479.

2020 AMOUNT: \$ 18,217.

2021 AMOUNT: \$ 20,175.

2022 AMOUNT: \$ 50,208.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2022

Name of the organization

UNITED WAY OF SOUTHEAST LOUISIANA

Employer identification number

72-0471369

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

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

General Rule

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

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization UNITED WAY OF SOUTHEAST LOUISIANA	Employer identification number 72-0471369
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>896,244.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>3,271,752.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>492,862.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>288,342.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>357,061.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>271,853.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF SOUTHEAST LOUISIANA	Employer identification number 72-0471369
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	_____ _____ _____	\$ <u>295,818.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	_____ _____ _____	\$ <u>400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	_____ _____ _____	\$ <u>500,822.</u>	Person <input checked="" type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF SOUTHEAST LOUISIANA	Employer identification number 72-0471369
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Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

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

Name of organization UNITED WAY OF SOUTHEAST LOUISIANA	Employer identification number 72-0471369
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
Go to www.irs.gov/Form990 for instructions and the latest information.

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

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

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

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

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

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

Name of organization

UNITED WAY OF SOUTHEAST LOUISIANA

Employer identification number

72-0471369

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

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

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

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

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

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

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

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

Schedule C (Form 990) 2022

LHA

232041 11-08-22

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)	47,480.													
b Total lobbying expenditures to influence a legislative body (direct lobbying)	16,722.													
c Total lobbying expenditures (add lines 1a and 1b)	64,202.													
d Other exempt purpose expenditures	16,421,449.													
e Total exempt purpose expenditures (add lines 1c and 1d)	16,485,651.													
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.	974,283.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f)	243,571.													
h Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
2a Lobbying nontaxable amount	904,476.	784,877.	843,172.	974,283.	3,506,808.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,260,212.
c Total lobbying expenditures	36,631.	51,532.	56,715.	64,202.	209,080.
d Grassroots nontaxable amount	226,119.	196,219.	210,793.	243,571.	876,702.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,315,053.
f Grassroots lobbying expenditures	26,165.	37,458.	43,056.	47,480.	154,159.

Schedule C (Form 990) 2022

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

Table with 4 columns: Description, (a) Yes, (a) No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation... 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

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

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

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

Table with 3 columns: Question, Yes, No. Rows include: 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditures next year? 5 Taxable amount of lobbying and political expenditures. See instructions

Part IV Supplemental Information

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

Blank lines for providing supplemental information as required by the instructions.

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

2022

Open to Public Inspection

Name of the organization UNITED WAY OF SOUTHEAST LOUISIANA Employer identification number 72-0471369

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

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

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

Form with multiple sections: 1. Purpose(s) of conservation easements (checkboxes for land, habitat, open space, historic structure). 2. Conservation contribution details (table with 2a-2d). 3-9. Monitoring and reporting requirements (checkboxes for policy, expenses, and reporting).

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form with sections 1a-1b and 2. 1a: Text of footnote for art collection. 1b: Amounts for art collection (revenue/assets). 2: Amounts for art collection for financial gain (revenue/assets).

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other _____
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	5,865,811.	6,746,267.	5,513,273.	5,659,498.	5,639,848.
b Contributions					
c Net investment earnings, gains, and losses	528,027.	-631,687.	1,469,008.	87,000.	246,896.
d Grants or scholarships	256,975.	248,769.	236,014.	233,225.	227,246.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	6,136,863.	5,865,811.	6,746,267.	5,513,273.	5,659,498.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment 63.6426 %
 - b Permanent endowment 28.6390 %
 - c Term endowment 7.7184 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|----|
| (i) Unrelated organizations | X | |
| (ii) Related organizations | | X |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | 3b | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		257,565.	2,959.	254,606.
c Leasehold improvements				
d Equipment		135,237.	72,987.	62,250.
e Other		129,767.	46,031.	83,736.
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				400,592.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) BENEFICIAL INTEREST IN		
(B) ASSETS HELD BY OTHERS	3,559,173.	END-OF-YEAR MARKET VALUE
(C) INVESTMENT IN COMMON		
(D) ENDOWMENT FUND OF GREATER		
(E) NEW ORLEANS FOUNDATION	361,213.	END-OF-YEAR MARKET VALUE
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	3,920,386.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ALLOCATIONS, DESIGNATIONS AND	
(3) PROGRAMS PAYABLE	4,517,988.
(4) LEASE LIABILITY	260,816.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	4,778,804.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ...

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

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

1	Total revenue, gains, and other support per audited financial statements		1	13,126,753.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	766,982.	
b	Donated services and use of facilities	2b	127,432.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	72,691.	
e	Add lines 2a through 2d	2e		967,105.
3	Subtract line 2e from line 1		3	12,159,648.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	44,563.	
b	Other (Describe in Part XIII.)	4b	1,965,097.	
c	Add lines 4a and 4b	4c		2,009,660.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	14,169,308.

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

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

1	Total expenses and losses per audited financial statements		1	14,676,114.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	127,432.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d	72,691.	
e	Add lines 2a through 2d	2e		200,123.
3	Subtract line 2e from line 1		3	14,475,991.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	44,563.	
b	Other (Describe in Part XIII.)	4b	1,965,097.	
c	Add lines 4a and 4b	4c		2,009,660.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	16,485,651.

Part XIII Supplemental Information.

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

PART V, LINE 4:

IN A PRIOR YEAR, UWSELA ESTABLISHED ENDOWMENT FUNDS TO RECEIVE AND INVEST FUNDS FOR THE BENEFIT OF UWSELA. MOST INCOME RECEIVED FROM THE ENDOWMENTS IS UNRESTRICTED AND WILL BE USED TO COVER OPERATING EXPENSES.

PART X, LINE 2:

UWSELA IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND FROM STATE INCOME TAXES UNDER SECTION 121(5) OF TITLE 47 OF THE LOUISIANA REVISED STATUTES OF 1950. ACCORDINGLY, NO PROVISION FOR INCOME TAXES HAS BEEN INCLUDED IN THE FINANCIAL STATEMENTS.

FASB ASC 740 PROVIDES DETAILED GUIDANCE FOR FINANCIAL STATEMENT

Part XIII Supplemental Information (continued)

RECOGNITION, MEASUREMENT, AND DISCLOSURE OF UNCERTAIN TAX POSITIONS

RECOGNIZED IN AN ENTITY'S FINANCIAL STATEMENT. AS OF JUNE 30, 2023, UWSELA HAS DETERMINED THAT IT DOES NOT HAVE ANY UNCERTAIN TAX POSITIONS THAT QUALIFY FOR EITHER RECOGNITION OR DISCLOSURE IN THE FINANCIAL STATEMENTS. TAX RETURNS GENERALLY REMAIN SUBJECT TO EXAMINATION BY THE TAXING AUTHORITIES FOR THREE YEARS.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 72,691.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATIONS 1,965,097.

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENT EXPENSES 72,691.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATIONS 1,965,097.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))	
		DE TOCQUEVILLE (event type)	GOT GUMBO (event type)	1 (total number)		
Revenue	1	Gross receipts	124,718.	40,666.	34,556.	199,940.
	2	Less: Contributions	99,473.	34,401.	22,250.	156,124.
	3	Gross income (line 1 minus line 2)	25,245.	6,265.	12,306.	43,816.
Direct Expenses	4	Cash prizes				
	5	Noncash prizes	14,633.	672.	734.	16,039.
	6	Rent/facility costs	17,209.		1,200.	18,409.
	7	Food and beverages	873.	19,360.		20,233.
	8	Entertainment	15,798.			15,798.
	9	Other direct expenses	7,587.	1,560.	1,675.	10,822.
	10	Direct expense summary. Add lines 4 through 9 in column (d)				81,301.
11	Net income summary. Subtract line 10 from line 3, column (d)				-37,485.	

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
Attach to Form 990.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Name of the organization **UNITED WAY OF SOUTHEAST LOUISIANA** Employer identification number **72-0471369**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
504HEALTHNET 2601 TULANE AVE SUITE 500 NEW ORLEANS, LA 70119	26-2831459	501(C)3	40,000.	0.			GRANT FUNDING
ABOUT FACE 3901 MACARTHUR BLVD NEW ORLEANS, LA 70114	86-3662144	501(C)3	6,843.	0.			GRANT FUNDING
ALGIERS ECONOMIC DEVELOPMENT FOUNDATION - 2401 WESTBEND PARKWAY STE. 3020 - NEW ORLEANS, LA 70114	72-1276640	501(C)3	10,000.	0.			GRANT FUNDING
AMERICAN RED CROSS - SE LA 3131 N I-10 SERVICE ROAD E, 4TH FL METAIRIE, LA 70002	72-0408907	501(C)3	58,353.	0.			GRANT FUNDING & DESIGNATED GIFTS
ARTS COUNCIL OF NEW ORLEANS P.O. BOX 58379 NEW ORLEANS, LA 70158	72-0778258	501(C)3	40,000.	0.			GRANT FUNDING
BOYS TOWN OF LOUISIANA, INC. 700 FRENCHMAN STREET NEW ORLEANS, LA 70116	41-2220807	501(C)3	24,518.	0.			GRANT FUNDING & DESIGNATED GIFTS

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 115.

