

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No 1545-0047
2018
Open to Public Inspection

A For the 2019 calendar year, or tax year beginning 01-01-2018, and ending 12-31-2018

- B** Check if applicable
- Address change
 - Name change
 - Initial return
 - Final return/terminated
 - Amended return
 - Application pending

C Name of organization
UNITED WAY OF BERKS COUNTY INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) Room/suite
PO BOX 702

City or town, state or province, country, and ZIP or foreign postal code
READING, PA 196030702

D Employer identification number
23-1655375

E Telephone number
(610) 685-4550

G Gross receipts \$ 26,492,263

F Name and address of principal officer
TAMMY L WHITE
PO BOX 702
READING, PA 196030702

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

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

H(c) Group exemption number ▶

I Tax-exempt status 501(c)(3) 501(c) () ◀ (insert no) 4947(a)(1) or 527

J Website: ▶ WWW UWBERKS ORG

K Form of organization Corporation Trust Association Other ▶

L Year of formation 1963

M State of legal domicile PA

Part I Summary

1 Briefly describe the organization's mission or most significant activities
INSPIRING COLLABORATION, VOLUNTEERISM AND FINANCIAL SUPPORT TO BUILD A STRONGER COMMUNITY

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

3 Number of voting members of the governing body (Part VI, line 1a)	41
4 Number of independent voting members of the governing body (Part VI, line 1b)	41
5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)	29
6 Total number of volunteers (estimate if necessary)	3,133
7a Total unrelated business revenue from Part VIII, column (C), line 12	0
7b Net unrelated business taxable income from Form 990-T, line 34	13,598

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	10,883,467	11,084,477
9 Program service revenue (Part VIII, line 2g)	0	0
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	441,910	312,230
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	28,761	27,624
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,354,138	11,424,331
13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)	7,497,436	7,707,268
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)	2,067,845	2,129,795
16a Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,432,008		
17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	995,491	1,073,212
18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	10,560,772	10,910,275
19 Revenue less expenses Subtract line 18 from line 12	793,366	514,056

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	22,563,810	22,017,343
21 Total liabilities (Part X, line 26)	1,825,444	2,039,331
22 Net assets or fund balances Subtract line 21 from line 20	20,738,366	19,978,012

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: 2019-06-11

TAMMY L WHITE PRESIDENT
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date 2019-06-11 Check if self-employed PTIN P00042618

Firm's name ▶ HERBEINCOMPANY INC Firm's EIN ▶ 23-2415973

Firm's address ▶ 2763 CENTURY BOULEVARD READING, PA 19610 Phone no (610) 378-1175

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

UNITED WAY OF BERKS COUNTY IMPROVES LIVES BY INSPIRING COLLABORATION, VOLUNTEERISM AND FINANCIAL SUPPORT TO BUILD A STRONGER COMMUNITY

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 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 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 \$ 8,807,274 including grants of \$ 7,707,268) (Revenue \$)
See Additional Data

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 8,807,274

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, Yes, No. Rows include questions 1 through 22 regarding organizational requirements, such as political activities, lobbying, and financial reporting.

Part IV Checklist of Required Schedules (continued)

		Yes	No
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>	Yes	
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>		No
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
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>		No
25b	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>		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)		
28a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		No
28c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	Yes	
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>		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		No
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>		No
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>		No
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>		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		No
35b	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>		
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>		No
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>		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	Yes	

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		
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	

2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		2a	29		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		2b		Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Yes	
b If "Yes," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanation in Schedule O</i>		3b		Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a			No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a			No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b			No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c			
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a			No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b			
7 Organizations that may receive deductible contributions under section 170(c).					
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		7a			No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b			
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c			No
d If "Yes," indicate the number of Forms 8282 filed during the year		7d			
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e			No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f			No
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g			
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h			
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8			
9a Did the sponsoring organization make any taxable distributions under section 4966?		9a			
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b			
10 Section 501(c)(7) organizations. Enter					
a Initiation fees and capital contributions included on Part VIII, line 12		10a			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		10b			
11 Section 501(c)(12) organizations. Enter					
a Gross income from members or shareholders		11a			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		12a			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year		12b			
13 Section 501(c)(29) qualified nonprofit health insurance issuers.					
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O		13a			
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		13b			
c Enter the amount of reserves on hand		13c			
14a Did the organization receive any payments for indoor tanning services during the tax year?		14a			No
b If "Yes," has it filed a Form 720 to report these payments? <i>If "No," provide an explanation in Schedule O</i>		14b			
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N		15			No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O		16			No

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in 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 in Schedule O		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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?	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		No
6	Did the organization have members or stockholders?		No
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?		No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	Yes	
8b	Each committee with authority to act on behalf of the governing body?	Yes	
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 in Schedule O		No

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?		No
10b	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?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	Yes	
11b	Describe in 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	Yes	
12b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	Yes	
12c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	Yes	
13	Did the organization have a written whistleblower policy?	Yes	
14	Did the organization have a written document retention and destruction policy?	Yes	
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?		
15a	The organization's CEO, Executive Director, or top management official	Yes	
15b	Other officers or key employees of the organization	Yes	
	If "Yes" to line 15a or 15b, describe the process in 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?		No
16b	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: PA

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (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 in Schedule O)

19 Describe in 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
 ▶ MONICA RUANO-WENRICH 501 WASHINGTON STREET PO BOX 702 READING, PA 196030702 (610) 685-4550

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 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 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, or 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 dotted 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)	(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			
See Additional Data Table										

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 dotted 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)	(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			
See Additional Data Table										

1b Sub-Total			
1c Total from continuation sheets to Part VII, Section A			
1d Total (add lines 1b and 1c)		465,123	0
			59,638

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 ▶ **2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>		No
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? <i>If "Yes," complete Schedule J for such individual</i>	Yes	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>		No

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

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 ▶ **0**

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns . . .	1a			
	b Membership dues . . .	1b			
	c Fundraising events . . .	1c			
	d Related organizations	1d			
	e Government grants (contributions)	1e	23,137		
	f All other contributions, gifts, grants, and similar amounts not included above	1f	11,061,340		
	g Noncash contributions included in lines 1a - 1f \$ _____		629,860		
	h Total. Add lines 1a-1f		11,084,477		

Program Service Revenue	Business Code				
2a _____					
b _____					
c _____					
d _____					
e _____					
f All other program service revenue					
9 Total. Add lines 2a-2f					

Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		188,278			188,278	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		b Less rental expenses					
		c Rental income or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b Less cost or other basis and sales expenses		15,191,884			
		c Gain or (loss)		15,067,932			
		d Net gain or (loss)		123,952	123,952		
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
		b Less direct expenses	b				
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities See Part IV, line 19	a					
b Less direct expenses		b					
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances	a						
	b Less cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Business Code					
11a ADMINISTRATION FEES		561000	27,624	27,624			
b _____							
c _____							
d All other revenue							
e Total. Add lines 11a-11d			27,624				
12 Total revenue. See Instructions			11,424,331	151,576	0	188,278	

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

	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.				
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	7,707,268	7,707,268		
2 Grants and other assistance to domestic individuals See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, line 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	524,761	202,395	156,115	166,251
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	1,210,214	396,000	258,901	555,313
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	265,725	69,120	53,443	143,162
10 Payroll taxes	129,095	44,261	31,508	53,326
11 Fees for services (non-employees)				
a Management				
b Legal				
c Accounting	18,299	8,198	2,559	7,542
d Lobbying				
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	277,586	124,359	38,820	114,407
12 Advertising and promotion	158,273	12,832	457	144,984
13 Office expenses	116,651	96,033	6,700	13,918
14 Information technology				
15 Royalties				
16 Occupancy	150,229	48,977	37,359	63,893
17 Travel	44,167	17,762	5,961	20,444
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest				
21 Payments to affiliates	127,068	40,038	32,136	54,894
22 Depreciation, depletion, and amortization	35,918	12,590	7,652	15,676
23 Insurance				
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a MISCELLANEOUS EXPENSES	123,301	22,996	33,265	67,040
b EQUIPMENT RENTAL & MAIN	21,720	4,445	6,117	11,158
c				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	10,910,275	8,807,274	670,993	1,432,008
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 IX

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	3,764,129	2	3,548,890
	3 Pledges and grants receivable, net	8,054,167	3	7,770,358
	4 Accounts receivable, net	18,954	4	54,924
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	35,702	9	35,862
	10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	351,773		
	b Less accumulated depreciation	311,745		
		42,454	10c	40,028
	11 Investments—publicly traded securities	9,719,456	11	9,734,209
	12 Investments—other securities See Part IV, line 11	906,688	12	809,796
	13 Investments—program-related See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets See Part IV, line 11	22,260	15	23,276	
16 Total assets. Add lines 1 through 15 (must equal line 34)	22,563,810	16	22,017,343	
Liabilities	17 Accounts payable and accrued expenses	258,469	17	384,976
	18 Grants payable		18	
	19 Deferred revenue		19	76,863
	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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17 - 24) Complete Part X of Schedule D	1,566,975	25	1,577,492
	26 Total liabilities. Add lines 17 through 25	1,825,444	26	2,039,331
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	4,650,881	27	4,541,252
	28 Temporarily restricted net assets	9,517,733	28	9,165,311
	29 Permanently restricted net assets	6,569,752	29	6,271,449
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	20,738,366	33	19,978,012	
34 Total liabilities and net assets/fund balances	22,563,810	34	22,017,343	

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	11,424,331
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,910,275
3	Revenue less expenses Subtract line 2 from line 1	3	514,056
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	20,738,366
5	Net unrealized gains (losses) on investments	5	-1,177,518
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 in Schedule O)	9	-96,892
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	19,978,012

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990 Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- b** Were the organization's financial statements audited by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both
 Separate basis Consolidated basis Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in 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 Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Software ID:**Software Version:****EIN:** 23-1655375**Name:** UNITED WAY OF BERKS COUNTY INC

Form 990 (2018)

Form 990, Part III, Line 4a:

