

EXTENDED TO MAY 15, 2020

Form 990-T

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning JUL 1, 2018 and ending JUN 30, 2019

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury Internal Revenue Service

Open to Public Inspection for 501(c)(3) Organizations Only

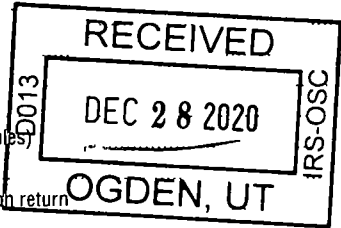
Form sections A, B, C, D, E, F, G, H, I, J. Includes fields for Name of organization (UNITED WAY FOR SOUTHEASTERN MICHIGAN), Address (3011 W. GRAND BLVD. SUITE 500, DETROIT, MI 48202), and Book value of all assets (65,971,892).

SCANNED MAY 11 2021

Form sections C, F, G, H, I, J. Includes fields for Group exemption number, Organization type (501(c) corporation), and Unrelated trade or business information.

Table for Part I: Unrelated Trade or Business Income. Columns: (A) Income, (B) Expenses, (C) Net. Rows 1a-13. Total income is 0.

Table for Part II: Deductions Not Taken Elsewhere. Rows 14-32. Total deductions are 0. Unrelated business taxable income before net operating loss deduction is 0.



41 Received In JAN 11 2021

Part III Total Unrelated Business Taxable Income

Table with 2 columns: Description and Amount. Line 33: 0. Line 34: Amounts paid for disallowed fringes. Line 35: Deduction for net operating loss. Line 36: Total of unrelated business taxable income before specific deduction. Line 37: Specific deduction (1,000). Line 38: Unrelated business taxable income (0).

Part IV Tax Computation

Table with 2 columns: Description and Amount. Line 39: Organizations Taxable as Corporations (0). Line 40: Trusts Taxable at Trust Rates. Line 41: Proxy tax. Line 42: Alternative minimum tax. Line 43: Tax on Noncompliant Facility Income. Line 44: Total (0).

Part V Tax and Payments

Table with 2 columns: Description and Amount. Line 45a: Foreign tax credit. Line 45b: Other credits. Line 45c: General business credit. Line 45d: Credit for prior year minimum tax. Line 45e: Total credits (0). Line 46: Subtract line 45e from line 44 (0). Line 47: Other taxes. Line 48: Total tax (0). Line 49: 2018 net 965 tax liability paid. Line 50a: Payments: A 2017 overpayment credited to 2018. Line 50b: 2018 estimated tax payments (30,240). Line 50c: Tax deposited with Form 8868 (1,500). Line 50d: Foreign organizations' Tax paid or withheld at source. Line 50e: Backup withholding. Line 50f: Credit for small employer health insurance premiums. Line 50g: Other credits, adjustments, and payments. Line 51: Total payments (31,740). Line 52: Estimated tax penalty. Line 53: Tax due. Line 54: Overpayment (31,740). Line 55: Enter the amount of line 54 you want: Credited to 2019 estimated tax (31,740).

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question, Yes, No. Question 56: At any time during the 2018 calendar year, did the organization have an interest in or a signature or other authority over a financial account... Question 57: During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? Question 58: Enter the amount of tax-exempt interest received or accrued during the tax year.

Declaration of preparer: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Signature of officer: Lynne M. Huismann, Date: 12/09/2020, Title: CHIEF FINANCIAL OFFICER. May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No. Print/Type preparer's name: LYNNE M. HUISMANN, Preparer's signature: LYNNE M. HUISMANN, Date: 11/24/20, Check self-employed: [] if PTIN: P00053811. Firm's name: PLANTE & MORAN, PLLC, Firm's EIN: 38-1357951, Firm's address: 27400 NORTHWESTERN HIGHWAY SOUTHFIELD, MI 48034, Phone no.: (248) 352-2500.

Schedule A - Cost of Goods Sold. Enter method of inventory valuation **▶ N/A**

1	Inventory at beginning of year	1		6	Inventory at end of year	6		
2	Purchases	2		7	Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7		
3	Cost of labor	3						
4a	Additional section 263A costs (attach schedule)	4a						
b	Other costs (attach schedule)	4b		8	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes	No
5	Total. Add lines 1 through 4b	5						

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property)
(see instructions)

1. Description of property

(1) _____

(2) _____

(3) _____

(4) _____

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total	0.	Total 0.

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **▶** 0.

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **▶** 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1)				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A) ▶ 0.	Enter here and on page 1, Part I, line 7, column (B) ▶ 0.
Total dividends-received deductions included in column 8 ▶				0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals			Add columns 5 and 10 Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11 Enter here and on page 1, Part I, line 8, column (B)

Totals 0. 0.

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)

Totals 0. 0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26

Totals 0. 0. 0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I	0.	0.				0.
Totals, Part II (lines 1-5)	0. <small>Enter here and on page 1, Part I, line 11, col (A)</small>	0. <small>Enter here and on page 1, Part I, line 11, col (B)</small>				0. <small>Enter here and on page 1, Part II, line 27</small>

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.