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

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

Schedule I (Form 990) 2022

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CADA 3520 GENERAL DEGAULLE DR STE. 5010 NEW ORLEANS, LA 70114	72-0541502	501(C)3	50,910.	0.			GRANT FUNDING & DESIGNATED GIFTS
CANCER ASSOCIATION OF GNO 824 ELMWOOD PARK BLVD STE. 240 NEW ORLEANS, LA 70123	72-0517802	501(C)3	105,511.	0.			GRANT FUNDING & DESIGNATED GIFTS
CAPITAL AREA UNITED WAY, LA 700 LAUREL STREET BATON ROUGE, LA 70802	72-0447100	501(C)3	17,602.	0.			DESIGNATED GIFTS
CATHOLIC CHARITIES ARCHDIOCESE OF NEW ORLEANS - 2505 MAINE AVE - METAIRIE, LA 70003	72-0408911	501(C)3	93,470.	0.			GRANT FUNDING & DESIGNATED GIFTS
CENTER FOR EMPLOYMENT OPPORTUNITIES - 50 BROADWAY SUITE 1604 - NEW YORK, NY 10004	13-3843322	501(C)3	40,000.	0.			GRANT FUNDING
CENTER FOR INNOVATIVE TRAINING 1631 ELYSIAN FIELDS AVE SUITE 116 NEW ORLEANS, LA 70117	46-4516976	501(C)3	31,500.	0.			GRANT FUNDING & DESIGNATED GIFTS
CHILD ADVOCACY SERVICES 1504 W CHURCH STREET HAMMOND, LA 70401	72-1262466	501(C)3	6,234.	0.			GRANT FUNDING & DESIGNATED GIFTS
CHILDREN'S BUREAU OF NEW ORLEANS 400 LAFAYETTE ST STE. 140 NEW ORLEANS, LA 70130	72-0408916	501(C)3	91,661.	0.			GRANT FUNDING & DESIGNATED GIFTS
CLOVER (KINGSLEY HOUSE) 1600 CONSTANCE ST NEW ORLEANS, LA 70130	72-0408940	501(C)3	50,779.	0.			GRANT FUNDING & DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COLLEGE BEYOND 2000 LAKESHORE DRIVE, MILNEBURG 170 NEW ORLEANS, LA 70148	47-4670026	501(C)3	40,000.	0.			GRANT FUNDING
COLLEGE TRACK 111 BROADWAY SUITE 101 OAKLAND, CA 94607	94-3279613	501(C)3	75,200.	0.			GRANT FUNDING & DESIGNATED GIFTS
COMMUNITY CENTER OF ST. BERNARD 1107 LEBEAU ST ARABI, LA 70032	74-3173649	501(C)3	60,799.	0.			GRANT FUNDING & DESIGNATED GIFTS
CULTIVATING YOUTH 3445 TOLEDANO STREET NEW ORLEANS, LA 70125	85-3649914	501(C)3	8,000.	0.			GRANT FUNDING
DANCING GROUNDS 3705 SAINT CLAUDE AVE NEW ORLEANS, LA 70117	45-5084235	501(C)3	40,000.	0.			GRANT FUNDING
DENTAL LIFELINE NETWORK 1800 15TH STREET, UNIT 100 DENVER, CO 80202	74-2537604	501(C)3	20,100.	0.			GRANT FUNDING & DESIGNATED GIFTS
EAST ST. TAMMANY RAINBOW CHILD CARE CENTER, INC. - 121 KINGSPOINT BLVD - SLIDELL, LA 70461	72-1028297	501(C)3	25,453.	0.			GRANT FUNDING & DESIGNATED GIFTS
EDUCARE 320 JULIA STREET NEW ORLEANS, LA 70130	45-3788164	501(C)3	15,000.	0.			GRANT FUNDING
ELECTRIC GIRLS 2045 LAKESHORE DRIVE NEW ORLEANS, LA 70122	47-4765170	501(C)3	8,000.	0.			GRANT FUNDING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ETERNAL SEEDS 56 YELLOWSTONE DRIVE NEW ORLEANS, LA 70131	85-1699102	501(C)3	8,000.	0.			GRANT FUNDING
FAMILY VIOLENCE CENTER OF ST. BERNARD - 3010 JEAN LAFITTE PKWY - CHALMETTE, LA 70043	58-1834566	501(C)3	78,782.	0.			GRANT FUNDING & DESIGNATED GIFTS
FAUBOURG ST. ROCH 1738 ST. ROCH AVENUE NEW ORLEANS, LA 70117	71-1286723	501(C)3	8,000.	0.			GRANT FUNDING
FIRST 72 2915 PERDIDO STREET NEW ORLEANS, LA 70119	47-1833909	501(C)3	45,000.	0.			GRANT FUNDING
FREE ALAS 3612 BANKS ST NEW ORLEANS, LA 70119	84-2544330	501(C)3	40,000.	0.			GRANT FUNDING
FRIENDS OF LAKEVIEW P.O. BOX 24378 NEW ORLEANS, LA 70184	90-0606504	501(C)3	5,850.	0.			DESIGNATED GIFTS
FRIENDS OF THE NEW ORLEANS PUBLIC LIBRARY - 219 LOYOLA AVENUE - NEW ORLEANS, LA 70112	72-6028003	501(C)3	8,000.	0.			GRANT FUNDING
FOUNDATION FOR SCIENCE AND MATHEMATICS EDUCATION - 5625 LOYOLA AVENUE - NEW ORLEANS, LA 70115	20-5197170	501(C)3	8,219.	0.			DESIGNATED GIFTS
GIVE A WISH 615 GREEN OAK ROAD KINDER, LA 70648	47-3058001	501(C)3	5,344.	0.			DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GNO NONPROFIT KNOWLEDGE WORKS 1600 CONSTANCE ST NEW ORLEANS, LA 70130	72-1400841	501(C)3	75,000.	0.			GRANT FUNDING
GREATER NEW ORLEANS DEVELOPMENT FOUNDATION - 1100 POYDRAS ST STE. 3475 - NEW ORLEANS, LA 70163	72-1177207	501(C)3	10,000.	0.			DESIGNATED GIFTS
GRETNA UNITED METHODIST CHURCH 1309 WHITNEY AVENUE GRETNA, LA 70056	72-6077812	501(C)3	7,000.	0.			DESIGNATED GIFTS
GROW DAT YOUTH FARM 150 ZACHARY TAYLOR DRIVE NEW ORLEANS, LA 70124	45-3142732	501(C)3	40,000.	0.			GRANT FUNDING
HABITAT FOR HUMANITY ST. TAMMANY WEST - 1400 NORTH LANE - MANDEVILLE, LA 70471	72-0921695	501(C)3	6,077.	0.			DESIGNATED GIFTS
HANDS ON NEW ORLEANS 2515 CANAL STREET NEW ORLEANS, LA 70119	26-2281213	501(C)3	43,103.	0.			GRANT FUNDING & DESIGNATED GIFTS
HEALTH AND EDUCATION ALLIANCE OF LOUISIANA - 1700 JOSEPHINE STREET - NEW ORLEANS, LA 70113	33-1159042	501(C)3	60,000.	0.			GRANT FUNDING
HISPANIC CHAMBER OF COMMERCE 1515 POYDRAS STREET SUITE 1010 NEW ORLEANS, LA 70112	58-2079809	501(C)3	25,000.	0.			GRANT FUNDING
INST OF WOMEN AND ETHNIC STUDIES 365 CANAL STREET SUITE 1550 NEW ORLEANS, LA 70130	72-1244155	501(C)3	50,000.	0.			GRANT FUNDING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEFFERSON COMMUNITY FOUNDATION 3908 VETERANS BLVD METAIRIE, LA 70002	83-4204994	501(C)3	40,000.	0.			GRANT FUNDING
JEFFERSON PARISH PUBLIC SCHOOLS 501 MANHATTAN BLVD HARVEY, LA 70058	72-6000592	GOVERNMENTAL	5,181.	0.			GRANT FUNDING
JESUS PROJECT MINISTRIES 8401 APPLE ST NEW ORLEANS, LA 70118	27-0413281	501(C)3	7,500.	0.			GRANT FUNDING
JEWISH FAMILY SERVICE 3330 W ESPLANADE STE. 600 METAIRIE, LA 70002	72-0851575	501(C)3	70,611.	0.			GRANT FUNDING & DESIGNATED GIFTS
JUNIOR ACHIEVEMENT OF GNO, INC. 5100 ORLEANS AVENUE NEW ORLEANS, LA 70124	72-1084132	501(C)3	38,589.	0.			GRANT FUNDING & DESIGNATED GIFTS
PONTCHARTRAIN CONSERVANCY P.O. BOX 6965 METAIRIE, LA 70009	72-1152784	501(C)3	24,518.	0.			DESIGNATED GIFTS
LOUISIANA APPLESEED 909 POYDRAS ST SUITE 550 NEW ORLEANS, LA 70112	72-1402876	501(C)3	40,000.	0.			GRANT FUNDING
LOUISIANA CENTER FOR CHILDREN'S RIGHTS - 1100-B MILTON STREET - NEW ORLEANS, LA 70122	20-5961971	501(C)3	62,635.	0.			GRANT FUNDING & DESIGNATED GIFTS
LOUISIANA ENDOWMENT FOR THE HUMANITIES - 938 LAFAYETTE ST SUITE 300 - NEW ORLEANS, LA 70113	72-0795568	501(C)3	40,000.	0.			GRANT FUNDING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LOUISIANA FIRST FOUNDATION 1001 CAPITOL ACCESS ROAD BATON ROUGE, LA 70802	81-5192457	501(C)3	77,400.	0.			GRANT FUNDING
LOUISIANA HOSPITALITY FOUNDATION P.O. BOX 24046 NEW ORLEANS, LA 70184	20-4728582	501(C)3	5,059.	0.			GRANT FUNDING & DESIGNATED GIFTS
LOUISIANA INSTITUTE FOR CHILDREN IN FAMILIES, INC. - 1100 POYDRAS STREET SUITE 100 - NEW ORLEANS, LA 70163	47-5068062	501(C)3	15,000.	0.			GRANT FUNDING
LOYOLA UNIVERSITY 7214 ST. CHARLES AVENUE NEW ORLEANS, LA 70118	72-0408946	501(C)3	68,953.	0.			GRANT FUNDING & DESIGNATED GIFTS
LUKE'S HOUSE 2023 SIMON BOLIVAR AVENUE NEW ORLEANS, LA 70113	26-0332262	501(C)3	44,540.	0.			GRANT FUNDING & DESIGNATED GIFTS
METROPOLITAN CENTER FOR COMMUNITY ADVOCACY - P.O. BOX 10775 - JEFFERSON, LA 70181	72-1062244	501(C)3	25,840.	0.			GRANT FUNDING & DESIGNATED GIFTS
MUHSEN 3015 555 LAPALCO BLVD GRETNA, LA 70056	47-3187591	501(C)3	10,000.	0.			GRANT FUNDING
MY529 GATEWAY 2, 60 SOUTH 400 WEST SALT LAKE CITY, UT 84101	87-0680188	501(C)3	87,500.	0.			GRANT FUNDING
NAMI ST. TAMMANY P.O. BOX 2055 MANDEVILLE, LA 70470	58-1866671	501(C)3	24,085.	0.			GRANT FUNDING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW ORLEANS COUNCIL ON AGING 2475 CANAL STREET NEW ORLEANS, LA 70119	72-0634096	501(C)3	25,684.	0.			GRANT FUNDING
NEW ORLEANS CAREER CENTER 1331 KERLEREC STREET NEW ORLEANS, LA 70116	82-2541222	501(C)3	30,000.	0.			GRANT FUNDING
NEW ORLEANS FAMILY JUSTICE ALLIANCE - 701 LOYOLA AVENUE SUITE 201 - NEW ORLEANS, LA 70150	26-2541029	501(C)3	86,432.	0.			GRANT FUNDING & DESIGNATED GIFTS
NEW ORLEANS HABITAT FOR HUMANITY P.O. BOX 15052 NEW ORLEANS, LA 70175	72-0973161	501(C)3	30,900.	0.			GRANT FUNDING
NEW ORLEANS MUSEUM OF ART P.O. BOX 19123 NEW ORLEANS, LA 70179	72-6000331	501(C)3	10,000.	0.			DESIGNATED GIFTS
NEW ORLEANS YOUTH ALLIANCE 1705 A SOUTH WHITE STREET NEW ORLEANS, LA 70125	82-4252541	501(C)3	49,031.	0.			GRANT FUNDING
NEW ORLEANS WOMEN AND CHILDREN SHELTER - 2020 S LIBERTY STREET - NEW ORLEANS, LA 70113	26-0859964	501(C)3	33,870.	0.			GRANT FUNDING
NORTHLAKE HOMELESS 116 VILLAGE STREET SLIDELL, LA 70458	27-0870858	501(C)3	20,860.	0.			GRANT FUNDING
NORTHSHORE FOOD BANK 840 N COLUMBIA STREET COVINGTON, LA 70433	72-1028539	501(C)3	7,745.	0.			GRANT FUNDING