MORE THAN 100,000 CHILDREN, FAMILIES AND SENIORS BENEFITTED FROM VITAL HEALTH AND HUMAN SERVICES PROGRAMS FUNDED BY UNITED WAY OF BERKS COUNTY (UWBC) THROUGHOUT 2018 UWBC'S WORK AND INVESTMENTS FOCUS ON FOUR AREAS EDUCATION, INCOME (FINANCIAL STABILITY), HEALTH AND SAFETY NET SERVICES DURING 2018, UWBC INVESTED FUNDING IN 50 PROGRAMS DELIVERED BY 34 AGENCY PARTNERS, AS WELL AS SUPPORTED COMMUNITY INITIATIVES AND PROVIDING VARIOUS ONE-TIME GRANTS ALL PROGRAMS IN WHICH UWBC INVESTS ARE EVALUATED BY OUR COMMUNITY IMPACT CABINET, FOCUS AREA PANELS (FAP) AND ACCOUNTABILITY REVIEWERS, REPRESENTING OVER 60 VOLUNTEER COMMUNITY MEMBERS FROM VARIOUS SECTORS THESE VOLUNTEERS DEDICATE INVALUABLE TIME TO ENSURE UWBC DOLLARS ARE INVESTED IN HIGH-PRIORITY PROGRAMS THAT ADDRESS CRITICAL CURRENT COMMUNITY NEEDS, AS WELL AS PROGRAMS THAT ARE HIGH-PERFORMING CONSISTENTLY, AND EFFECTIVELY DELIVERING A HIGH-QUALITY PROGRAM PRODUCING MEANINGFUL RESULTS FOR PARTICIPANTS ANNUALLY, PROGRAMS RECEIVING UWBC INVESTMENTS ARE REQUIRED TO SUBMIT AN APPLICATION THAT DETAILS HOW UWBC DOLLARS ARE SPENT TO SUPPORT PROGRAMMING, AND THE OUTCOMES ACHIEVED BY CLIENTS THESE OUTCOMES PLAY A CRUCIAL ROLE IN DETERMINING THE EFFECTIVENESS OF UWBC INVESTMENTS IN PROGRAMS AGENCY REPRESENTATIVES ALSO MEET WITH FOCUS AREA PANEL VOLUNTEERS FOR FURTHER DISCUSSION AND EVALUATION OF PROGRAM EFFECTIVENESS UWBC INVESTED IN THE FOLLOWING PROGRAMS IN 2018 EDUCATION FOCUS AREA UWBC BELIEVES THAT EVERYONE CAN PLAY A ROLE IN ENSURING THAT CHILDREN GROW UP TO BE PRODUCTIVE CITIZENS AND MEMBERS OF OUR COMMUNITY THIS BEGINS WITH A GOOD EDUCATION THAT IS THE FOUNDATION FOR A CHILD'S SUCCESS IN WORK AND LIFE, ALONG WITH PROVIDING SUPPORTIVE PROGRAMMING THAT HELPS YOUTH DEVELOP NECESSARY SKILLS FOR THEIR FUTURE TO MEET THIS GOAL, KEY ISSUES ADDRESSED BY UWBC AND ITS SUPPORTED PROGRAMS IN THIS FOCUS AREA INCLUDE EARLY CARE AND SCHOOL READINESS, SCHOOL SUCCESS, AND POSITIVE YOUTH DEVELOPMENT, SINCE THESE ISSUES ARE ALL INTERTWINED IN HELPING CHILDREN REACH THEIR POTENTIAL THESE PROGRAMS IMPACT MORE THAN 25,000 YOUTH IN BERKS COUNTY EARLY CARE AND SCHOOL READINESS - COMMUNITY-LEVEL OUTCOME CHILDREN REACH APPROPRIATE DEVELOPMENTAL MILESTONES -BERKS COUNTY INTERMEDIATE UNIT, CHILDCARE OVER 100 FAMILIES RECEIVED ACCESS TO KEYSTONE STAR RATED 3 OR 4 CHILD CARE FOR THEIR CHILDREN IN 2018 IN UWBC'S INVESTMENT BCIU CHILDCARE PROVIDES QUALITY CHILDCARE SERVICES FOR CHILDREN AGES 13 MONTHS TO 12 YEARS OF AGE BCIU'S DEVELOPMENTAL APPROACH FOCUSES ON OFFERING EXPOSURE TO ACTIVITIES IN THE FOLLOWING AREAS SCIENCE, TECHNOLOGY, ENGINEERING, MATH, LITERACY, MUSIC, CREATIVE ARTS, DRAMATIC PLAY, SOCIAL STUDIES, FINE AND GROSS MOTOR, COOKING, AND FIELD TRIPS FOR SCHOOL AGE STUDENTS CARE IS PROVIDED 12 MONTHS PER YEAR BY HIGHLY TRAINED STAFF BCIU CHILD CARE SETTINGS INCLUDE SCHOOL AGE, PRESCHOOL, TODDLER AND INCLUSION OPPORTUNITIES - COMMUNITY-LEVEL OUTCOME FAMILIES HAVE ACCESS TO AFFORDABLE AND QUALITY EARLY LEARNING EXPERIENCES THAT RESULT IN KINDERGARTEN READINESS - OPPORTUNITY HOUSE, CHILDCARE THE SECOND STREET LEARNING CENTER IS A COMPREHENSIVE COMMUNITY CHILDCARE PROGRAM FOR CHILDREN AGES 6 WEEKS TO 13 YEARS FOCUSING ON CREATIVITY, SOCIALIZATION, AND THE DEVELOPMENT OF HIGH SELF-ESTEEM ACTIVITIES ARE DESIGNED TO MEET THE NEEDS OF EACH INDIVIDUAL CHILD MULTI-CULTURAL AND DEVELOPMENTALLY APPROPRIATE MATERIALS AND EQUIPMENT ARE OFFERED - YMCA OF READING & BERKS COUNTY, CHILDCARE OFFERS A SCIENTIFICALLY-BASED, IMPLEMENTED EARLY CHILDHOOD CURRICULUM THAT ALIGNS WITH THE PENNSYLVANIA LEARNING STANDARDS FOR EARLY CHILDHOOD SINCE PLAY IS THE FOUNDATION FOR YOUNG CHILDREN'S LEARNING AND DEVELOPMENT, THE YMCA PROVIDES WELL-EQUIPPED AND CAREFULLY ARRANGED CLASSROOMS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS GAIN KNOWLEDGE AND DEVELOP SKILLS TO ESTABLISH STRONG FAMILIES AND HELP CHILDREN REACH THEIR POTENTIAL - CENTRO HISPANO, ABIRIENDO PUERTAS/OPENING DOORS PROGRAM AN EVIDENCE-BASED, COMPREHENSIVE TRAINING PROGRAM, DEVELOPED BY AND FOR LATINO PARENTS WITH CHILDREN AGES 0 TO 5, AIMS TO IMPROVE THE OUTCOMES OF THE NATION'S LATINO CHILDREN BY BUILDING THE CAPACITY AND CONFIDENCE OF PARENTS TO BE STRONG AND POWERFUL ADVOCATES IN THEIR CHILDREN'S LIVES ALSO ALIGNS WITH UWBC'S READY SET READ! INITIATIVE - YMCA OF READING & BERKS COUNTY, BABY UNIVERSITY OFFERED AS A 6-WEEK SESSION, EACH PARTICIPANT - A PARENT OR CAREGIVER WITH A CHILD FROM PRENATAL TO FIVE YEARS OLD - RECEIVES A WEEKLY HOME VISIT IN ADDITION TO THE WEEKLY CLASSROOM INSTRUCTION, WHICH INCLUDES EDUCATION ON EARLY CHILDHOOD DEVELOPMENT AND EVIDENCE-BASED PARENTING CURRICULUM SCHOOL SUCCESS- COMMUNITY-LEVEL OUTCOME STUDENTS WILL ACHIEVE ACADEMIC SUCCESS BY IMPROVED ATTENDANCE AND/OR PROMOTION TO THE NEXT GRADE LEVEL -BIG BROTHERS BIG SISTERS OF BERKS COUNTY, MENTORING PROGRAM SERVICES THEIR MISSION IS TO PROVIDE CHILDREN FACING ADVERSITY WITH STRONG AND ENDURING PROFESSIONALLY SUPPORTED 1-TO-1 RELATIONSHIPS THAT CHANGE THEIR LIVES FOR THE BETTER FOREVER THIS IS ACHIEVED THROUGH PROFESSIONALLY-DIRECTED MENTORING PROGRAMS UTILIZING CAREFULLY SCREENED AND TRAINED VOLUNTEERS, AND INCLUDES ONE-TO-ONE PROGRAM, COUL (THE CLUB OF UNMATCHED LITTLES) GROUP-MENTORING, TEEN PROGRAM THAT PROVIDES GROUP-MENTORING, AND SMART (STUDENTS & MENTORS ACHIEVING RESULTS TOGETHER), A SCHOOL-BASED PROGRAM - COMMUNITY-LEVEL OUTCOME STUDENTS WILL PARTICIPATE IN EDUCATIONAL EXPERIENCES DURING THE SUMMER TO MAINTAIN READING SKILLS - BIRDSBORO COMMUNITY MEMORIAL CENTER, OUT OF SCHOOL EDUCATION PROGRAMS THE SUMMER READING PROGRAM FOR YOUTH IN GRADES FIRST THROUGH SIXTH ALLOWS PARTICIPANTS TO PRACTICE AND LEARN NEW STRATEGIES THAT WILL ASSIST THEM IN MAINTAINING CURRENT READING LEVELS, OR INCREASE LEVELS, THROUGHOUT THE SUMMER MONTHS - OLIVET BOYS AND GIRLS CLUB OF READING AND BERKS COUNTY, COMPREHENSIVE YOUTH DEVELOPMENT OLIVET SUMMER CAMP PROGRAMS PICK UP WHEN THE AFTERSCHOOL PROGRAM ENDS, KEEPING YOUTH ENGAGED IN PROGRAMS DURING THE SUMMER MONTHS YOUTH DEVELOPMENT - COMMUNITY-LEVEL OUTCOME BY PARTICIPATING IN DIVERSE, SAFE, AND EFFECTIVE OUT-OF-SCHOOL TIME PROGRAMS, YOUTH WILL DEVELOP ACADEMIC, ARTISTIC, AND/OR LEADERSHIP SKILLS - BIRDSBORO COMMUNITY MEMORIAL CENTER, OUT OF SCHOOL EDUCATION PROGRAMS LITERACY PROGRAMS OFFERED AS PART OF THE AFTERSCHOOL CLUBHOUSE, WHICH ENGAGES STUDENTS GRADES 1-6 STAFF ASSIST STUDENTS WITH HOMEWORK AND READING SUPPORT THE PROGRAM ALSO ENCOMPASSES SOCIAL ACTIVITIES - GIRL SCOUTS OF EASTERN PA, OUTREACH TO AT-RISK GIRLS GIRLS IN FUNDED INITIATIVES PROGRAMS PROVIDE HIGH-QUALITY OUT-OF-SCHOOL-TIME THROUGH EDUCATION OPPORTUNITIES FOR GIRLS IN UNDERSERVED COMMUNITIES IN THE CITY OF READING GIRLS ATTEND WEEKLY MEETINGS AT CONVENIENT COMMUNITY LOCATIONS BOTH DURING THE SCHOOL YEAR AND IN THE SUMMER - HAWK MOUNTAIN COUNCIL BOY SCOUTS OF AMERICA, TRADITIONAL SCOUTING THIS PROGRAM OPERATES WITHIN THE LOCAL NEIGHBORHOOD AT LOCATIONS PROVIDED BY PARTNERSHIPS THAT HAVE A CONTINUED INTEREST IN CITIZENSHIP TRAINING, PERSONAL FITNESS, AND CHARACTER DEVELOPMENT ADULT VOLUNTEERS ADMINISTER THE PROGRAMS AT ALL LEVELS WITH SUPPORT FROM THE HAWK MOUNTAIN COUNCIL THE LEVEL OF YOUTH LEADERSHIP IS BASED UPON AGE APPROPRIATE ACTIVITIES - HAWK MOUNTAIN COUNCIL BOY SCOUTS OF AMERICA, URBAN SCOUTING SCOUTREACH IS THE HAWK MOUNTAIN COUNCIL'S COMMITMENT TO ENSURING ALL YOUNG PEOPLE HAVE AN OPPORTUNITY TO JOIN SCOUTING, REGARDLESS OF THEIR CIRCUMSTANCES, NEIGHBORHOOD, OR CULTURAL OR ETHNIC BACKGROUND SCOUTREACH IS THE SAME PROGRAM AS SCOUTING IN ANY OTHER AREA BUT IS TYPICALLY AN AFTER-SCHOOL PROGRAM THAT PROVIDES AN ADDITIONAL EMPHASIS ON SPECIAL NEEDS OF PARTICIPANTS, SUCH AS PARENTAL INVOLVEMENT, FINANCIAL ABILITY, ACADEMIC PERFORMANCE, ACCESS TO TECHNOLOGY AND CULTURAL AND LANGUAGE DIFFERENCES UWBC PROVIDED AN INCREASED INVESTMENT TO ASSISTING WITH PILOTING THE NEW STEM SCOUTS WITHIN THE CITY OF READING THIS VALUES-BASED PROGRAM FOCUSES ON SCHOOL SUCCESS AND YOUTH DEVELOPMENT STEM SCOUTS EXPANDS BOY SCOUTING OPPORTUNITIES TO GIRLS SCOUTS SPEND 90 MINUTES PER MEETING WORKING ON SELF-IMPROVEMENT, CRITICAL THINKING, AND HANDS ON EXPERIMENTATION FOCUSING ON TOPICS SUCH AS PHYSICS OF LIGHT, PROPERTIES OF MATTER, MAGNETISM, PROPERTIES OF SOUND, ROBOTICS, ARCHAEOLOGY, AND SPACE - OLIVET BOYS AND GIRLS CLUB OF READING AND BERKS COUNTY, COMPREHENSIVE YOUTH DEVELOPMENT DURING THE SCHOOL YEAR, KIDS ATTEND THEIR CLUBS MONDAY THROUGH FRIDAY, AND PARTICIPATE IN MANY ACTIVITIES AND PROGRAMS THAT ENRICH THEIR LIVES AND HELP MAKE THEM SUCCESSFUL STUDENTS, ATHLETES AND CITIZENS MEMBERS AGES 6-12 PARTICIPATE FROM 2 30-6 00 P M MEMBERS 13 AND OLDER UTILIZE THE CLUBS FROM 6-9 P M THESE PROGRAMS INCLUDE TUTORING, ARTS AND CRAFTS, SPORTS AND RECREATION, COMPUTER AND TECHNOLOGY, LEADERSHIP AND CHARACTER BUILDING, AND COLLEGE ACCESS AND CAREER DEVELOPMENT, VISUAL AND PERFORMING ARTS