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPERATION RESTORATION P.O. BOX 56894 NEW ORLEANS, LA 70156	61-1791941	501(C)3	45,890.	0.			GRANT FUNDING & DESIGNATED GIFTS
OPERATION SPARK 2539 COLUMBUS STREET NEW ORLEANS, LA 70119	47-1514606	501(C)3	40,000.	0.			GRANT FUNDING
OUR DAILY BREAD OF TANGIPAHOA P.O. BOX 1476 HAMMOND, LA 70404	72-1438651	501(C)3	24,871.	0.			GRANT FUNDING & DESIGNATED GIFTS
PHOENIX OF NEW ORLEANS 310 S BROAD AVE NEW ORLEANS, LA 70119	20-4058358	501(C)3	8,000.	0.			GRANT FUNDING & DESIGNATED GIFTS
PINKNAILSSENT ONE GALLERIA BLVD SUITE 1900 METAIRIE, LA 70001	46-2104221	501(C)3	8,484.	0.			GRANT FUNDING & DESIGNATED GIFTS
PLAQUEMINES COMMUNITY CARE CENTER 8480 HWY 23 BELLE CHASSE, LA 70037	20-3884943	501(C)3	61,449.	0.			GRANT FUNDING & DESIGNATED GIFTS
PUENTES NEW ORLEANS 4205 CANAL STREET NEW ORLEANS, LA 70119	20-8846196	501(C)3	35,000.	0.			GRANT FUNDING
SAFE HARBOR INC. 4441 IBERVILLE ST MANDEVILLE, LA 70471	12-1181684	501(C)3	21,775.	0.			GRANT FUNDING & DESIGNATED GIFTS
SECOND HARVEST FOOD BANK 1201 SAMS AVE NEW ORLEANS, LA 70123	72-0956468	501(C)3	98,212.	0.			GRANT FUNDING & DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SILENCE IS VIOLENCE 2000 LAKESHORE DRIVE UNO NEW ORLEANS, LA 70148	06-1713685	501(C)3	25,000.	0.			GRANT FUNDING
SON OF A SAINT 2803 ST. PHILIP STREET NEW ORLEANS, LA 70119	46-5554558	501(C)3	8,418.	0.			GRANT FUNDING & DESIGNATED GIFTS
SOUTHEAST LA LEGAL SERVICES CO. 1200 DEREK STE 100 HAMMOND, LA 70403	72-0877422	501(C)3	50,025.	0.			GRANT FUNDING & DESIGNATED GIFTS
ST. BERNARD ECONOMIC DEVELOPMENT FOUNDATION - 100 PORT BLVD, #10 - CHALMETTE, LA 70043	11-3712951	501(C)3	10,000.	0.			GRANT FUNDING
ST. TAMMANY DEVELOPMENT DISTRICT 21489 KOOP DRIVE SUITE 7 MANDEVILLE, LA 70471	72-0931286	GOVERNMENTAL	6,557.	0.			GRANT FUNDING
STRIVE INTERNATIONAL 205 EAST 122ND STREET NEW YORK, NY 10035	13-3255679	501(C)3	35,000.	0.			GRANT FUNDING
SPECIAL OLYMPICS OF LOUISIANA 46 LOUIS PRIMA DRIVE SUITE A COVINGTON, LA 70433	72-0706608	501(C)3	13,222.	0.			GRANT FUNDING & DESIGNATED GIFTS
ST. JOSEPH PARENTING CENTER 90 FAIRFIELD AVENUE YERWOOD CENTER STAMFORD, CT 06902	27-0490589	501(C)3	17,997.	0.			DESIGNATED GIFTS
ST. JUDE CHILDREN'S RESEARCH HOSPITAL - 14333 PERKINS ROAD SUITE A - BATON ROUGE, LA 70810	35-1044585	501(C)3	7,869.	0.			DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST JUDE CHILDREN'S RESEARCH HOSP-MEMPHIS - 262 DANNY THOMAS PLACE - MEMPHIS, TN 38105	62-0646012	501(C)3	13,685.	0.			DESIGNATED GIFTS
STARC 1541 ST. ANN PLACE SLIDELL, LA 70460	72-0727074	501(C)3	6,900.	0.			GRANT FUNDING & DESIGNATED GIFTS
SUSAN G. KOMEN BREAST CANCER NEW ORLEANS AFFILIATE - 4141 VETERANS BLVD SUITE 202 - METAIRIE, LA 70002	72-1222127	501(C)3	24,518.	0.			DESIGNATED GIFTS
TANGIPAHOA VOLUNTARY COUNCIL ON AGING - 106 NORTH BAY ST - AMITE, LA 70422	72-0903571	501(C)3	23,821.	0.			GRANT FUNDING & DESIGNATED GIFTS
THE GOOD SAMARITAN MINISTRY 910 CROSS GATES BLVD SLIDELL, LA 70461	72-0947538	501(C)3	23,046.	0.			GRANT FUNDING & DESIGNATED GIFTS
THE LINKS FOUNDATION P.O. BOX 50832 NEW ORLEANS, LA 70150	52-1170830	501(C)3	8,870.	0.			GRANT FUNDING
THRIVE NEW ORLEANS 2025 ST. CLAUDE AVE NEW ORLEANS, LA 70116	26-1824498	501(C)3	40,000.	0.			GRANT FUNDING
TRAININGGROUNDS 1597 CUTTYSARK COVE SLIDELL, LA 70458	81-3353953	501(C)3	50,800.	0.			GRANT FUNDING
TRAVELERS AID SOCIETY 611 NORTH RAMPART ST NEW ORLEANS, LA 70112	72-0408990	501(C)3	52,995.	0.			GRANT FUNDING & DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TRINITY CHRISTIAN COMMUNITY P.O. BOX 13665 NEW ORLEANS, LA 70130	72-0689114	501(C)3	8,000.	0.			GRANT FUNDING
UNITED WAY OF ACADIANA P.O. BOX 52033 LAFAYETTE, LA 70505	72-0513639	501(C)3	11,720.	0.			DESIGNATED GIFTS
UNITED WAY OF GREATER HOUSTON 50 WAUGH DRIVE HOUSTON, TX 77007	74-1167964	501(C)3	20,648.	0.			DESIGNATED GIFTS
UNITED WAY OF METRO CHICAGO 333 SOUTH WABASH AVENUE CHICAGO, IL 60604	30-0200478	501(C)3	6,712.	0.			DESIGNATED GIFTS
UNITED WAY OF MIAMI-DADE 3250 SW 3RD AVENUE MIAMI, FL 33129	59-0830840	501(C)3	25,680.	0.			DESIGNATED GIFTS
UNITED WAY OF CRAWFORD COUNTY, IL P.O. BOX 3 ROBINSON, IL 62464	37-0844009	501(C)3	6,519.	0.			DESIGNATED GIFTS
UNITED WAY OF SOUTHWEST LOUISIANA 715 RYAN ST SUITE 102 LAKE CHARLES, LA 70601	72-0456901	501(C)3	61,720.	0.			GRANT FUNDING & DESIGNATED GIFTS
UNITED WAY OF LEE COUNTY, INC. 7273 CONCOURSE DRIVE FORT MEYERS, FL 33908	59-1005169	501(C)3	46,444.	0.			DESIGNATED GIFTS
UNITED WAY OF NORTHEAST MISSISSIPPI, INC - 213 WEST MAIN ST SUITE 110 - TUPELO, MS 38804	64-0392972	501(C)3	50,623.	0.			DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF ST. CHARLES 13207 RIVER ROAD LULING, LA 70070	72-0928066	501(C)3	12,821.	0.			GRANT FUNDING & DESIGNATED GIFTS
UNITED WAY OF WESTERN CONNECTICUT, INC. - 301 MAIN STREET - DANBURY, CT 06810	06-0646577	501(C)3	15,032.	0.			DESIGNATED GIFTS
UNITY OF GREATER NEW ORLEANS 2475 CANAL STREET SUITE 300 NEW ORLEANS, LA 70119	72-1222911	501(C)3	25,000.	0.			GRANT FUNDING
URBAN LEAGUE OF GREATER NEW ORLEANS - 2322 CANAL ST - NEW ORLEANS, LA 70119	72-0423627	501(C)3	101,668.	0.			GRANT FUNDING & DESIGNATED GIFTS
VOLUNTEERS OF AMERICA OF GNO 4152 CANAL ST NEW ORLEANS, LA 70119	72-0709750	501(C)3	40,525.	0.			GRANT FUNDING & DESIGNATED GIFTS
WESTBANK BUSINESS & INDUSTRY ASSOCIATION - 5201 WESTBANK EXWY SUITE 205 - MARRERO, LA 70072	72-0791906	501(C)3	10,000.	0.			GRANT FUNDING
YMCA BOGALUSA 411 AVENUE B BOGALUSA, LA 70427	72-0441354	501(C)3	26,100.	0.			GRANT FUNDING & DESIGNATED GIFTS
YMCA OF GREATER NEW ORLEANS 1215 PRYTANIA ST STE. 103 NEW ORLEANS, LA 70130	72-0423890	501(C)3	82,516.	0.			GRANT FUNDING & DESIGNATED GIFTS
YOUTH EMPOWERMENT PROJECT 1600 ORETHA CASTLE HALEY BLVD NEW ORLEANS, LA 70113	42-1633060	501(C)3	167,817.	0.			GRANT FUNDING & DESIGNATED GIFTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUTH INITIATIVE 1544 NORTH CLAIBORNE AVE NEW ORLEANS, LA 70122	93-2002224	501(C)3	8,219.	0.			GRANT FUNDING
YOUTH FORCE NOLA 625 CELESTE STREET, BOX 108 NEW ORLEANS, LA 70130	26-3606930	501(C)3	30,640.	0.			GRANT FUNDING
YOUTH SERVICE BUREAU OF ST. TAMMANY - 430 N NEW HAMPSHIRE - COVINGTON, LA 70433	72-0933867	501(C)3	28,818.	0.			GRANT FUNDING & DESIGNATED GIFTS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
INDIVIDUAL DEVELOPMENT ACCOUNT (IDA) PROJECT	56	158,000.	0.		
LA PRISONER RE-ENTRY DIRECT SERVICE	80	97,938.	0.		
RENT/MORTGAGE ASSIST	309	303,848.	0.		
ST. BERNARD TORNADO GIFT CARDS	122	73,078.	0.		
ST. BERNARD TORNADO MEAL DISTRIBUTION	100	0.	6,000.	TRANSACTION VALUE	FOOD

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

PART I, LINE 2:

PRIOR TO MONEY BEING GRANTED/ALLOCATED TO A PROGRAM, THE AGENCY GOES THROUGH AN EXTENSIVE REVIEW OF ITS AUDIT AND/OR FINANCIAL DOCUMENTS INCLUDING ITS MOST CURRENT FORM 990 BY AN INDEPENDENT AUDIT COMMITTEE. ONCE THEY ARE FOUND TO BE FINANCIALLY "IN GOOD STANDING" AND THEY HAVE SIGNED THE "COUNTERTERRORISM FORM," MONEY IS GRANTED. SITE VISITS ARE CONDUCTED ONCE DURING THE FUNDING YEAR, AND THE OUTCOME/GOAL ATTAINMENT DATA IS REPORTED TO US BY OUR FUNDED PARTNERS EVERY SIX MONTHS.

Part III Continuation of Grants and Other Assistance to Domestic Individuals (Schedule I (Form 990), Part III.)

(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
SCHOOL SUPPLIES	75.	0.	24,321.	TRANSACTION VALUE	SCHOOL SUPPLIES
RIDE UNITED FOOD DISTRIBUTION	103,176.	0.	44,456.	TRANSACTION VALUE	FOOD
PROSPERITY CENTER CLIENT GIFT CARDS	11.	1,200.	0.		
UTILITY ASSISTANCE - OTHER	267.	79,005.	0.		
THRIVING AFRICAN AMERICAN SMALL BUSINESS INITIATIVE	13.	26,000.	0.		
HOSPITALITY WORKER RTA PASSES	233.	0.	9,961.	TRANSACTION VALUE	TRANSIT PASSES
DISASTER REPAIRS ASSISTANCE	65.	706,370.	0.		
ENERGY UTILITY ASSISTANCE	12,928.	1,939,200.	0.		

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

UNITED WAY OF SOUTHEAST LOUISIANA

Employer identification number

72-0471369

Part I Questions Regarding Compensation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Schedule J (Form 990) 2022

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MICHAEL WILLIAMSON PRESIDENT/CEO	(i)	269,978.	28,358.	3,318.	20,250.	31,673.	353,577.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) CHARMAINE CACCIOPPI EVP/COO	(i)	224,409.	5,000.	6,323.	17,102.	12,280.	265,114.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) DEBRA MODLIN CHIEF FINANCIAL OFFICER	(i)	133,442.	5,000.	2,105.	11,494.	30,417.	182,458.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MARY AMBROSE CHIEF EQUITY & IMPACT OFFICER	(i)	123,761.	5,000.	1,695.	9,544.	12,085.	152,085.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 1A:

THE CEO'S WIFE TRAVELS WITH HIM TO WASHINGTON MARDI GRAS EACH FEBRUARY.
COMPANION TRAVEL WAS APPROVED IN WRITING BY THE BOARD CHAIR CONSISTENT WITH
UWSELA'S POLICY.

PART I, LINE 7:

THE ORGANIZATION PROVIDED BONUSES FOR CERTAIN GOALS BEING MET.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization **UNITED WAY OF SOUTHEAST LOUISIANA** Employer identification number **72-0471369**

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art	X	1	350.	FAIR MARKET VALUE
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods	X		279.	FAIR MARKET VALUE
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	3	28,555.	FAIR MARKET VALUE
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles	X	4	1,325.	FAIR MARKET VALUE
19 Food inventory	X	14	22,841.	FAIR MARKET VALUE
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other (<u>GIFT CARD/CERTI</u>)	X	23	19,134.	FAIR MARKET VALUE
26 Other (<u>JEWELRY</u>)	X	2	715.	FAIR MARKET VALUE
27 Other (_____)				
28 Other (_____)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement **29** 0

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

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

Schedule M (Form 990) 2022

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

SCHEDULE M, PART I, COLUMN (B):

THE ORGANIZATION IS REPORTING THE NUMBER OF INSTANCES OF CONTRIBUTIONS.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2022

Open to Public
Inspection

Name of the organization

UNITED WAY OF SOUTHEAST LOUISIANA

Employer identification number

72-0471369

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

MISSION IS TO ERADICATE POVERTY IN SOUTHEAST LOUISIANA. UWSELA
COLLABORATES WITH GOVERNMENT, BUSINESSES, FAITH GROUPS AND OTHER
NONPROFITS IN THE SEVEN PARISH REGION TO IDENTIFY AND ADDRESS SERIOUS
ISSUES. UWSELA RAISES FUNDS THROUGH AN ANNUAL WORKPLACE CAMPAIGN,
INDIVIDUAL AND CORPORATE GIFTS, GRANTS AND PARTNERSHIPS. UWSELA
PROVIDES GRANTS TO SUPPORT PROGRAMS AND GROUPS WORKING TOGETHER IN A
COLLABORATIVE WAY THAT SUPPORTS OUR VISION OF "EQUITABLE COMMUNITIES
WHERE ALL INDIVIDUALS ARE HEALTHY, EDUCATED, AND ECONOMICALLY STABLE."

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

IN OUR BLUEPRINT FOR PROSPERITY. THIS PORTION OF THE COMMUNITY IMPACT
DIVISION, AS DISTINCT FROM THE INITIATIVES AND PROGRAMS IT COORDINATES,
IS RESPONSIBLE FOR THE ANNUAL STRATEGIC GRANTS FUNDING PROCESSES. IT
DEVELOPS STRATEGIC PLANS TO GUIDE THE FUNDING PROCESSES AND PROGRAM OR
INITIATIVE DEVELOPMENT, AND ESTABLISHES AND MONITORS MEASURES OF
PROGRAM SUCCESS AND FINANCIAL ACCOUNTABILITY.

ACCOMPLISHMENTS:

PROGRAM GRANTS:

TOTAL # OF PEOPLE SERVED BY OUR 79 GRANT PARTNERS FROM JULY 1,
2022-JUNE 30, 2023 - 329,820. UWSELA FUNDED 79 PROGRAMS, FROM JULY 1,
2022-JUNE 30, 2023 TO ADDRESS PRIORITIES SUCH AS WORKFORCE TRAINING,
HOUSING, MEDICAL AND MENTAL HEALTH CARE, CHILD AND ADULT CARE AND
ACADEMIC SUPPORTS. UWSELA ANSWERED OVER 329,820 APPEALS FOR HELP FROM
OUR COMMUNITY.

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

Schedule O (Form 990) 2022

232211 10-28-22

Name of the organization

UNITED WAY OF SOUTHEAST LOUISIANA

Employer identification number

72-0471369

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

NEEDS. WE RECRUITED AND MOBILIZED VOLUNTEERS LOCALLY AND NATIONALLY TO PROVIDE CRITICAL REBUILDING SUPPORT TO 149 HOUSEHOLDS - INCLUDING THE REPAIR OF 30 HOMES ALLOWING THEM TO RECOVER AND THRIVE. ADDITIONALLY, UWSELA, BISHOP WILFRET JOHNSON, AND HANDSON NEW ORLEANS ARE WORKING IN PARTNERSHIP TO REBUILD AND RESTORE THE ST. PAUL BENEVOLENT ASSOCIATION COMMUNITY HUB FOR PLAQUEMINES PARISH. RESIDENTS WILL BENEFIT GREATLY FROM HAVING A SPACE OF THEIR OWN TO COMMUNE, PLAN, AND RESPOND TO FUTURE EMERGENCIES IN A WAY THAT CENTERS ON COMMUNITY RESILIENCE AND SUSTAINABILITY.

IN DECEMBER 2022, TORNADOS HIT ST. BERNARD AND JEFFERSON PARISHES. HOURS AFTER MAKING LANDFALL, OUR TEAM SPRANG INTO ACTION DISTRIBUTING TARPS, GARBAGE BAGS, RAKES, AND WATER. IN TOTAL, WE WERE ABLE TO RAISE \$159,000 VIA 1,510 DONORS. FUNDS WERE USED TO SUPPORT THOSE IMPACTED INCLUDING \$30,000 TO SMALL BUSINESSES IN ST. BERNARD, ALGIERS AND THE WEST BANK AS WELL AS \$79,078 IN IMMEDIATE AID DISTRIBUTED TO IMPACTED HOUEHOLDS.

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

J. WAYNE LEONARD PROSPERITY CENTER:

UNITED WAY OF SOUTHEAST LOUISIANA'S J. WAYNE LEONARD PROSPERITY CENTER IS A ONE-STOP FINANCIAL CAPABILITY CENTER THAT CONNECTS INDIVIDUALS TO A COMBINATION OF TEN FINANCIAL CAPABILITY SERVICES AT NO COST TO PARTICIPANTS.

Name of the organization UNITED WAY OF SOUTHEAST LOUISIANA	Employer identification number 72-0471369
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SERVICES OFFERED ARE:

FINANCIAL EDUCATION

FINANCIAL COACHING

FINANCIAL COUNSELING

CREDIT COUNSELING

CREDIT BUILDING ACCESS TO SAFE AND AFFORDABLE FINANCIAL PRODUCTS

FREE TAX PREPARATION ASSISTANCE

ACCESS TO FEDERAL AND STATE

INCENTIVIZED SAVINGS PROGRAMS

ASSET OWNERSHIP PROGRAMS

UNITED WAY OF SOUTHEAST LOUISIANA'S EXPERT FINANCIAL CAPABILITY TEAM

DESIGNED A FINANCIAL EDUCATION CURRICULUM AND RESOURCE GUIDE. THE

CURRICULUM IS TO EDUCATE AND BRING AWARENESS TO THE COMMUNITY ABOUT

WHAT IT MEANS TO BE FINANCIALLY STABLE AND THE STEPS INDIVIDUALS AND

FAMILIES CAN TAKE TO ACHIEVE FINANCIAL STABILITY. WE HAVE UTILIZED THE

CURRICULUM WITH THE COMMUNITY, CIVIC, AND PRIVATE PARTNERS WITH

OUTSTANDING RESULTS. WE HAVE USED THE GUIDE WITH THE INDIVIDUAL

DEVELOPMENT ACCOUNT (IDA) PARTICIPANTS FOR THE PAST FOUR YEARS AND

RECEIVED EXCELLENT FEEDBACK. WE ARE ALSO USING THE CURRICULUM WITH

OPPORTUNITY CENTERS THROUGH THE NEW ORLEANS BUSINESS ALLIANCE JOB

READINESS TRAINING PROGRAM, WHICH TARGETS 52% OF THE UNEMPLOYED AFRICAN

AMERICAN MALES. ADDITIONALLY, WE CONDUCTED TRAINING FOR ENTRY-LEVEL

EMPLOYEES AT A LOCAL BUSINESS, ASSOCIATED TERMINALS/TURN SERVICES. THE

FEEDBACK FROM PARTICIPANTS WAS EXTREMELY POSITIVE!

SINCE ITS OPENING, THE UWSELA FINANCIAL CAPABILITY TEAM HAS EDUCATED

OVER 12,080 PARTICIPANTS IN GROUP TRAINING ABOUT THE ESSENTIAL

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COMPONENTS OF FINANCIAL EDUCATION. THE TRAINING CONSISTS OF A COMPREHENSIVE CURRICULUM FOCUSING ON VARIOUS PERSONAL FINANCIAL MANAGEMENT TOPICS FOR WEALTH CREATION, ASSET DEVELOPMENT, AND LONG-TERM FINANCIAL SECURITY. THE CONTENT MATERIAL IS BASED ON UWSELA FINANCIAL EDUCATION CURRICULUM AND RESOURCE GUIDE. IN ADDITION, WE USED INFORMATION FROM OTHER MONEY MANAGEMENT TRAINING COURSES SUCH AS AFI FINANCIAL LITERACY CORE COMPETENCIES, FREDDIE MAC'S CREDITSMART, FDIC'S MONEY SMART CURRICULUM, THE FEDERAL RESERVE BANK'S BUILDING WEALTH, CONSUMER ACTION'S MONEYWISE, AND A VARIETY OF OTHER FINANCIAL TOOLS AND RESOURCES.

THE OBJECTIVE OF THE GROUP TRAINING IS TO INTRODUCE FINANCIAL MANAGEMENT TO THE PARTICIPANTS TO PROVIDE THEM WITH MORE IN-DEPTH, ONE-ON-ONE COACHING SESSIONS. THESE COACHING SESSIONS EMPOWER PARTICIPANTS TO ACHIEVE FINANCIAL STABILITY AND LONG-TERM SUCCESS. UWSELA SPECIALISTS OFFER PARTICIPANTS AND THEIR FAMILY THE TOOLS TO CREATE HOUSEHOLD BUDGETS, SAVE MONEY OVER TIME, REDUCE DEBT AND IMPROVE CREDIT SCORES. IT HAS PROVEN TO BE VERY SUCCESSFUL FOR MANY PARTICIPANTS WHO HAVE TAKEN ADVANTAGE OF ONE-ON-ONE COACHING.