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
SCOTT L GRUBER CHAIR	1 00	X		X				0	0	0
JOANNE JUDGE VICE CHAIR	1 00	X		X				0	0	0
LAURIE PEER DIRECTOR	1 00	X						0	0	0
SARA AULESTIA DIRECTOR	1 00	X						0	0	0
PAMELA TERRY BARBEY DIRECTOR	1 00	X						0	0	0
PETER BARBEY DIRECTOR	1 00	X						0	0	0
RAMIRO M CARBONELL DIRECTOR	1 00	X						0	0	0
BRUCE COLE DIRECTOR	1 00	X						0	0	0
PETER CONNORS DIRECTOR	1 00	X						0	0	0
SANTINA CONNORS DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
SHARON DANKS DIRECTOR	1 00	X						0	0	0
STEVEN FISHER ASST SECRETARY/TREASURER	1 00	X		X				0	0	0
AARON FRIES DIRECTOR	1 00	X						0	0	0
SARA GALOSI DIRECTOR	1 00	X						0	0	0
DR JILL HACKMAN DIRECTOR	1 00	X						0	0	0
BARBARA HALL DIRECTOR	1 00	X						0	0	0
ALISA HARRIS DIRECTOR	1 00	X						0	0	0
JOSEPH HARTZ DIRECTOR	1 00	X						0	0	0
KIM HIPPERT-EVERSGERD DIRECTOR	1 00	X						0	0	0
ROBERT HOFFMASTER DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
DANIEL B HUYETT DIRECTOR	1 00	X						0	0	0
ELLEN HUYETT DIRECTOR	1 00	X						0	0	0
MICHAEL KRUT DIRECTOR	1 00	X						0	0	0
NICK MARMONTELLO DIRECTOR	1 00	X						0	0	0
BETH GALLEN MASTROMARINO DIRECTOR	1 00	X						0	0	0
EDWARD MCKEANNEY SR DIRECTOR	1 00	X						0	0	0
DR KHALID MUMIN DIRECTOR	1 00	X						0	0	0
JONI NAUGLE DIRECTOR	1 00	X						0	0	0
SCOTT REHR DIRECTOR	1 00	X						0	0	0
DANIEL SANSARY DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
MICHAEL SCHMIDTLEIN DIRECTOR	1 00	X						0	0	0
DAVID SHAFFER DIRECTOR	1 00	X						0	0	0
SHELLEY SHAFFER DIRECTOR	1 00	X						0	0	0
MEG MCGLINN SHIELDS DIRECTOR	1 00	X						0	0	0
PATRICK SHIELDS DIRECTOR	1 00	X						0	0	0
EDWARD SHUTTLEWORTH DIRECTOR	1 00	X						0	0	0
JEROME T SIMCIK DIRECTOR	1 00	X						0	0	0
TIMOTHY J SIMMONS SECRETARY/TREASURER	1 00	X		X				0	0	0
TIMOTHY SNYDER DIRECTOR	1 00	X						0	0	0
KAREN WANG DIRECTOR	1 00	X						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted 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)	(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			
CHRISTINA WEEBER DIRECTOR	1 00	X						0	0	0
TAMMY L WHITE PRESIDENT	42 00			X				157,118	0	21,262
JEAN MORROW SR VP RESOURCE DEVELOPMENT	42 00			X				96,220	0	10,817
YAMIL SANCHEZ SR VP COMMUNITY IMPACT	42 00			X				115,017	0	10,326
MONICA RUANO-WENRICH SR VP FINANCE & ADMIN	42 00			X				96,768	0	17,233

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2018

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF BERKS COUNTY INC

Employer identification number
23-1655375

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

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

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

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

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

(Complete only if you checked the box on line 5, 7, 8, or 9 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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grant.")	10,132,601	9,889,099	10,574,048	10,883,467	11,084,477	52,563,692
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	10,132,601	9,889,099	10,574,048	10,883,467	11,084,477	52,563,692
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)						1,333,592
6 Public support. Subtract line 5 from line 4						51,230,100

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a)2014	(b)2015	(c)2016	(d)2017	(e)2018	(f)Total
7 Amounts from line 4	10,132,601	9,889,099	10,574,048	10,883,467	11,084,477	52,563,692
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	117,093	111,395	146,400	106,905	188,278	670,071
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	52,139	59,990	142,193	28,761	27,624	310,707
11 Total support. Add lines 7 through 10						53,544,470
12 Gross receipts from related activities, etc (see instructions)					12	

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))	14	95.680 %
15 Public support percentage for 2017 Schedule A, Part II, line 14	15	97.440 %

16a 33 1/3% support test—2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►		(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(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 in 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 five 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 2018 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2017 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for 2018 (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from 2017 Schedule A, Part III, line 17	18	

19a 33 1/3% support tests—2018. 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—2017. 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 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

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

Section B. Type I Supporting Organizations

		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's 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 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>		

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>		

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 in (2), 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>		

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 government entity (see instructions).		
2	Activities Test Answer (a) and (b) below.		
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>	Yes	No
b	Did the activities described in (a) 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 (a) and (b) 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>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>		

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

- 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)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use. Enter 1-1/2% 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 .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 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	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2018 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required-- explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2018			
a From 2013.			
b From 2014.			
c From 2015.			
d From 2016.			
e From 2017.			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2018 from Section D, line 7			
\$			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions			
6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1 If the amount is greater than zero, explain in Part VI See instructions			
7 Excess distributions carryover to 2019. Add lines 3j and 4c			
8 Breakdown of line 7			
a Excess from 2014.			
b Excess from 2015.			
c Excess from 2016.			
d Excess from 2017.			
e Excess from 2018.			

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)

Facts And Circumstances Test

990 Schedule A, Supplemental Information

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	ADMINISTRATION FEES - 2014 AMOUNT \$ 52,139 2015 AMOUNT \$ 59,990 2016 AMOUNT \$ 142,193 2017 AMOUNT \$ 28,761 2018 AMOUNT \$ 27,624

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 the latest information.