THROUGH THE PARTNERSHIP, UWSELA HAS PROVIDED ONE-ON-ONE COACHING TO 523 PARTICIPANTS. 89% OF THE PARTICIPANTS HAVE NOT CHECKED THEIR CREDIT REPORTS IN OVER A YEAR. MOST OF THE TIME, THEY FEAR THE UNKNOWN. 75% OF THE PARTICIPANTS HAVE DISPUTED INCORRECT ITEMS ON THEIR CREDIT REPORTS. OF THOSE PARTICIPANTS, SEVERAL WERE UNEMPLOYED OR INCARCERATED, LEAVING THEIR CREDIT VULNERABLE FOR FRAUD AND MISUSED BY FAMILY MEMBERS. WE HAVE SEEN AN INCREASE IN CREDIT SCORES AVERAGING 62 POINTS OVER THREE MONTHS, AN INCREASE IN SAVING, AND AN INCREASE IN ESTABLISHING OR

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RE-ESTABLISHING POSITIVE CREDIT; WITH A DECREASE IN DEBT REDUCTIONS OF \$451 ON AVERAGE, A DECREASE IN CREDIT UTILIZATION BY 60% AND A HALT IN APPLYING FOR NEW CREDIT. SEVERAL PARTICIPANTS HAVE OPENED SAVINGS AND CHECKING ACCOUNTS WITH HOPE FEDERAL CREDIT UNION AND FIDELITY BANK. MANY OTHERS ARE PLANNING TO OPEN BANK ACCOUNTS ONCE THEY BEGIN WORKING. SEVERAL GRADUATES ARE CURRENT PARTICIPANTS IN THE UWSELA INDIVIDUAL DEVELOPMENT ACCOUNTS. EXPENSES \$ 869,224. INCLUDING GRANTS OF \$ 117,006. REVENUE \$ 0.

LOUISIANA PRISONER RE-ENTRY INITIATIVE (LAPRI) COLLABORATIVE:

YEAR 4 - JEFFERSON PARISH LAPRI:

- 2022-2023 REPRESENTED YEAR FOUR OF THE INITIATIVE. YEAR 4 ENDED FEBRUARY 28, 2023.

THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS (DPS&C)/JRI OFFICE CONTINUED TO REFER CLIENTS HOUSED IN CORRECTIONAL FACILITIES ACROSS THE STATE. CORRECTIONAL FACILITIES ALLOWED ACCESS TO CLIENTS VIRTUALLY TO ENROLL CLIENT IN THE PROGRAM AND PROVIDE IN-REACH SERVICES. ENGAGING CLIENTS VIRTUALLY AS A PART OF THE IN-REACH PROCESS WITHIN THE CORRECTIONAL FACILITY PRESENTED CHALLENGES FOR SOME OF THE CORRECTIONAL FACILITIES BECAUSE THE FACILITIES WERE NOT STRUCTURED TO ALLOW PROVIDERS TO ACCESS CLIENTS VIRTUALLY. THE PROGRAM STRUCTURE HAS BEEN MODIFIED TO ACCEPT WOMEN, INDIVIDUALS SERVING 10+ YEARS AND ARE HIGH NEED, REFERRALS FROM THE COMMUNITY, SERVICE PROVIDERS, PROGRAM PARTICIPANTS, PROBATION AND PAROLE AND OTHER PARISH JAILS AND STATE CORRECTIONAL FACILITIES ACROSS LOUISIANA. THE INDIVIDUALS ARE HOUSED AT OVER 13 DIFFERENT CORRECTIONAL FACILITIES ACROSS THE STATE. REFERRALS

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ARE MADE TO THE LEGAL SERVICES TEAM TO CONTINUE TO SERVE OUR CLIENTS TO INCLUDE GETTING CONTEMPT(S) OF COURT WAIVED, REDUCING PARTICIPANT FINES, FEES AND CONSUMER DEBTS, APPLYING FOR DISABILITY BENEFITS AND APPEALING ANY DENIAL OF BENEFITS (SNAP, MEDICAID, SOCIAL SECURITY (SSI)/DISABILITY (SSID), ETC.). PARTICIPANTS NEEDING WORKFORCE SERVICES WILL BE CONNECTED TO EMPLOYMENT. THOUGH LIMITED IN SCOPE, TRANSITIONAL HOUSING IS AN OPTION FOR THOSE WHO HAVE LIMITED HOUSING OPTIONS. WE CONTINUE TO ENGAGE THE COMMUNITY THROUGH JEFFERSON PARISH REENTRY COALITION MEETINGS HELD VIRTUALLY. PROGRAM PARTNERS INCLUDE THE LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS THAT WERE THE SOURCE OF THE REFERRALS, CATHOLIC CHARITIES TO PROVIDE CASE MANAGEMENT SERVICES, SOUTHEAST LEGAL SERVICES AND LOYOLA UNIVERSITY SCHOOL OF LAW TO PROVIDE CIVIL LEGAL SERVICES TO ADDRESS ANY LEGAL BARRIERS A JUSTICE INVOLVED INDIVIDUAL MAY HAVE. LOUISIANA PUBLIC HEALTH INSTITUTE IS THE EVALUATION PARTNER TO EVALUATE THE EFFICACY OF THE LAPRI MODEL AND ITS IMPLEMENTATION. FUNDING PARTNERS INCLUDE THE LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS, THE JEFFERSON PARISH COUNCIL AND THE U.S. DEPARTMENT OF JUSTICE. THE LAST YEAR OF FUNDING HAS BEEN SECURED FROM THE JEFFERSON PARISH COUNCIL, THE U.S. DEPARTMENT OF JUSTICE, AND MACKENZIE SCOTT FUNDS HAVE BEEN ALLOCATED TO SUPPORT THE INITIATIVE.

YEAR 4 OUTCOMES:

- SERVED 37 PARTICIPANTS IN YEAR 4.
- 100% OF THE PARTICIPANTS RECEIVED INTENSIVE CASE MANAGEMENT SERVICES.
- 100% OF THE PARTICIPANTS WERE ASSESSED FOR NEEDS, RISK, AND RESPONSIVITY BY CASE MANAGEMENT.
- 100% OF THE PARTICIPANTS HAVE A COMPREHENSIVE CASE MANAGEMENT PLAN.
- 100% OF THE PARTICIPANTS ARE ASSESSED FOR LEGAL SERVICES.

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- 60% WERE CONNECTED TO EMPLOYMENT.

- 100% WERE ENROLLED IN BENEFITS.

- 89% OF THE PARTICIPANTS COMPLETED THE PROGRAM 6 MONTHS, POST RELEASE, WITHOUT A TECHNICAL VIOLATION.

YEAR 5 JEFFERSON LAPRI:

- 2022-2023 WILL REPRESENT YEAR 5 OF THE INITIATIVE. THE CONTRACT TO BEGIN YEAR 5 IN JEFFERSON PARISH WAS MARCH 1, 2023.

THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS (DPS&C)/JRI OFFICE CONTINUED TO REFER CLIENTS IN ADDITION TO REFERRING CLIENTS HOUSED IN OTHER CORRECTIONAL FACILITIES ACROSS THE STATE. CORRECTIONAL FACILITIES ALLOWED ACCESS TO CLIENTS VIRTUALLY TO ENROLL CLIENT IN THE PROGRAM AND PROVIDE IN-REACH SERVICES. ENGAGING CLIENTS VIRTUALLY AS A PART OF THE IN-REACH PROCESS WITHIN THE CORRECTIONAL FACILITY PRESENTED CHALLENGES FOR SOME OF THE CORRECTIONAL FACILITIES BECAUSE THE FACILITIES WERE NOT STRUCTURED TO ALLOW PROVIDERS TO ACCESS CLIENTS VIRTUALLY. WE HAVE A RECEIVED A TOTAL OF 51 REFERRALS. 40 OF THE REFERRALS WERE RECEIVED AUGUST OF 2022 FROM THE JRI OFFICE. THE INDIVIDUALS ARE HOUSED AT 5 DIFFERENT CORRECTIONAL FACILITIES ACROSS THE STATE. REFERRALS WILL BE MADE TO THE LEGAL SERVICES TEAM TO CONTINUE TO SERVE OUR CLIENTS TO INCLUDE GETTING CONTEMPT(S) OF COURT WAIVED, REDUCING PARTICIPANT FINES, FEES AND CONSUMER DEBTS, APPLYING FOR DISABILITY BENEFITS AND APPEALING ANY DENIAL OF BENEFITS (SNAP, MEDICAID, SOCIAL SECURITY (SSI)/ DISABILITY (SSID), ETC.). PARTICIPANTS NEEDING WORKFORCE SERVICES WILL BE CONNECTED TO EMPLOYMENT. THOUGH LIMITED IN SCOPE, TRANSITIONAL HOUSING HAS BEEN A GREAT BACKUP PLAN FOR THOSE WHO HAVE LIMITED HOUSING OPTIONS OR CIRCUMSTANCES CHANGED WITH LITTLE NOTICE AND

Name of the organization UNITED WAY OF SOUTHEAST LOUISIANA	Employer identification number 72-0471369
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NO HEALTHY ALTERNATIVES. PROGRAM PARTNERS INCLUDE THE LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS THAT WERE THE SOURCE OF THE REFERRALS, CATHOLIC CHARITIES TO PROVIDE CASE MANAGEMENT SERVICES, SOUTHEAST LEGAL SERVICES AND LOYOLA UNIVERSITY SCHOOL OF LAW TO PROVIDE CIVIL LEGAL SERVICES TO ADDRESS ANY LEGAL BARRIERS A JUSTICE INVOLVED INDIVIDUAL MAY HAVE. LOUISIANA PUBLIC HEALTH INSTITUTE IS THE EVALUATION PARTNER TO EVALUATE THE EFFICACY OF THE LAPRI MODEL AND ITS IMPLEMENTATION. FUNDING PARTNERS INCLUDE THE LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS, THE JEFFERSON PARISH COUNCIL AND THE U.S. DEPARTMENT OF JUSTICE.

OUTCOMES TO-DATE FOR YEAR 5:

- SERVED 63 PARTICIPANTS IN YEAR 5.
- 100% OF THE PARTICIPANTS RECEIVED INTENSIVE CASE MANAGEMENT SERVICES.
- 100% OF THE PARTICIPANTS WERE ASSESSED FOR NEEDS, RISK, AND RESPONSIVITY BY CASE MANAGEMENT.
- 100% OF THE PARTICIPANTS HAVE A COMPREHENSIVE CASE MANAGEMENT PLAN.

ST. TAMMANY PARISH LAPRI:

- 2022-2023 REPRESENTED YEAR TWO OF A TWO-YEAR INITIATIVE. YEAR 2 ENDS NOVEMBER 30, 2023.

THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS (DPS&C)/JRI OFFICE CONTINUED TO REFER CLIENTS HOUSED IN THE ST. TAMMANY PARISH JAIL AND OTHER CORRECTIONAL FACILITIES ACROSS THE STATE. CORRECTIONAL FACILITIES ALLOWED ACCESS TO CLIENTS VIRTUALLY TO ENROLL CLIENT IN THE PROGRAM AND PROVIDE IN-REACH SERVICES. ENGAGING CLIENTS VIRTUALLY AS A PART OF THE IN-REACH PROCESS WITHIN THE SOME OF THE CORRECTIONAL FACILITIES

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PRESENTED CHALLENGES FOR SOME BECAUSE THE FACILITIES WERE NOT STRUCTURED TO ALLOW PROVIDERS TO ACCESS CLIENTS VIRTUALLY. THE DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS (DPS&C) TRANSITIONAL SPECIALIST ASSIGNED TO THE ST. TAMMANY PARISH JAIL BEGAN REFERRING CLIENTS HOUSED AT THE ST. TAMMANY PARISH JAIL IN APRIL OF 2022. THE ST. TAMMANY PARISH JAIL HAS ALLOWED ACCESS TO CLIENTS VIRTUALLY TO ENROLL CLIENT IN THE PROGRAM AND PROVIDE IN-REACH SERVICES. THE PROGRAM STRUCTURE WAS MODIFIED TO ACCEPT REFERRALS FROM THE COMMUNITY, SERVICE PROVIDERS, PROGRAM PARTICIPANTS, PROBATION AND PAROLE AND REENTRY TRANSITIONAL SPECIALISTS WORKING IN OTHER PARISH JAILS AND STATE CORRECTIONAL FACILITIES ACROSS LOUISIANA. THE PARTICIPANTS WERE REFERRED FOR LEGAL SERVICES TO INCLUDE REDUCING PARTICIPANT FINES, FEES AND CONSUMER DEBTS, APPLYING FOR DISABILITY BENEFITS AND APPEALING ANY DENIAL OF BENEFITS (SNAP, MEDICAID, SOCIAL SECURITY (SSI)/DISABILITY(SSID), ETC.). THOUGH LIMITED IN SCOPE, TRANSITIONAL HOUSING HAS INCREASED FOR THOSE WHO HAVE LIMITED HOUSING OPTIONS. ELIGIBLE PARTICIPANTS WERE REFERRED FOR WORKFORCE SERVICES. PROGRAM PARTNERS INCLUDE THE LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS THAT WERE THE SOURCE OF THE REFERRALS. CATHOLIC CHARITIES TO PROVIDE CASE MANAGEMENT SERVICES, NAMI-ST. TAMMANY TO PROVIDE TRANSPORTATION SERVICES, FIRST DISTRICT-ST. TAMMANY WORKFORCE DEVELOPMENT TO PROVIDE EMPLOYMENT SERVICES, SOUTHEAST LEGAL SERVICES AND LOYOLA UNIVERSITY SCHOOL OF LAW TO PROVIDE CIVIL LEGAL SERVICES TO ADDRESS ANY LEGAL BARRIERS A JUSTICE INVOLVED INDIVIDUAL MAY HAVE. LOUISIANA PUBLIC HEALTH INSTITUTE IS THE EVALUATION PARTNER TO EVALUATE THE EFFICACY OF THE LAPRI MODEL AND ITS IMPLEMENTATION. FUNDING PARTNERS INCLUDE THE LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS. MACKENZIE SCOTT FUNDS WERE ALLOCATED TO SUPPORT THE

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INITIATIVE.

OUTCOMES TO-DATE:

- ENROLLED 40 PARTICIPANTS IN YEAR 2.
- 100% OF THE PARTICIPANTS RECEIVED INTENSIVE CASE MANAGEMENT SERVICES.
- 100% OF THE PARTICIPANTS WERE ASSESSED FOR NEEDS, RISK, AND RESPONSIVITY BY CASE MANAGEMENT.

- 100% OF THE PARTICIPANTS HAVE A COMPREHENSIVE CASE MANAGEMENT PLAN.
- 100% ARE BEING ENROLLED IN BENEFITS UPON THEIR RELEASE.

EXPENSES \$ 653,971. INCLUDING GRANTS OF \$ 76,380. REVENUE \$ 0.

VITA, EITC, AND SINGLE STOP:

VITA IS THE VOLUNTEER INCOME TAX ASSISTANCE PROGRAM THAT ASSISTS LOW-TO-MODERATE-INCOME WORKERS WITH FREE TAX PREPARATION SERVICES TO KEEP ALL OF THEIR TAX REFUNDS IN THEIR POCKETS. IRS-TRAINED VITA VOLUNTEERS HELP TAXPAYERS AVOID PAYING HIGH FEES AND PREDATORY LENDING PRACTICES. THE VOLUNTEERS ENSURE THAT THE TAXPAYERS TAKE ADVANTAGE OF ALL CREDITS SUCH AS EARNED INCOME TAX CREDITS (EITC), CHILD TAX CREDITS, ETC. EITC IS THE NATION'S MOST EXTENSIVE ANTI-POVERTY PROGRAM THAT HELPS TO BRING LOW-INCOME FAMILIES OUT OF POVERTY. UNITED WAY CONDUCTS MARKETING AND OUTREACH ON THE VITA PROGRAM AND EITC THROUGHOUT OUR SEVEN PARISH SERVICE AREAS AND BEYOND. IN ADDITION, UNITED WAY PARTNERS WITH SINGLE STOP USA AND DELGADO COMMUNITY COLLEGE TO OFFER FREE TAX PREPARATION AND BENEFITS SCREENING FOR STUDENTS TO HELP THEM GET ALL THE PUBLIC BENEFITS THEY ARE ELIGIBLE TO RECEIVE. THE GOAL IS TO INCREASE THE STUDENT'S INCOME, SO THEY DON'T HAVE TO DROP OUT OF SCHOOL BECAUSE OF A LACK OF CHILD CARE OR HAVING TO MAKE TOUGH CHOICES

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LIKE PAYING FOR BOOKS OR FOOD.

ACCOMPLISHMENTS:

- TOTAL NUMBER OF INCOME TAX RETURNS COMPLETED - 7,219

- TOTAL AMOUNT OF INCOME TAX REFUNDS - \$10,929,447

- TOTAL AMOUNT OF EARNED INCOME TAX CREDITS - \$3,511,220

EXPENSES \$ 413,145. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

NEW ORLEANS GRADE LEVEL READING CAMPAIGN:

- 125 ORGANIZATIONS AND BUSINESSES ACTIVELY PARTICIPATING IN THE COLLABORATION.

- 552 OF COMMUNITY MEMBERS INVOLVED THROUGH THE COLLABORATION.

- MULTIPLE PARTNERSHIPS ESTABLISHED IN ALL THREE GRADE-LEVEL READINESS DRIVER AREAS: SCHOOL READINESS, SUMMER LEARNING AND ATTENDANCE.

PARTNERSHIPS AND THEIR PURPOSE HAVE INCLUDED: EARLY CARE AND EDUCATION FUNDING & POLICY (AN EXAMPLE OF OUR PARTNERS INCLUDE AGENDA FOR CHILDREN, ENTERGY NEW ORLEANS, INSTITUTE OF MENTAL HYGIENE, W.K.

KELLOGG FOUNDATION, LOUISIANA POLICY INSTITUTE FOR CHILDREN, WOMEN

UNITED, KINGSLEY HOUSE, URBAN LEAGUE OF LOUISIANA, LOUISIANA CHILDREN'S

MUSEUM, N.O. CHILDREN AND YOUTH PLANNING BOARD, MAYOR'S OFFICE FOR

YOUTH AND FAMILIES, NEW ORLEANS EARLY EDUCATION NETWORK, POWER

COALITION FOR EQUITY AND JUSTICE, LOYOLA UNIVERSITY COLLEGE OF LAW,

SAVE THE CHILDREN ACTION NETWORK, STAND NATIONAL); AND SUMMER LEARNING

(NORDC, NEW ORLEANS PUBLIC LIBRARY, URBAN LEAGUE OF LOUISIANA, N.O.

YOUTH ALLIANCE, NATIONAL SUMMER LEARNING ASSOCIATION, FIRSTBOOK,

ABUNDANCE OF DESIRE, DISCOVERYFEST, COMMUNITIES IN SCHOOLS, AND

KIDSMART). PARTNERSHIPS FOR OUR ATTENDANCE WORK INCLUDE NOLA PUBLIC

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SCHOOLS, N.O. CHILDREN AND YOUTH PLANNING BOARD, MAYOR'S OFFICE FOR YOUTH AND FAMILIES, AND TOTAL COMMUNITY ACTION. IN ADDITION TO A SUMMER LEARNING WORKING GROUP THAT DEVELOPED THE KAY FENNELLY LITERACY INSTITUTE, THE CAMPAIGN HAS ALSO ACTIVATED ITS SCHOOL READINESS WORKING GROUP, WHICH HAS OUTLINED A DETAILED INTERNAL COLLABORATIVE PLAN TO INCREASE ACCESS TO QUALITY ECE IN NEW ORLEANS; AND THE ATTENDANCE TASK FORCE WHICH HAS BEGUN TO IDENTIFY THE SYSTEMIC ISSUES THAT CONTRIBUTE TO CHRONIC ABSENCE IN ORLEANS SCHOOLS.

- THE EFFORTS ACCOMPLISHED IN THE SECOND HALF OF THE YEAR CONTINUED MOMENTUM TO SECURE DEDICATED FUNDING FOR THE CREATION AND SUSTAINABILITY OF HIGH-QUALITY EARLY CARE AND EDUCATION SEATS, TEACHER TRAINING AND INFRASTRUCTURE. WITHIN THE REPORTING PERIOD,

- THE SCHOOL READINESS WORKING GROUP OF THE GLR CAMPAIGN SUCCESSFULLY ADVOCATED FOR THE PASSAGE OF HB 12 -PROHIBITS PROMOTION TO THE FOURTH GRADE OF CERTAIN STUDENTS WHOSE READING DEFICIENCIES HAVE NOT BEEN REMEDIED BY THE END OF THE THIRD GRADE. GOVERNOR JOHN BELL EDWARDS SIGNED THE BILL INTO LAW - ACT 422.

- 2023 LEGISLATIVE SESSION: THE 2023 LEGISLATIVE SESSION WAS A FISCAL SESSION BEGINNING ON APRIL 10TH, ENDING NO LATER THAN JUNE 8, 2023.

- READY LOUISIANA COALITION KEY ASKS:

- \$200 MILLION TO SUSTAIN SEATS; \$115 MILLION TO EXPAND ACCESS TO 9,000 CHILDREN BIRTH TO THREE: TOTAL \$315 MILLION

- 10% OF RECOGNIZED EXCESS FUNDS

- THE CAMPAIGN IN PARTNERSHIP WITH THE READY LOUISIANA COALITION SUCCESSFULLY ARE WALKING AWAY WITH ALMOST \$52 MILLION IN NEW FUNDING FOR YOUNG CHILDREN IN HB 1, THE LARGEST STATE INVESTMENT OF STATE DOLLARS INTO THE CHILD CARE ASSISTANCE PROGRAM IN OVER A DECADE. WHEN SESSION ENDED, THERE WAS \$44 MILLION IN THE BUDGET, BUT THANKS TO A

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LINE ITEM VETO BY GOVERNOR EDWARDS, WE NOW HAVE ALMOST \$52 MILLION TOTAL GOING INTO EARLY CARE AND EDUCATION (ECE). AS A RESULT OF OUR TIRELESS, COLLABORATIVE EFFORTS, APPROXIMATELY 4,000 CHILDREN ACROSS THE STATE WILL KEEP THEIR PUBLICLY-FUNDED ECE SEATS. EXPENSES \$ 189,817. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

WORKFORCE READINESS-EMPLOYMENT & TRAINING PROGRAMS:

TO EXPAND OUR WORKFORCE DEVELOPMENT INVESTMENTS AND COMMUNITY-STRENGTHENING EFFORTS, UWSELA WORKS WITH THE LOUISIANA DEPARTMENT OF CHILDREN AND FAMILY SERVICES WORKFORCE DIVISION TO PROVIDE CAPACITY BUILDING RESOURCES AND ASSISTANCE FOR THEIR SET FOR SUCCESS PROGRAMS.

THESE PROGRAMS PROVIDE INDIVIDUALS AND FAMILIES THE OPPORTUNITY TO TRANSFORM THEIR LIVES THROUGH TRAINING AND SKILLS TO OVERCOME BARRIERS. PARTICIPANTS CAN GAIN THE SKILLS, EDUCATION OR WORK EXPERIENCE NEEDED TO BECOME EMPLOYABLE AND EARN A LIVING WAGE.