OMB No 1545-0047
2018
Open to Public Inspection

Name of the organization
UNITED WAY OF BERKS COUNTY INC

Employer identification number
23-1655375

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

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

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

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

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

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

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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

	Held at the End of the Year	
a Total number of conservation easements	2a	
b Total acreage restricted by conservation easements	2b	
c Number of conservation easements on a certified historic structure included in (a)	2c	
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

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

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

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

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

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

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

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

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

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

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

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

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

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

b Assets included in Form 990, Part X ▶ \$ _____

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

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a 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 programs
 - 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 | |
| d Additions during the year | |
| e Distributions during the year | |
| f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . Yes No
- b** If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	7,503,258	6,578,090	6,479,174	6,554,413	6,373,055
b Contributions	557,141	279,034	1,050	250,000	1,000
c Net investment earnings, gains, and losses	-644,916	952,391	367,955	-62,630	433,937
d Grants or scholarships					
e Other expenditures for facilities and programs	343,754	306,257	270,089	262,609	253,579
f Administrative expenses					
g End of year balance	7,071,729	7,503,258	6,578,090	6,479,174	6,554,413

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as
- a** Board designated or quasi-endowment ▶ 22 770 %
 - b** Permanent endowment ▶ 77 230 %
 - c** Temporarily restricted endowment ▶
- 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
- | | | |
|--|------------|-----------|
| (i) unrelated organizations | Yes | No |
| 3a(i) | Yes | |
| (ii) related organizations | | No |
| 3a(ii) | | No |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | | |
| 3b | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		36,114	35,166	948
d Equipment		279,280	240,200	39,080
e Other		36,379	36,379	0
Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) . . . ▶				40,028

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

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

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. (Column (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	
DUE TO OTHER UNITED WAYS	301,352
DUE TO DESIGNATED AFFILIATED AGENCIES	1,276,140
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	1,577,492

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 FIN 48 (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	8,688,354
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			
a	Net unrealized gains (losses) on investments	2a	-1,177,518	
b	Donated services and use of facilities	2b	139,157	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII)	2d	-96,892	
e	Add lines 2a through 2d		2e	-1,135,253
3	Subtract line 2e from line 1		3	9,823,607
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	1,600,724	
c	Add lines 4a and 4b		4c	1,600,724
5	Total revenue Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)		5	11,424,331

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	9,448,708
2	Amounts included on line 1 but not on Form 990, Part IX, line 25			
a	Donated services and use of facilities	2a	139,157	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII)	2d		
e	Add lines 2a through 2d		2e	139,157
3	Subtract line 2e from line 1		3	9,309,551
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
b	Other (Describe in Part XIII)	4b	1,600,724	
c	Add lines 4a and 4b		4c	1,600,724
5	Total expenses Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)		5	10,910,275

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

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:

Software Version:

EIN: 23-1655375

Name: UNITED WAY OF BERKS COUNTY INC

Supplemental Information

Return Reference	Explanation
PART V, LINE 4	THE ORGANIZATION'S ENDOWMENT CONSISTS OF TEN DONOR-RESTRICTED SUB-FUNDS AND ONE BOARD-DESIGNATED SUB-FUND, ALL OF WHICH ARE TO BE HELD INDEFINITELY, WITH THE INCOME EXPENDABLE FOR OPERATIONS AS DIRECTED BY DONORS OR THE BOARD OF DIRECTORS

Supplemental Information

Return Reference	Explanation
PART X, LINE 2	IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, THE ORGANIZATION ACCOUNTS FOR UNCERTAIN TAX POSITIONS RELATIVE TO UNRELATED BUSINESS INCOME, IF ANY, AS REQUIRED

Supplemental Information

Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	UNREALIZED GAINS/(LOSSES) ON BENEFICIAL INTEREST -96,892

Supplemental Information

Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	DONOR DESIGNATED CONTRIBUTIONS 1,600,724

Supplemental Information

Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS	DONOR DESIGNATED ALLOCATIONS 1,600,724

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

Schedule I (Form 990)

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

OMB No 1545-0047

2018

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Name of the organization UNITED WAY OF BERKS COUNTY INC

Employer identification number 23-1655375

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance...
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

Table with 8 columns: (a) Name and address of organization or government, (b) EIN, (c) IRC section (if applicable), (d) Amount of cash grant, (e) Amount of non-cash assistance, (f) Method of valuation (book, FMV, appraisal, other), (g) Description of noncash assistance, (h) Purpose of grant or assistance. Rows 1-12.

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 63
3 Enter total number of other organizations listed in the line 1 table 5

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
PART I, LINE 2	UNITED WAY JUDICIOUSLY DISTRIBUTES DOLLARS DONATED IN SUPPORT OF THE COMMUNITY'S HEALTH AND HUMAN SERVICES NEEDS, PRIMARILY TO AND THROUGH THE PARTNER AGENCIES ALSO INCLUDED IS THE DAY-TO-DAY SUPPORT AND ASSISTANCE PROVIDED TO THE PARTNER AGENCIES THROUGH SPECIAL AND ROUTINE AGENCY RELATIONS' ACTIVITIES IN 2018, WE ALLOCATED FUNDS TO 37 AGENCY PARTNERS, SUPPORTING OVER 50 PROGRAMS AND SERVICES IN TOTAL, MORE THAN 100,000 BERKS COUNTIANS RECEIVED UNITED WAY-FUNDED SERVICES UNITED WAY CONTINUES ITS EMPHASIS ON COMPLIANCE AND ACCOUNTABILITY PROCEDURES TO ENSURE THE EFFECTIVE AND EFFICIENT OPERATION OF UNITED WAY PARTNER PROGRAMS

Additional Data

Software ID:
Software Version:
EIN: 23-1655375
Name: UNITED WAY OF BERKS COUNTY INC

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
18TH WONDER IMPROVEMENT ASSOCIATION CO READING HOUSING AUTHORITY 300 HANCOCK BLVD READING, PA 19611			5,000				LIVE UNITED GRANT-YOUTH ENGAGEMENT
ALVERNIA UNIVERSITY 400 ST BERNARDINE ST READING, PA 19607		501(C)(3)	6,000				RAPID RESPONSE GRANT TO PROVIDE ASSISTANCE AND OTHER BASIC NEEDS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY 498 BELLEVUE AVENUE READING, PA 19605		501(C)(3)	220,786				PARTNER AGENCY INVESTMENTS
AMERICAN RED CROSS - BERKS COUNTY CHAPTER 701 CENTRE AVENUE READING, PA 19601		501(C)(3)	182,484				PARTNER AGENCY INVESTMENTS DISASTER RESPONSE, VETERANS TRANSPORTATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANTIETAM SCHOOL DISTRICT 100 ANTIETAM ROAD READING, PA 19606			5,000				READY SET READ SUMMER LEARNING GRANT
ANTIETAM VALLEY RECREATION AND COMMUNITY CENTER 905 BYRAM STREET READING, PA 19606		501(C)(3)	5,000				LIVE UNITED GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BARRIO ALEGRIA 140 N 5TH STREET READING, PA 19601		501(C)(3)	5,000				LIVE UNITED GRANT NOURISHMENT CO-OP
BERKS AIDS NETWORKCO- COUNTY WELLNESS 429 WALNUT STREET PO BOX 8626 READING, PA 19603		501(C)(3)	142,902				PARTNER AGENCY INVESTMENTS CASE MGMT FOR OLDER ADULTS, BERKS TEENS MATTER

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERKS COALITION TO END HOMELESSNESS PO BOX 7712 READING, PA 19603		501(C)(3)	10,000				GRANT TO SUPPORT FAMILIES COMING OUT OF HOMELESSNESS
BERKS COALITION TO END HOMELESSNESS PO BOX 7712 READING, PA 19603		501(C)(3)	30,900				PARTER AGENCY INVESTMENTS HOMELESS PREVENTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERKS CONNECTIONSPRETRIAL SERVICES 633 COURT STREET 16TH FLOOR READING, PA 19601		501(C)(3)	98,048				PARTNER AGENCY INVESTMENTS RE-ENTRY PROGRAM
BERKS COUNTY INTERMEDIATE UNIT 111 COMMONS BOULEVARD READING, PA 19612		501(C)(3)	15,000				ONE-TIME SUPPORT OF EARLY LEARNING COALITION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERKS COUNTY INTERMEDIATE UNIT 111 COMMONS BOULEVARD READING, PA 19612		501(C)(3)	15,000				ONE-TIME SUPPORT OF DISPLACED STUDENTS BY HURRICANE MARIA
BERKS COUNTY INTERMEDIATE UNIT 111 COMMONS BOULEVARD READING, PA 19612		501(C)(3)	267,566				PARTNER AGENCY INVESTMENTS CHILD CARE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERKS DEAF & HARD OF HEARING SERVICES 2045 CENTRE AVENUE READING, PA 19605		501(C)(3)	19,444				PARTNER AGENCY INVESTMENTS ADVOCACY AND CLIENT SERVICES
BERKS ENCORE 40 NORTH 9TH STREET READING, PA 19601		501(C)(3)	134,707				PARTNER AGENCY INVESTMENTS MEALS ON WHEELS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BERKS ENCORE 40 NORTH 9TH STREET READING, PA 19601		501(C)(3)	20,000				ONE-TIME GRANT TO SUPPORT TAX PREPARATION SERVICES
BERKS VISITING NURSE ASSOCIATION 1170 BERKSHIRE BOULEVARD WYOMISSING, PA 19610		501(C)(3)	334,821				PARTNER AGENCY INVESTMENTS SKILLED NURSING AND RELATED SERVICES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIG BROTHERSBIG SISTERS OF BERKS COUNTY 303 WINDSOR STREET READING, PA 19601		501(C)(3)	256,031				PARTNER AGENCY INVESTMENTS BIG BROTHERS/SISTERS
BIRDSBORO COMMUNITY MEMORIAL CENTER 201 EAST MAIN STREET BIRDSBORO, PA 19508		501(C)(3)	8,762				ONE-TIME SUPPORT OF AFTER SCHOOL CLUB HOUSE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BIRDSBORO COMMUNITY MEMORIAL CENTER 201 EAST MAIN STREET BIRDSBORO, PA 19508		501(C)(3)	59,850				PARTNER AGENCY INVESTMENTS OUT OF SCHOOL
BOY SCOUTS OF AMERICA - HAWK MOUNTAIN COUNCIL 5027 POTTSVILLE PIKE READING, PA 19605		501(C)(3)	293,029				PARTNER AGENCY INVESTMENTS COMPREHENSIVE YOUTH DEVELOPMENT, SCOUT REACH