OVER THE PAST YEAR, UWSELA HAS HELPED BUILD CAPACITY IN BOTH THE SNAP AND STEP EMPLOYMENT & TRAINING PROGRAMS BY DEVELOPING, WORKING ON, LEADING, OR PARTICIPATING IN PROJECTS SUCH AS, BUT NOT LIMITED TO:

SNAP E&T: CREATION OF BEST PRACTICES PARTNER GUIDE (FISCAL AND REIMBURSEMENT); COMMUNICATIONS PLAN; PARTNER REFERRAL STRATEGIC PLAN; INPUT IN DEVELOPMENT OF NEW PROGRAM ONLINE PORTAL; RESEARCH OF ALL STATE NGO'S AND IDENTIFICATION OF POTENTIAL WORKFORCE PARTNERS; TECHNICAL ASSISTANCE AND PEER TO PEER LEARNING; DEVELOPMENT OF STATE

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PROVIDER APPLICATION PACKAGE; AND INTRODUCTION TO THE CLIFF TOOL FOR PROVIDER AGENCIES.

STEP E&T: ASSISTED IN THE CREATION AND STRATEGIC PLAN AND IMPLEMENTATION OF THE PILOT PROJECT, FOLLOWED BY THE STATEWIDE IMPLEMENTATION, OF THE CATAPULT POWERED BY CLIFF TOOL (USED TO ASSIST CASE MANAGERS WITH THEIR CLIENTS). THIS TOOL SHOWS HOW AN INCREASE IN INCOME OR CAREER ADVANCEMENT CAN LEAD TO THE LOSS OF ELIGIBILITY FOR PARTICIPATION IN GOVERNMENT ASSISTANCE PROGRAMS; TRAINING OF STEP COACHES ON TOOL; INTRODUCTION OF THE UWSELA PROSPERITY CENTER TO THE STEP E&T PROGRAM, OFFERED TARGET FINANCIAL CAPABILITY EDUCATION TO STEP PARTICIPANTS.

EXPENSES \$ 290,170. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

NEW ORLEANS MENTAL HEALTH COLLABORATIVE (MHC):

THE NEW ORLEANS MENTAL HEALTH COLLABORATIVE (MHC) WAS CREATED TO IDENTIFY AND FILL GAPS IN MENTAL HEALTH CARE IN THE CITY. THE INITIATIVE WAS LAUNCHED DURING A SPECIAL CITY COUNCIL SESSION ON MENTAL AND BEHAVIORAL HEALTH CONVENED BY NEW ORLEANS CITY COUNCILMEMBER JOE GIARRUSSO ON SEPT. 15, 2022.

COLLABORATIVE'S THREE AREAS OF FOCUS: 1. NEEDS AND RESOURCE ASSESSMENT; 2. ACCESS TO CARE: A. PLACE AND COMMUNITY BASED CARE, B. INSURANCE; 3. CAPACITY BUILDING: A. CULTURAL COMPETENCY, B. TRAUMA INFORMED TRAINING

SAMHSA RECAST GRANT:

THE SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION (SAMHSA)

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AWARDED MHC PARTNERS, LED BY UNITED WAY OF SOUTHEAST LOUISIANA, OVER \$1.9 MILLION FOR TWO YEARS TO EXPAND AND COORDINATE TRAUMA-INFORMED COMMUNITY BEHAVIORAL HEALTH RESOURCES AND SERVICES FOR YOUNG PEOPLE.

FUNDS SUPPORT THE RESILIENT, EQUITABLE SYSTEMS FOR OVERCOMING LOSS AND VIOLENCE EVERYWHERE (RESOLVE) NEW ORLEANS PROJECT, WHICH FOCUSES ON SERVING YOUTH AND FAMILIES LIVING IN COMMUNITIES OF CHRONIC POVERTY MOST IMPACTED BY COLLECTIVE TRAUMA AND COMMUNITY VIOLENCE.

EXPENSES \$ 113,805. INCLUDING GRANTS OF \$ 47,666. REVENUE \$ 0.

RATE PAYER ENDOWMENT:

KAY FENNELLY LITERACY INSTITUTE - EXPANDED TO OFFER YEAR-ROUND SUPPORT FOR LITERACY INTEGRATION INTO OUT-OF-SCHOOL TIME PROGRAMMING THROUGH PROFESSIONAL DEVELOPMENT AND COACHING OPPORTUNITIES FOR OST INSTRUCTORS AND COACHES OVERVIEW: KIDSMART (KS) SPECIALISTS WILL OFFER INSTRUCTIONAL COACHING AND FOCUSED WORKSHOPS THROUGHOUT THE SCHOOL YEAR. SOME SUPPORTS WILL BE INCLUSIVE OF ALL OST PERSONNEL, AND OTHERS WILL FOCUS ON OST PRACTITIONERS WHO WANT TO DEEPEN LITERACY INTEGRATION PRACTICES IN THEIR INSTRUCTION AND CLASSROOMS.

TIMEFRAME - JANUARY-MARCH

AUDIENCE - 60 OST PRACTITIONERS CITYWIDE

ACTIVITY - LITERACY INTEGRATION WORKSHOPS

DESCRIPTION/DELIVERABLE - 3 WORKSHOPS LEAD BY KIDSMART LITERACY SUPPORT SPECIALISTS

LEAD/SUPPORT - KIDSMART

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AFTER THESE PDS, 100% OF PARTICIPANTS UNDERSTAND THE PURPOSE AND VALUE OF INTEGRATING THE ARTS TO IMPROVE LITERACY SKILLS. 100% UNDERSTAND THE PURPOSE AND VALUE OF INTEGRATING THE ARTS AND ACADEMIC AND SOCIAL-EMOTIONAL LEARNING OBJECTIVES. 100% OF PARTICIPANTS ARE COMFORTABLE WITH ENGAGING STUDENTS IN AN INTERACTIVE READ-ALOUD.

TIMEFRAME - MAY

AUDIENCE - 58 NORD SUMMER STAFF, 33 OST PRACTITIONERS CITYWIDE
 ACTIVITY - LITERACY INTEGRATION WORKSHOPS, HOMEGROWN INSTITUTE
 DESCRIPTION/DELIVERABLE - 2 WORKSHOPS OFFERED TO ALL NORD CAMP STAFF ATTENDING NORD'S MANDATORY PRE-SUMMER CAMP TRAINING, 3-DAY INSTITUTE FOCUSED ON ARTS INTEGRATION AND LITERACY INTEGRATION INSTRUCTIONAL PRACTICES
 LEAD/SUPPORT - KIDSMART, KIDSMART & WE SCRIBBLIN'S KYLEY PULPHUS.
 93% OF PARTICIPANTS RATED THE TRAINING AS EXCELLENT.

UWSELA WAS EXCITED TO COLLABORATE WITH STEM NOLA TO SUPPORT THE IMPLEMENTATION OF ITS PILOT MIDNIGHT MANUFACTURING PROGRAM. UW GRANTED \$100,000 TO STEM NOLA TO ADDRESS IMPROVING ACADEMIC ACHIEVEMENT IN STEM-RELATED SUBJECTS, MAKING-UP PANDEMIC-RELATED LEARNING GAPS AND PROVIDING YOUNG PEOPLE WHO LIVE IN UNDER-RESOURCED COMMUNITIES WITH A SAFE PLACE TO GO IN THE EVENING HOURS. THIS NEW INITIATIVE, WHICH INCLUDED A PARTNERSHIP WITH THE CYBERSECURITY MANUFACTURING INNOVATION INSTITUTE (CYMANII), WAS TO ENGAGE STUDENTS IN GRADES 7TH-12TH WITH HIGH-QUALITY AND CULTURALLY AND DEVELOPMENTALLY APPROPRIATE SCIENCE, TECHNOLOGY, ENGINEERING AND MATH (STEM)-BASED EDUCATIONAL ACTIVITIES.

GOAL:

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- PROVIDE STUDENTS OF COLOR WITH OPPORTUNITIES TO GAIN NEW STEM KNOWLEDGE, INCLUDING CYBER SECURITY, INCREASING ACADEMIC ACHIEVEMENT IN SCIENCE AND MATH CLOSING THE PANDEMIC-RELATED LEARNING GAP;
- INCREASE INTEREST IN AND KNOWLEDGE OF STEM, INCLUDING CYBERSECURITY, AS A CAREER PATH FOR PARTICIPANTS;;
- PROVIDE A SAFE PLACE FOR STUDENTS, MANY OF WHOM LIVE IN ECONOMICALLY UNDERSERVED AREAS, A SAFE PLACE TO GO DURING THE EVENING HOURS.

THE MIDNIGHT MANUFACTURING PROGRAM WAS TO HOLD MONTHLY SESSIONS FOR STUDENTS IN GRADES 7TH-12TH. ALL SESSIONS WERE TO BE HELD BETWEEN THE HOURS OF 7:00PM-10:00PM, AND WOULD SERVE A MINIMUM OF 50 STUDENTS PER SESSION. THE SESSIONS, WERE TO BE STAFFED BY STEM NOLA INSTRUCTIONAL STAFF AND SUPPORTED BY COLLEGE VOLUNTEERS AND STEM PROFESSIONALS, UTILIZING THE CURRICULUM PROVIDED BY THE CYBERSECURITY MANUFACTURING INNOVATION INSTITUTE (CYMANII). THIS CURRICULUM WOULD PROVIDE STUDENTS WITH THE SKILLS AND TRAINING THEY NEED TO EXPLORE CAREERS WITHIN THE CYBERSECURITY FIELD.

UNFORTUNATELY, THE PROGRAM PARTNER CYBERSECURITY MANUFACTURING FELL THROUGH AND WE PIVOTED TO THE IMPLEMENTATION OF ORIGINAL PROGRAMMING, STEM NOLA SHIFTED GEARS A BIT TO ENGAGE STUDENTS IN PLACES WHERE WE WOULD HAVE COMPLETE CONTROL OF FACILITIES, EQUIPMENT, SUPPLIES, AND HUMAN CAPITAL RESOURCES - SUMMER STEM CAMPS. IN PARTICULAR WE FOCUSED ON PROVISION OF FUNDS TO SUPPORT OUR TECHNOLOGY CAMP PROGRAMMING, WHICH CLOSELY ALIGNS WITH THE CREATE AND MAKE ASPECTS OF MANUFACTURING, BUT WITH AN INFUSION OF TECHNOLOGY. STUDENTS LEARNED HOW VARIOUS TECHNOLOGY TOPICS ENABLE THE CREATION OF MARKETABLE PRODUCTS AND WORKFORCE SKILLS. THIS SUMMER OF ACTIVITY WOULD SERVE AS A PILOT STUDY TO BE EVALUATED

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FOR EXPANSION DURING THE SUBSEQUENT SCHOOL YEAR IN AN OUT OF SCHOOL
TIME CONTEXT.

RESULTS: TOTAL YOUTH SERVED: 151 YOUTH FROM AGES 11-14 AND 15-19, 80%
MALE, 20% FEMALE, 85% BLACK, 5% HISPANIC/LATINX, 5% WHITE, AND 5%
ASIAN. HOUSEHOLD INCOME: 10% FROM HOUSEHOLDS LESS THAN/EQUAL TO 30%
AREA MEDIAN INCOME, 60% FROM HOUSEHOLDS GREATER THAN 30% BUT LESS
THAN/EQUAL TO 50% AREA MEDIAN INCOME, AND 20% PARTICIPANTS ARE ABOVE
50% AREA MEDIAN INCOME AND BELOW 80%.