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOY SCOUTS OF AMERICA - HAWK MOUNTAIN COUNCIL 5027 POTTSVILLE PIKE READING, PA 19605		501(C)(3)	13,900				ONE-TIME SUPPORT FOR EXPANSION OF STEM SCOUTS PROGRAM
BOYERTOWN AREA MULTI-SERVICE 200 WEST SPRING STREET BOYERTOWN, PA 19512		501(C)(3)	50,625				PARTNER AGENCY INVESTMENTS BASIC NEEDS, SUPPORTIVE SERVICES FOR OLDER ADULTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRANDYWINE HEIGHTS AREA SCHOOL DISTRICT 200 W WEIS STREET TOPTON, PA 19562			5,000				READY SET READ SUMMER LEARNING GRANT
CASA OF BERKS COUNTY 845 N PARK ROAD WYOMISSING, PA 19610		501(C)(3)	30,000				SAFETY NET GRANT TO SUPPORT AT RISK YOUTH

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES DIOCESE OF ALLENTOWN 400 WASHINGTON STREET SUITE 100 READING, PA 19601		501(C)(3)	58,237				PARTNER AGENCY INVESTMENTS CASE MANAGEMENT/COUNSELING FOR VETERANS AND FAMILIES
CENTER FOR MENTAL HEALTH - THE READING HOSPITAL & MEDICAL CENTER PO BOX 16052 READING, PA 19612		501(C)(3)	55,118				PARTNER AGENCY INVESTMENTS CHILDREN PSYCHIATRIC SERVICES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRO HISPANO DANIEL TORRES INC 501 WASHINGTON STREET READING, PA 19601		501(C)(3)	257,226				PARTNER AGENCY INVESTMENTS SOCIAL SERVICES, OPENING DOORS
CENTRO HISPANO DANIEL TORRES INC 501 WASHINGTON STREET READING, PA 19601		501(C)(3)	10,000				ONE-TIME GRANT TO SUPPORT TAX PREPARATION SERVICES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTRO HISPANO DANIEL TORRES INC 501 WASHINGTON STREET READING, PA 19601		501(C)(3)	40,000				ONE-TIME SUPPORT FOR CASE MGMT FOR DISPLACED FAMILIES OF HURRICANE MARIA
CLARE OF ASSISI HOUSE 325 S 12TH STREET READING, PA 19602		501(C)(3)	10,000				ONE-TIME GRANT TO PROVIDE TRANSITIONAL RESIDENTIAL SERVICES AND LIFE SKILLS FOR NON-VIOLENT OFFENDERS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COMMUNITIES IN SCHOOLS OF THE LEHIGH VALLEY 1501 LEHIGH ST 206 ALLENTOWN, PA 18103		501(C)(3)	50,750				PARTNER AGENCY INVESTMENTS INTENSIVE CASE MGMT SERVICES
EASTER SEALS EASTERN PENNSYLVANIA 1040 LIGGETT AVENUE READING, PA 19611		501(C)(3)	350,357				PARTNER AGENCY INVESTMENTS PEDIATRIC THERAPEUTIC RECREATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTER SEALS EASTERN PENNSYLVANIA 1040 LIGGETT AVENUE READING, PA 19611		501(C)(3)	20,000				ONE-TIME GRANT FOR EARLY INTERVENTION SCREENING
FAMILY GUIDANCE CENTER 1235 PENN AVENUE SUITE 205-206 READING, PA 19610		501(C)(3)	426,668				PARTNER AGENCY INVESTMENTS COUNSELING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FAMILY PROMISE OF BERKS COUNTY 325 N 5TH STREET READING, PA 19601		501(C)(3)	15,000				RAPID RESPONSE GRANT
FAMILY PROMISE OF BERKS COUNTY 325 N 5TH STREET READING, PA 19601		501(C)(3)	30,000				VENTURE GRANT TO SUPPORT UNACCOMPANIED HOMELESS YOUTH

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FRIEND INC COMMUNITY SERVICES 658D NOBLE STREET KUTZTOWN, PA 19530		501(C)(3)	160,100				PARTNER AGENCY INVESTMENTS COMMUNITY RESOURCE CONNECTIONS
GIRL SCOUTS OF EASTERN PENNSYLVANIA 330 MANOR ROAD MIQUON, PA 19444		501(C)(3)	126,810				PARTNER AGENCY INVESTMENTS OUTREACH TO MINORITY & AT-RISK GIRLS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOVERNOR MIFFLIN SCHOOL DISTRICT 10 WAVERLY STREET SHILLINGTON, PA 19607			5,000				READY SET READ SUMMER LEARNING GRANT
GREATER BERKS FOOD BANK 1011 TUCKERTON COURT READING, PA 19605		501(C)(3)	69,476				PARTNER AGENCY INVESTMENTS FOOD DISTRIBUTION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GREATER READING MENTAL HEALTH ALLIANCE 1234 PENN AVENUE WYOMISSING, PA 19610		501(C)(3)	126,559				PARTNER AGENCY INVESTMENTS INFORMATION/REFERRAL/ADVOCACY/SUPPORT GROUPS
HABITAT FOR HUMANITY OF BERKS COUNTY 531 CANAL ST SUITE 404 READING, PA 19602		501(C)(3)	36,171				PARTNER AGENCY INVESTMENTS HOMEOWNERSHIP FOR NEEDY FAMILIES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOLY SPIRIT LUTHERAN CHURCH 421 WINDSOR STREET READING, PA 19601		501(C)(3)	5,000				ONE-TIME SUPPORT FOR AFTER SCHOOL PROGRAM WITH OLIVET BOYS & GIRLS CLUB
HOPE RESCUE MISSION 645 N 6TH ST READING, PA 19601		501(C)(3)	25,000				ONE-TIME GRANT TO SUPPORT RENOVATION TO EMERGENCY SHELTER

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HOPE RESCUE MISSION 645 N 6TH ST READING, PA 19601		501(C)(3)	15,000				RAPID RESPONSE GRANT TO ASSIST WITH CASE MGMT FOR GROWING # OF CLIENTS
I M ABLE FOUNDATION 220 N PARK RAOD WYOMISSING, PA 19610		501(C)(3)	5,000				ONE-TIME GRANT TO SUPPORT GROTH OF IM FIT PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH FEDERATION OF READING PA 1100 BERKSHIRE BOULEVARD WYOMISSING, PA 19610		501(C)(3)	74,224				PARTNER AGENCY INVESTMENTS FOOD BANK, CASE MGMT, TRANSPORTATION AND SUPPORTIVE SERVICES
KUTZTOWN STRONG 306 WEST MAIN STREET KUTZTOWN, PA 19530		501(C)(3)	15,000				ONE-TIME GRANT TO SUPPORT INITIATIVE & PREVENTION PROGRAM

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITERACY COUNCIL OF READING-BERKS 35 SOUTH DWIGHT STREET WEST LAWN, PA 19609		501(C)(3)	15,000				RAPID RESPONSE TO SUPPORT ESL CLASSES ELIMINATED BY STATE FUNDING
LITERACY COUNCIL OF READING-BERKS 35 SOUTH DWIGHT STREET WEST LAWN, PA 19609		501(C)(3)	115,095				PARTNER AGENCY INVESTMENTS LITERACY TRAINING & ESL

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LITERACY COUNCIL OF READING-BERKS 35 SOUTH DWIGHT STREET WEST LAWN, PA 19609		501(C)(3)	10,546				RAPID RESPONSE GRANT TO SUPPORT EMERGENCY RENOVATIONS
MARY'SHELTER 615 KENHORST BLVD READING, PA 19611		501(C)(3)	30,000				VENTURE GRANT TO SUPPORT UNACCOMPANIED HOMELESS YOUTH

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MENTORS FOR BERKS YOUTH 400 WASHINGTON ST READING, PA 19601		501(C)(3)	5,000				ONE-TIME GRANT TO SUPPORT MENTORING PROGRAMS FOR YOUTH
MIDPENN LEGAL SERVICES 501 WASHINGTON STREET SUITE 401 READING, PA 19601		501(C)(3)	76,875				PARTNER AGENCY INVESTMENTS LEGAL REPRESENTATION FOR BASIC NEEDS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW JOURNEY COMMUNITY OUTREACH INC 138 S 6TH STREET READING, PA 19602		501(C)(3)	20,000				ONE-TIME GRANT TO SUPPORT SOUP KITCHEN AND FOOD PANTRY PROGRAMS
OLEY VALLEY COMMUNITY LIBRARY 339 MAIN STREET OLEY, PA 19547		501(C)(3)	5,000				LIVE UNITED GRANT STEM ARRIVES AT OVCL

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OLIVET BOYS & GIRLS CLUB OF READING & BERKS COUNTY 1161 PERSHING BOULEVARD READING, PA 19611		501(C)(3)	982,197				PARTNER AGENCY INVESTMENTS COMPREHENSIVE YOUTH DEVELOPMENT
OLIVET BOYS & GIRLS CLUB OF READING & BERKS COUNTY 1161 PERSHING BOULEVARD READING, PA 19611		501(C)(3)	5,000				READY SET READ SUMMER LEARNING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPPORTUNITY HOUSE 430 NORTH SECOND STREET READING, PA 19601		501(C)(3)	15,000				RAPID RESPONSE GRANT TO SUPPORT CODE BLUE FOR WOMEN & CHILDREN
OPPORTUNITY HOUSE 430 NORTH SECOND STREET READING, PA 19601		501(C)(3)	235,761				PARTNER AGENCY INVTS CHILD CARE, SHELTER PROGRAM, CHILDREN'S ALLIANCE CENTER

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
OPPORTUNITY HOUSE 430 NORTH SECOND STREET READING, PA 19601		501(C)(3)	4,000				READY SET READ SUMMER LEARNING GRANT
OUTREACH INC 301 CENTER STREET PO BOX 361 UNION, IA 50258		501(C)(3)	115,625				SUBCONTRACTED GRANT TO SUPPORT ACCESS TO FOOD

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PENN STATE HEALTH - ST JOSEPH'S 2500 BERNVILLE RD BERN TOWNSHIP, PA 19605		501(C)(3)	25,000				ONE TIME GRANT TO SUPPORT EXPANSION OF VEGGIE RX PROGRAM
READING AREA COMMUNITY COLLEGE 10 SOUTH SECOND STREET PO BOX 1706 READING, PA 19603		501(C)(3)	76,158				PARTNER AGENCY INVESTMENTS ESL LANGUAGE CLASSES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
READING PUBLIC LIBRARY 100 SOUTH FIFTH STREET READING, PA 19602		501(C)(3)	25,000				ONE TIME GRANT TO SUPPORT EARLY LITERACY PROGRAMMING
READING PUBLIC LIBRARY 100 SOUTH FIFTH STREET READING, PA 19602		501(C)(3)	5,000				READY SET READ SUMMER LEARNING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
READING RISK REDUCTION PO BOX 1191 READING, PA 19603		501(C)(3)	12,000				ONE-TIME GRANT TO SUPPORT AN EMERGENCY DRUG OVERDOSE RESPONSE INITIATIVE
READING SCHOOL DISTRICT 800 WASHINGTON STREET READING, PA 19601		501(C)(3)	5,000				READY SET READ SUMMER LEARNING GRANT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
READING SCHOOL DISTRICT 800 WASHINGTON STREET READING, PA 19601		501(C)(3)	40,000				VENTURE GRANT TO SUPPORT DISCONNECTED YOUNG ADULT & HOMELESS YOUTH
SAFE BERKS 255 CHESTNUT ST READING, PA 19602		501(C)(3)	187,905				PARTNER AGENCY INVESTMENTS SHELTER, HOTLINE, COUNSELING, CRISIS SERVICES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SALVATION ARMY SERVICE EXTENSION UNITS 701 BROAD STREET PHILADELPHIA, PA 19123		501(C)(3)	44,327				PARTNER AGENCY INVESTMENTS COMMUNITY WELFARE
SERVICE ACCESS MANAGEMENT 19 N 6TH STREET READING, PA 19601		501(C)(3)	5,000				ONE-TIME GRANT TO SUPPORT BERKS INITIATIVE FOR SCHOOL ATTENDANCE PROGRAMMING

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE CHILDREN'S HOME OF READING 1010 CENTRE AVENUE READING, PA 19601		501(C)(3)	69,943				PARTNER AGENCY INVESTMENTS ALTERNATIVE EDUCATION PROGRAM
THE SALVATION ARMY OF READING PO BOX 1099 READING, PA 19602		501(C)(3)	281,596				PARTNER AGENCY INVESTMENTS LEARNING CENTER, SUPPORTIVE HOUSING, SHARE

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THRESHOLD REHABILITATION SERVICES INC 1000 LANCASTER AVENUE READING, PA 19607		501(C)(3)	83,442				PARTNER AGENCY INVESTMENTS EMPLOYMENT SERVICES
TOWER HEALTH PO BOX 16052 READING, PA 19612		501(C)(3)	55,669				PARTNER AGENCY INVESTMENTS SUPPORT MENTAL HEALTH SERVICES AT PRIMARY CARE SITES

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED LABOR COUNCIL OF READING & BERKS COUNTY 1251 N FRONT STREET READING, PA 19601		501(C)(3)	96,771				PROGRAM FUNDING INVESTMENTS
UNITED WAY OF LANCASTER 630 JANET AVENUE LANCASTER, PA 17601		501(C)(3)	60,000				SUBCONTRACTED GRANTS 211 CALL CENTER

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF PENNSYLVANIA 909 GREEN STREET HARRISBURG, PA 17102		501(C)(3)	6,000				SUBCONTRACTED GRANT ALICE PROGRAM (ASSET LIMITED INCOME CONSTRAINED EMPLOYED
WILSON SCHOOL DISTRICT 2601 GRANDVIEW BLVD WEST LAWN, PA 19609			5,000				ONE-TIME GRANT TO SUPPORT KINDERGARTEN READINESS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WOOD-TO-WONDERFUL 1044 N 8TH ST READING, PA 19604		501(C)(3)	5,000				LIVE UNITED GRANT "READING IS TOYRIFIC" PROGRAM
YMCA OF READING & BERKS COUNTY 631 WASHINGTON STREET READING, PA 19603		501(C)(3)	472,411				PARTNER AGENCY INVESTMENTS CHILD CARE/ HEALTHY YOUTH, RESIDENCE, BABY UNIVERSITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOCOM INSTITUTE FOR ARTS EDUCATION 1100 BELMONT AVE WYOMISSING, PA 19610		501(C)(3)	25,000				ONE-TIME SUPPORT FOR NEIGHBORHOOD BRIDGES PROGRAM

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

2018

Open to Public Inspection

Name of the organization
UNITED WAY OF BERKS COUNTY INC

Employer identification number
23-1655375

Part I Questions Regarding Compensation

	Yes	No		
<p>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</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) </td> </tr> </table>	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax indemnification and gross-up payments <input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)			
<p>b If any of the boxes in 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</p>	1b			
<p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?</p>	2			
<p>3 Indicate which, if any, of the following the filing 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</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee </td> </tr> </table>	<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
<input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations	<input type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee			
<p>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</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III</p>	4a	No		
	4b	No		
	4c	No		
<p>Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.</p> <p>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</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 5a or 5b, describe in Part III</p>	5a	No		
	5b	No		
<p>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</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes," on line 6a or 6b, describe in Part III</p>	6a	No		
	6b	No		
<p>7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p>	7	No		
<p>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</p>	8	No		
<p>9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p>	9			

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.

Return Reference	Explanation
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**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No 1545-0047

2018

▶ **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 the latest information.**

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
UNITED WAY OF BERKS COUNTY INC

Employer identification number
23-1655375

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	33	629,860	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				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ (_____)				
26 Other ▶ (_____)				
27 Other ▶ (_____)				
28 Other ▶ (_____)				

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

29	
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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 three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		No
31	Yes	
32a		No

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?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II

Part II **Supplemental Information.**

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

Return Reference

Explanation

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

UNITED WAY OF BERKS COUNTY INC

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 990-EZ.

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

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number

23-1655375

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 2	<p>OAKBROOK COLLECTIVE IMPACT COUNCIL - EXPANDED SERVICES UNITED WAY'S EFFORTS IN THE OAKBROOK HOUSING NEIGHBORHOOD IS CENTERED ON FIRST LEARNING FROM RESIDENTS WHAT THEY BELIEVE TO BE THEIR MOST CRITICAL ISSUES ALTHOUGH CENSUS DATA CAN POINT TO CRITICAL ISSUES LIKE LOW EDUCATION ATTAINMENT, BELOW POVERTY INCOME LEVELS, AND/OR HEALTH DISPARITIES, WE TOOK AN APPROACH OF GIVING RESIDENTS THE OPPORTUNITY TO CONFIRM WHAT SOME EXTERNAL SOURCES ALREADY NOTE OF THIS COMMUNITY AND/OR PROVIDE ADDITIONAL INSIGHT TO THEIR CHALLENGES ONE OF THE MANY NOTEWORTHY FINDINGS FROM OUR DOOR TO DOOR SURVEY WAS HEARING DIRECTLY FROM RESIDENTS THEIR CHALLENGE TO MEET THE HOUSEHOLD FOOD DEMAND WE LEARNED THAT 50% OF THE FAMILIES WHO PARTICIPATED IN THE SURVEY WORRIED ABOUT RUNNING OUT OF FOOD AND 39% OF THE PARTICIPANTS ACTUALLY RAN OUT OF MONEY TO BUY ENOUGH FOOD BY THE END OF EACH MONTH IN THE ARTICLE, THE NEGATIVE EFFECTS OF POVERTY & FOOD INSECURITY ON CHILD DEVELOPMENT, THE AUTHORS CHILTON, C HYATTE, AND BREAUX EXPLAIN THAT "AS DEVELOPMENT EXPERTS LEARN MORE ABOUT THE IMPORTANCE OF THE FIRST THREE YEARS OF LIFE, THERE IS GROWING RECOGNITION THAT INVESTMENTS IN EARLY EDUCATION, MATERNAL-CHILD ATTACHMENT AND NURTURANCE, AND MORE CREATIVE NUTRITION INITIATIVES ARE CRITICAL TO HELP BREAK THE CYCLE OF POVERTY EVEN THE SLIGHTEST FORM OF FOOD INSECURITY CAN AFFECT A YOUNG CHILD'S DEVELOPMENT AND LEARNING POTENTIAL THE RESULT IS THE PERPETUATION OF ANOTHER GENERATION OF POVERTY " AS A RESULT OF INFORMATION LEARNED FROM THE DOOR TO DOOR SURVEY, UNITED WAY OF BERKS COUNTY STAFF LAUNCHED A COLLECTIVE IMPACT PROJECT TO BEGIN ADDRESSING ROOT CAUSES TO THE CHALLENGES IDENTIFIED WITH UNITED WAY OF BERKS COUNTY STAFF SERVING AS THE BACKBONE, THE OAKBROOK COLLECTIVE IMPACT COUNCIL (OCIC) LAUNCHED IN JANUARY OF 2018 TO DATE, THE COLLECTIVE OF OVER 45 ORGANIZATIONS AND RESIDENT MEMBERS, HAVE CREATED - PREAMBLE THAT HELPS PUT THE OAKBROOK RESIDENTS AT THE CENTER OF THIS WORK - PRIORITIZED LIST OF ISSUES THAT LED TO THE SELECTION OF 1) FOOD INSECURITY/ACCESS AND 2) INCREASED AWARENESS/KNOWLEDGE OF RESOURCES AS THE TOP TWO ISSUES TO ADDRESS - PROBLEM STATEMENTS TO BEST ARTICULATE THE ISSUES SELECTED FROM THE SURVEY AND PRIORITIZATION PROCESS - DRAFTED 3 GOALS TO HELP SET DESIRED OUTCOMES BY OCIC - DRAFTED 4 KEY STRATEGIES TO DELIVER ON THE GOALS THE OCIC AND SURVEY DATA COLLECTED HAVE ALSO INSPIRED OTHER FOCUSED RESPONSES TO ISSUES IDENTIFIED AND/OR PARTNERSHIPS, SUCH AS - SUMMER READING PROGRAM PARTNERSHIP BETWEEN THE READING HOUSING AUTHORITY, READING SCHOOL DISTRICT, BERKS COMMUNITY HEALTH CENTER, AND UNITED WAY OF BERKS COUNTY - ROCK THE BLOCK PARTIES A FUN WAY TO BRING RESIDENTS OUT TO MEET AGENCIES AND LEARN ABOUT RESOURCES AVAILABLE TO THEM - INCREASED RESIDENT ENGAGEMENT AND ELEVATED THE VOICE OF OAKBROOK RESIDENTS - PROVIDED FINANCIAL ASSISTANCE TO SUPPORT READING HOUSING AUTHORITY RESIDENT COUNCILS (VIA ALVERNIA UNIVERSITY GRADUATE STUDENT) THE NEXT PART OF OUR OCIC WORK</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 2	ORK INVOLVES CREATING WORK GROUPS TO ADDRESS THE STRATEGIES AND CREATING A LIST OF TACTICS UNDER EACH STRATEGY THE TACTICS PROVIDE THE OPERATIONAL GUIDE FOR HOW THE WORK WILL BE ACCOMPLISHED THREE WORK GROUPS HAVE BEEN IMPLEMENTED 1) COMMUNICATIONS, 2) RESIDENT ENGAGEMENT AND 3) RESOURCES THE PREAMBLE, OR MESSAGE TO THE COMMUNITY STATES OAKBROOK RESIDENTS ARE THE FOUNDATION ON WHICH WE BUILD A COLLABORATION OF SUPPORT THROUGH PARTNERSHIPS WITH A DIVERSE REPRESENTATION OF RESIDENTS, COMMUNITY ORGANIZATIONS AND BUSINESSES, THE OAK BROOK COLLECTIVE IMPACT COUNCIL (OCIC) IS COMMITTED TO IMPROVING THE OVERALL HEALTH OF THE OAKBROOK COMMUNITY AND PROVIDING A SUPPORT STRUCTURE TO ENSURE EACH RESIDENT HAS THE OPPORTUNITY TO SUCCEED