PROGRAMMING RATIONALE: :

- CURRENT CURRICULUM OFFERINGS IN SCHOOLS MAY NOT LEND ITSELF TO
MEANINGFUL ACTIVITIES ALLOWING FOR HANDS-ON EXPLORATION OF STEM
SUBJECTS

- CHILDREN ARE LEARNING NECESSARY, BUT INSUFFICIENT INFORMATION (NOT
ENOUGH DEPTH, NOT APPLIED)

- DELIVERY DOES NOT PRESENT CONTENT IN A DIVERSE WAY; THE EXISTING
CURRICULUM IS NOT ADAPTIVE AND DOES NOT ALLOW FOR ADEQUATE AMOUNTS OF
HANDS-ON INTERACTIONS

STEM NOLA HOSTED SUMMER HANDS-ON TECHNOLOGY CAMPS TO ENGAGE KIDS IN
MEANINGFUL WAYS TO EXPLORE 21ST CENTURY TECHNOLOGIES IN A WAY NOT OFTEN
SEEN IN THEIR SCHOOLS. TOPICS INCLUDE 3-D PRINTING, ARTIFICIAL
INTELLIGENCE, ROBOTICS, AND CODING, OFFERING A ROBUST LEVEL OF EXPOSURE
TO CAREER BASED SKILLS WHICH COULD LEAD TO WORKFORCE OPPORTUNITIES IN
THE FUTURE.

GOAL WAS TO SEEK YOUTH WHO WERE NOT REGULARLY EXPOSED TO THE AREAS OF

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TECHNOLOGY COVERED IN THE CAMPS TO ALLOW THEIR INTERACTION AND DETERMINE INTEREST LEVEL TO PROCEED FURTHER IN SCHOOL- TO ENTER AND REMAIN IN THE STEM CAREER PIPELINE. A FULL 50% OR REGISTERED STUDENTS HAD NOT ATTENDED A TECHNOLOGY CAMP BEFORE, THE GOAL WAS THAT THEY WOULD ALL ENGAGE AT THE 100% LEVEL WITHOUT ANY DROPOUTS. THE GOAL WAS ACHIEVED AS STUDENTS WHO ENTERED, COMPLETED THE INTERACTIONS AND EXHIBITED CHARACTERISTICS OF PERSONAL AND COLLABORATIVE AGENCY IN GETTING THE TASKS COMPLETED.

PROGRAM OUTCOMES INCLUDE THE FOLLOWING:

- INCREASED STUDENT RESILIENCE TO THE CONCEPT OF WORK, SATISFACTION, AND INTELLECTUAL COMPETENCY
- STUDENTS LEAVE FEELING EMPOWERED TO MAKE AND CREATE
- STUDENT CREATIONS THAT COULD POTENTIALLY LEAD TO MARKETABLE TECHNOLOGY-BASED INCOME PRODUCING PRODUCTS

FOR ALL OF OUR PROGRAMS, INCLUDING OUR TECHNOLOGY CAMPS, STEM NOLA DOCUMENTS THE NUMBER AND DEMOGRAPHICS OF PARTICIPATING STEM LEARNERS THROUGH SIGN-IN SHEETS AND ONLINE REGISTRATION. WE MEASURE LEARNING AND KNOWLEDGE OBJECTIVES VIA PRE- AND POST-PROGRAM SURVEYS AND BY SUCCESSFUL COMPLETION OF PROGRAM HANDS-ON PROJECTS.

SUCCESSFUL COMPLETION OF TASKS DURING TECHNOLOGY CAMPS IS THE BIGGEST INDICATOR OF SUCCESS. EACH ACTIVITY LEADING UP TO A WORKING MODEL ENGAGES SKILLS FROM SOFT (COLLABORATION, COMMUNICATION, AND RESILIENCE) TO TANGIBLE (WORKING MODELS, TESTED AND REDESIGNED CONCEPTUAL MODELS, ETC). ENGAGING YOUTH HAVE EXPRESSED THEIR ACHIEVEMENTS AND ARE PROUD OF THE WORK COMPLETED. OUR GOAL WAS THAT 80% OF PARTICIPANTS WOULD SEE

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SUCCESSFUL PROJECT COMPLETION AND RECOGNIZE POTENTIAL IMPACT TO A LARGER COMMUNITY, AND INDICATE INCREASES IN CONFIDENCE AND INTEREST TOWARDS STEM TOPICS. THIS GOAL WAS EXCEEDED.
EXPENSES \$ 99,075. INCLUDING GRANTS OF \$ 99,075. REVENUE \$ 0.

INDIVIDUAL DEVELOPMENT ACCOUNT PROJECT (IDA):

AN IDA IS A MATCHED SAVINGS ACCOUNT THAT HELPS LOW-INCOME INDIVIDUALS AND FAMILIES SAVE MONEY TO ACQUIRE AN ECONOMIC ASSET THAT CAN BUILD LONG-TERM FINANCIAL STABILITY AND SELF-SUFFICIENCY. THIS PROJECT ALLOWS PARTICIPANTS TO USE THEIR IDAS FOR DOWN PAYMENT/CLOSING COSTS ON A NEW HOME, START OR EXPAND A SMALL BUSINESS, POST-SECONDARY EDUCATION, HOME REPAIR, AND VEHICLE PURCHASES. PARTICIPANTS ARE REQUIRED TO ATTEND FINANCIAL EDUCATION COURSES AND ASSET-SPECIFIC TRAINING BEFORE MAKING A PURCHASE. IN ADDITION, THEY MUST SAVE FOR AT LEAST SIX MONTHS BEFORE MAKING A PURCHASE. IDA PROJECT PARTNERS PROVIDE FINANCIAL EDUCATION, CREDIT COUNSELING, AND ASSET-SPECIFIC TRAINING. WE RECEIVED A \$1,000,000 MACKENZIE SCOTT CHARITABLE GIFT ON DECEMBER 15, 2020, TO START OUR FOURTH PROGRAM. THE FOURTH IDA PROJECT WILL OPERATE FROM JULY 1, 2021-JUNE 30, 2026.

ACCOMPLISHMENTS:

- TOTAL NUMBER OF PARTICIPANTS ENROLLED - 43
- 15 HOMEOWNERSHIP
- 9 VEHICLE
- 19 BUSINESS START-UP OR EXPANSION
- POST-SECONDARY EDUCATION
- TOTAL NUMBER OF PARTICIPANTS THAT HAVE COMPLETED 12 HOURS OF

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HOMEBUYER TRAINING - 15

- TOTAL NUMBER OF PARTICIPANTS THAT HAVE COMPLETED 12 HOURS OF

FINANCIAL EDUCATION - 43

- ASSET PURCHASES - 43 TOTAL; 15 HOMEOWNERSHIP, 19 SMALL BUSINESSES,
AND 9 VEHICLE

EXPENSES \$ 98,000. INCLUDING GRANTS OF \$ 98,000. REVENUE \$ 0.

ALL OTHER PROGRAM SERVICES

EXPENSES \$ 391,741. INCLUDING GRANTS OF \$ 338,882. REVENUE \$ 0.

FORM 990, PART VI, SECTION A, LINE 6:

EVERY CONTRIBUTOR TO A FUND-SOLICITING CAMPAIGN CONDUCTED BY THIS
CORPORATION SHALL AUTOMATICALLY BECOME A MEMBER OF THE CORPORATION FOR THE
CALENDAR YEAR FOR WHICH SUCH CONTRIBUTION IS MADE.

AT EVERY MEETING OF THE CORPORATION MEMBERS, EACH MEMBER SHALL BE ENTITLED
TO ONE VOTE, WHICH VOTE MUST BE CAST BY THE MEMBER IN PERSON. TEN MEMBERS
SHALL CONSTITUTE A QUORUM.

FORM 990, PART VI, SECTION A, LINE 7A:

THE MEMBERS SHALL MEET ANNUALLY AT THE CALL OF THE BOARD OF TRUSTEES TO FIX
THE NUMBER OF TRUSTEES, TO ELECT THE BOARD OF TRUSTEES AND TO REVIEW THE
PROGRAMS AND FINANCES OF THE UNITED WAY.

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

THE 990 IS PRESENTED TO AND REVIEWED BY THE BOARD OF TRUSTEES AT A MONTHLY
MEETING AFTER A REVIEW IS CONDUCTED BY THE CFO AND BY THE AUDIT COMMITTEE.

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

THE CONFLICT OF INTEREST POLICY IS DISTRIBUTED TO THE UNITED WAY STAFF AND THE BOARD OF TRUSTEES ANNUALLY. ALL COMPLETED EMPLOYEE FORMS ARE RETURNED TO THE CHIEF HUMAN RESOURCES OFFICER FOR REVIEW AND ALL BOARD/TRUSTEE FORMS ARE RETURNED TO THE OFFICE OF THE PRESIDENT FOR REVIEW.

TRANSACTIONS WITH PARTIES WITH WHOM A CONFLICTING INTEREST EXISTS MAY BE UNDERTAKEN ONLY IF ALL OF THE FOLLOWING ARE OBSERVED:

1. THE CONFLICTING INTEREST IS FULLY DISCLOSED;
2. THE PERSON WITH THE CONFLICT OF INTEREST IS EXCLUDED FROM THE DISCUSSION AND APPROVAL OF SUCH TRANSACTION;
3. A COMPETITIVE BID OR COMPARABLE VALUATION EXISTS; AND
4. THE BOARD OR A DULY CONSTITUTED COMMITTEE THEREOF HAS DETERMINED THAT THE TRANSACTION IS IN THE BEST INTEREST OF THE ORGANIZATION.

DISCLOSURE IN THE ORGANIZATION SHOULD BE MADE TO THE CHIEF EXECUTIVE OFFICER (OR IF HE OR SHE IS THE ONE WITH THE CONFLICT, THEN TO THE BOARD CHAIR), WHO SHALL BRING THE MATTER TO THE ATTENTION OF THE BOARD OR A DULY CONSTITUTED COMMITTEE THEREOF. DISCLOSURE INVOLVING DIRECTORS SHOULD BE MADE TO THE BOARD CHAIR, (OR IF HE OR SHE IS THE ONE WITH THE CONFLICT, THEN TO THE BOARD VICE-CHAIR) WHO SHALL BRING THESE MATTERS TO THE BOARD OR A DULY CONSTITUTED COMMITTEE THEREOF.

THE BOARD OR A DULY CONSTITUTED COMMITTEE THEREOF SHALL DETERMINE WHETHER A CONFLICT EXISTS AND IN THE CASE OF AN EXISTING CONFLICT, WHETHER THE CONTEMPLATED TRANSACTION MAY BE AUTHORIZED AS JUST, FAIR, AND REASONABLE TO UNITED WAY. THE DECISION OF THE BOARD OR A DULY CONSTITUTED COMMITTEE THEREOF ON THESE MATTERS WILL REST IN THEIR SOLE DISCRETION, AND THEIR

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CONCERN MUST BE THE WELFARE OF UNITED WAY AND THE ADVANCEMENT OF ITS PURPOSE.

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

THE CEO'S SALARY DETERMINED BY THE EXECUTIVE COMMITTEE OF THE BOARD OF TRUSTEES. OTHER TOP MANAGEMENT SALARIES ARE DETERMINED BY THE CEO. COMPARABILITY DATA IS OBTAINED FROM AN INDEPENDENT SOURCE AS WELL AS FROM UNITED WAY WORLDWIDE AND IS USED TO CREATE SALARY RANGES FOR EACH POSITION. THESE SALARY RANGES ARE ADJUSTED FOR INFLATION PERIODICALLY.

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

THE DOCUMENTS ARE AVAILABLE TO THE PUBLIC UPON REQUEST. IN ADDITION, THE AUDIT AND TAX RETURN ARE PUBLISHED ON THE WEBSITE.

FORM 990, PART XII, LINE 2C:

THERE HAVE BEEN NO CHANGES FROM THE PRIOR YEAR IN THE OVERSIGHT OR SELECTION PROCESSES FOR THE AUDIT THAT THE ORGANIZATION'S COMMITTEE USES.