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART III, LINE 4A	<p>EDUCATIONAL CASE MANAGEMENT - COMMUNITY-LEVEL OUTCOME INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES - COMMUNITIES IN SCHOOLS (CIS), INTEGRATED STUDENT SUPPORT THE C IS MODEL OF INTEGRATED STUDENT SUPPORT OPERATES THROUGH THE COORDINATION AND DELIVERY OF SCHOOL-WIDE SUPPORT, GROUP-LEVEL SUPPORT, AND INDIVIDUALIZED SUPPORT FOCUSING ON IMPROVING ATTENDANCE, BEHAVIOR, AND ACADEMIC PERFORMANCE AT THE READING INTERMEDIATE HIGH SCHOOL, C IS IS WORKING TO ESTABLISH AND STRENGTHEN RELATIONSHIPS WITH STUDENTS, FAMILIES, SCHOOL DISTRICT STAFF, AND COMMUNITY PARTNERS - CHILDREN'S HOME OF READING (CHOR), ALTERNATIVE EDUCATION PROGRAMS CHOR DAY ACADEMY PROVIDES A COMPREHENSIVE EDUCATIONAL ENVIRONMENT FOR ITS STUDENTS THE ULTIMATE GOAL OF THIS PROGRAM IS TO HELP THE STUDENTS MODIFY THEIR BEHAVIOR SO THAT THEY CAN SUCCESSFULLY RE-ENTER PUBLIC SCHOOL THIS IS ACCOMPLISHED THROUGH A PROGRESSIVE LEVEL SYSTEM THAT PROVIDES FREQUENT REWARDS AND REINFORCEMENT, AS WELL AS A POSITIVE SCHOOL-WIDE BEHAVIORAL INTERVENTION SYSTEM READY SET READ! THIRD GRADE READING PROFICIENCY IS A KEY INDICATOR OF FUTURE SUCCESS, YET RECENT PSSA SCORES SHOW THAT A HIGH PERCENT OF THIRD GRADERS IN BERKS COUNTY FALL SHORT OF BEING PROFICIENT LAUNCHING IN 2012, READ Y SET READ! (RSR) IS A COLLABORATION AMONG UNITED WAY OF BERKS COUNTY, THE EDUCATIONAL AND BUSINESS COMMUNITIES AND COMMUNITY ORGANIZATIONS WORKING TO IMPROVE READING PROFICIENCY FOR STUDENTS BY THE END OF THIRD GRADE THE COLLECTIVE WORK FOCUSES ON FOUR KEY STRATEGIES IMPLEMENT SCHOOL-READINESS ACTIVITIES FOR PRE-SCHOOL CHILDREN TO SUPPORT LANGUAGE AND PRE -LITERACY DEVELOPMENT IN YOUNG CHILDREN, CONNECT TUTORS WITH EARLY GRADE STUDENTS NEEDING SUPPLEMENTAL INSTRUCTION, ENGAGE PARENTS TO PROMOTE LITERACY AND MOBILIZE THE COMMUNITY AROUND THIS WORK DURING 2018, UWBC CONTINUED TO ENGAGE WITH LECTIO, A BOSTON-BASED CONSULTING ORGANIZATION SPECIALIZING IN COMMUNITY-BASED EARLY LITERACY PROGRAMS TO REDESIGN AND IMPROVE RSR PROGRAMMING RSR 2018 PROGRAM OVERVIEW - STAR READERS PROVIDES TUTORS TO 29 ELEMENTARY SCHOOLS IN 12 SCHOOL DISTRICTS AND IS DELIVERED BY OVER 450 VOLUNTEER TUTORS SERVING OVER 500 STUDENTS IN 1ST, 2ND AND 3RD GRADES - GROWING READERS LATINO-OWNED CHILDCARE CENTERS IN THE CITY OF READING RECEIVE COACHING AND MENTORING SERVICES ALONG WITH CURRICULUM SUPPORT TO ENHANCE LITERACY DEVELOPMENT FOR THEIR STUDENTS GROWING READERS ALSO OFFERS A PROGRAM TO ASSIST CHILDCARE TEACHERS IN OBTAINING THEIR CHILD DEVELOPMENT CREDENTIAL (CDA) THROUGH A PARTNERSHIP WITH READING AREA COMMUNITY COLLEGE - RAISING A READER PROVIDES A BOOK BAG PROGRAM TO PROMOTE HOME BOOK READING ROUTINES IN FIVE READING ELEMENTARY SCHOOLS AND FIVE HEAD START CENTERS (54 TOTAL CLASSROOMS) VOLUNTEERS ALSO ASSIST WITH THE IMPLEMENTATION OF THIS PROGRAM, REVIEWING AND ROTATING THE BOOK BAGS ON A WEEKLY BASIS - EARLY LITERACY IS INCORPORATED INTO PEDIATRIC PRACTICES THROUGH REACH OUT AND READ, PROVIDING PARENTS TOOLS TO HELP PREPARE</p>

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FORM 990, PART III, LINE 4A	<p>THEIR CHILDREN TO LEARN - SUMMER LEARNING GRANTS 2018 THIS COMPETITIVE GRANT WAS OPENED TO RSR PARTNER SCHOOLS, SUMMER LEARNING COALITION MEMBERS, AND OTHER ORGANIZATIONS SERVIN G BERKS COUNTY TITLE 1 STUDENTS THE GRANT WAS DESIGNED TO PROVIDE UP TO \$5,000 IN SUPPORT OF SUMMER LEARNING PROGRAMMING WHICH INCLUDED A LITERACY COMPONENT UP TO AND INCLUDING 3RD GRADERS WITH THEIR PROGRAM OCCURRING BETWEEN JUNE - AUGUST 2018 IN 2018, 8 SUMMER PROGRAMS RECEIVED GRANTS TOTALING \$37,767 THIS IMPACTED 1,626 CHILDREN PRE-KINDERGARTEN TO 3RD GRADE - UWBC HAS BEEN WORKING WITH THE OAKBROOK COMMUNITY INCLUDING ORGANIZING A SUMMER READING PROGRAM FOR THE SECOND YEAR THROUGH PARTNERSHIPS WITH BERKS COMMUNITY HEALTH CENTER, CUSTOMERS BANK, READING HOUSING AUTHORITY AND READING SCHOOL DISTRICT, AND AS A RESULT CONNECTING WITH OVER 80 CHILDREN IN 2018 OF THESE CHILDREN, 43 RECEIVED NEW BIKES AND HELMETS COURTESY OF CUSTOMERS BANK FOR ATTAINING A 75% PARTICIPATION RATE IN THE BOOKS FOR BIKES PROGRAM - YOCUM INSTITUTE FOR ARTS EDUCATION RECEIVED A \$25,000 INVESTMENT FROM UWBC TO SUPPORT NEIGHBORHOOD BRIDGES, A COMPREHENSIVE PROGRAM OF STORYTELLING AND CREATIVE DRAMA THAT IS CURRICULUM-BASED AND DEVELOPS CHILDREN'S CRITICAL AND CULTURAL LITERACY, VOCABULARY, WRITING AND COMMUNICATION SKILLS IT IS RECOGNIZED BY THE U.S. DEPARTMENT OF EDUCATION'S OFFICE OF IMPROVEMENT AND INNOVATION AS AN EFFECTIVE MODEL FOR INTEGRATING THE ARTS WITH STANDARDS-BASED EDUCATION PROGRAMS THROUGH THE LECTIO PROCESS, NEIGHBORHOOD BRIDGES HAS BEEN IDENTIFIED AS A SUCCESSFUL "CHANGING BEHAVIOR PROGRAM," IMPROVING PSSA PERFORMANCE FOR 3RD GRADE STUDENTS IN THE READING SCHOOL DISTRICT - READING PUBLIC LIBRARY (RPL) RECEIVED A \$25,000 INVESTMENT TO SUPPORT FAMILY LITERACY WITH A DEDICATED BILINGUAL FAMILY LITERACY OUTREACH WORKER WHO PROVIDED LIBRARY PROGRAMS OUTSIDE THE WALLS TO DAYCARE CENTERS, PARKS, PLAYGROUNDS, AND AFTER SCHOOL PROGRAMS DURING THE SUMMER, TWO LIBRARY STAFF TOOK RPL'S MOBILE TECH VAN TO PARKS SUCH AS SCHLEGEL POOL, OAKBROOK COMMUNITY CENTER, BAER PARK, PENDORA PARK AND MORE BOOKS, CRAFTS, AND ACTIVITIES ENGAGED CHILDREN IN PREVENTING SUMMER SLIDE DURING THE SCHOOL YEAR, THE OUTREACH SPECIALIST VISITED HEAD START CLASSROOMS, DAY CARES, AND COMMUNITY CENTERS EARLY LEARNING ACTIVITIES WERE PROVIDED ONCE A MONTH THE OUTREACH SPECIALIST ALSO VISITED ELEMENTARY SCHOOL PTA MEETINGS AND FAMILY EVENTS WITH LIBRARY INFORMATION AND LITERACY ACTIVITIES FINANCIAL STABILITY UNITED WAY OF BERKS COUNTY IS COMMITTED TO EFFORTS THAT HELP INDIVIDUALS AND FAMILIES ACCESS STABLE HOUSING, GAIN JOB SKILLS AND BUILD FINANCIAL LITERACY SO THEY HAVE INCREASED OPPORTUNITIES TO ACHIEVE LONG-TERM FINANCIAL STABILITY THIS IS ACCOMPLISHED THROUGH FUNDING PROGRAMS WITH OUR AGENCY PARTNERS, IN ADDITION TO PROVIDING SPECIAL GRANTS FOR OTHER ORGANIZATIONS HELPING PEOPLE TO ATTAIN FINANCIAL INDEPENDENCE IN DIFFERENT WAYS AFFORDABLE HOUSING - COMMUNITY-LEVEL OUTCOME INDIVIDUALS HAVE ACCESS TO</p>

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FORM 990, PART III, LINE 4A	<p>SAFE AND AFFORDABLE HOUSING - HABITAT FOR HUMANITY OF BERKS COUNTY, INC , HOME CONSTRUCTION/RENOVATION FOR LOW INCOME FAMILIES HABITAT FOR HUMANITY BUILDS, RENOVATES, AND REPAIR S HOMES USING VOLUNTEER LABOR AND DONATIONS TO PROVIDE SAFE, AFFORDABLE HOUSING FOR LOW-IN COME FAMILIES RECIPIENTS OF HOMES INVEST THEIR OWN LABOR, CALLED "SWEAT EQUITY", INTO THE BUILDING/RENOVATION, AND PURCHASE THE HOME THROUGH AN AFFORDABLE FINANCING PROGRAM - COMMUNITY-LEVEL OUTCOME INDIVIDUALS HAVE ACCESS TO TRANSITIONAL OR PERMANENT SUPPORTIVE HOUSING - THE SALVATION ARMY READING CORPS, PERMANENT SUPPORTIVE HOUSING SUPPORTIVE HOUSING PROGRAM OFFERS PERMANENT HOUSING TO CHRONICALLY HOMELESS AND DISABLED ADULTS AND FAMILIES IN 2018, THE PROGRAM IMPACTED 27 FAMILIES, 92 INDIVIDUALS THE PROGRAM INCLUDES RENTAL AS SISTANCE, LANDLORD RELATIONS, LIFE SKILLS TRAINING, MONITORING OF BOTH FISCAL (BUDGET) AND PHYSICAL/MENTAL HEALTH ISSUES, CONNECTION WITH THE SALVATION ARMY'S FAMILY SERVICES PROGRAM, AND OTHER COMMUNITY PROGRAMS SKILLED CASEWORKERS DEVELOP AND MONITOR A 12-POINT ENCOURAGEMENT PLAN FOR EACH INDIVIDUAL AND FAMILY - YMCA OF READING & BERKS COUNTY, TRANSITIONAL HOUSING INDIVIDUALS WHO ARE EXPERIENCING HOMELESSNESS, CHEMICALLY DEPENDENCY, MENTAL HEALTH ISSUES AND SOCIAL SERVICE NEEDS IN BERKS COUNTY HAVE A SAFE AND SECURE PLACE TO STAY THE TRANSITIONAL LIVING PROGRAMS PROVIDE INTENSIVE CASE MANAGEMENT SERVICES AND SUPPORTIVE RESOURCE CONNECTIONS IN AN EFFORT TO ADDRESS AND RESOLVE THE ROOT CAUSES OF HOMELESSNES S, CHEMICAL DEPENDENCY, MENTAL HEALTH AND OTHER SOCIAL SERVICE NEEDS EMPLOYMENT/JOB SKILLS - COMMUNITY-LEVEL OUTCOME UNEMPLOYED AND UNDEREMPLOYED INDIVIDUALS PARTICIPATE IN JOB PREPAREDNESS AND SOFT SKILLS TRAINING, AND RECEIVE SUPPORT TO BETTER CONNECT THEM WITH, AND HELP MAINTAIN, EMPLOYMENT - THRESHOLD REHABILITATION SERVICES, INC , BERKS PERSONNEL NETWORK PROVIDES COMPREHENSIVE EMPLOYMENT SERVICES DESIGNED TO SUPPORT AND EMPOWER PEOPLE WITH DISABILITIES TO OBTAIN AND MAINTAIN COMPETITIVE EMPLOYMENT IN THE COMMUNITY THE SERVICES ARE INDIVIDUALLY TAILORED TO MEET EACH PERSON'S AREAS OF NEED ACTIVITIES MAY INCLUDE CAREER EXPLORATION, RESUME AND EMPLOYMENT APPLICATION SUPPORT, JOB INTERVIEW SUPPORT, ADVOCACY, TRANSPORTATION TRAINING, JOB DEVELOPMENT AND PLACEMENT, ON-THE-JOB TRAINING, SERVICE COORDINATION, AND FOLLOW-UP SUPPORT</p>

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FORM 990, PART III, LINE 4A	<p>- BERKS CONNECTIONS PRETRIAL SERVICES, PRISONER REENTRY SERVICES INMATES AT THE BERKS COUNTY JAIL ARE ASSESSED UTILIZING A NATIONALLY-VALIDATED RISK-NEEDS TOOL AND SCREENED FOR POST-RELEASE NEEDS INMATES WHO QUALIFY ARE TRANSFERRED TO THE BERKS COUNTY COMMUNITY REENTRY CENTER (CRC) ALL RESIDENTS ARE ASSIGNED A CASE MANAGER AND RECEIVE AN INDIVIDUALIZED TRANSITION PLAN SECURING STABLE, SUSTAINABLE EMPLOYMENT IS A GOAL THAT BCPS SPENDS THE MOST TIME WORKING ON WITH CLIENTS POST-RELEASE REENTRANTS REVIEW LESSONS LEARNED FROM EMPLOYMENT GROUPS AT THE CRC AND ARE PROVIDED WITH ONGOING COACHING AND SUPPORT TO AID IN OBTAINING AND MAINTAINING EMPLOYMENT CLIENTS RECEIVE DIRECT ASSISTANCE THROUGH JOB LEADS, INTERVIEWING SKILLS PRACTICE, RESUME UPDATES AND SUPPORT UTILIZING THE COMPUTER BASED LEARNING CENTER (CBLC) FOR COMPLETING APPLICATIONS AND CHECKING EMAIL FOR CORRESPONDENCE FROM POTENTIAL EMPLOYERS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS IMPROVE LITERACY AND ENGLISH LANGUAGE SKILLS - LITERACY COUNCIL OF READING-BERKS, LITERACY TRAINING AND ESL ONE-ON-ONE TUTORING MATCHES ADULTS WITH A TRAINED VOLUNTEER TUTOR TO WORK ON THE BASIC SKILLS NEEDED TO GET OR RETAIN A JOB, OR ENTER POST-SECONDARY EDUCATION ESL CLASSES AND ENGLISH-LANGUAGE CIVICS CLASS ARE CONDUCTED WEEKLY, RANGING FROM THE BEGINNING LEVEL TO HIGH ADVANCED LEVEL CLASSES HELP ADULTS LEARN TO SPEAK, READ AND WRITE ENGLISH AND PREPARE THEM FOR SUCCESSFUL CAREERS THEY ALSO OFFER CITIZENSHIP PREPARATION CLASSES, A WORKFORCE DEVELOPMENT PROGRAM, HIGH SCHOOL EQUIVALENCY CERTIFICATION CLASSES, AND MORE - LITERACY COUNCIL OF READING-BERKS, ENGLISH FORWARD INCREASES ACCESS TO ESL CLASSES IN BERKS COUNTY AND IMPROVES THE QUALITY OF ESL INSTRUCTION IN ADULT CLASSROOMS THROUGH INSTRUCTOR TRAINING AND SUPPORT, CLASS ROOM RESOURCE DEVELOPMENT, AND TECHNICAL ASSISTANCE ONCE INSTRUCTORS COMPLETE THE 11-HOUR INSTRUCTOR TRAINING, THEY CAN BEGIN THEIR OWN ESL PROGRAMS THE COUNCIL PROVIDES CONTINUED LEARNING OPPORTUNITIES FOR INSTRUCTORS TO ENSURE THE QUALITY OF ADULT INSTRUCTION ACROSS ALL ESL PROGRAMS - READING AREA COMMUNITY COLLEGE, BILINGUAL ESL PROGRAM SINCE 2008, UNITED WAY HAS PROVIDED A YEARLY GRANT TO READING AREA COMMUNITY COLLEGE TO OFFER ESL CLASSES FOR PEOPLE WITH THE MOST BASIC ENGLISH LANGUAGE SKILLS, OR NONE AT ALL, AND PROVIDE THEM WITH A MORE FLEXIBLE AND CUSTOMIZED LEARNING ENVIRONMENT OVER 1200 STUDENTS HAVE SUCCESSFULLY COMPLETED THE CLASSES, CONSISTING OF 90 HOURS OF INSTRUCTION PROVIDED OVER EACH 11-WEEK SESSION IN 2018, 225 PEOPLE COMPLETED THE PROGRAM MANY STUDENTS HAVE ALSO FURTHERED THEIR FORMAL EDUCATION AND/OR IMPROVED THEIR EMPLOYMENT AS WELL PERSONAL FINANCIAL MANAGEMENT - INDIVIDUALS DEVELOP BASIC FINANCIAL MANAGEMENT SKILLS - BERKS COALITION TO END HOMELESSNESS, HOMELESS PREVENTION - BOYERTOWN AREA MULTI-SERVICE, INC , BASIC NEEDS - FRIEND , INC COMMUNITY SERVICES, COMMUNITY RESOURCE CONNECTIONS - GREATER READING MENTAL HEALTH ALLIANCE, ADVOCACY & SUPPORT G</p>

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<p>FORM 990, PART III, LINE 4A</p>	<p>ROUPS - HABITAT FOR HUMANITY OF BERKS COUNTY, HOME OWNERSHIP OPPORTUNITIES FOR MODERATE INCOME FAMILIES - THE SALVATION ARMY READING CORPS, PERMANENT SUPPORTIVE HOUSING FINANCIAL STABILITY CASE MANAGEMENT - INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES - BERKS COALITION TO END HOMELESSNESS, HOMELESS PREVENTION - BERKS CONNECTIONS PRETRIAL SERVICES, PRISONER REENTRY SERVICES - LITERACY COUNCIL OF READING-BERKS, LITERACY TRAINING AND ESL - THE SALVATION ARMY READING CORPS, PERMANENT SUPPORTIVE HOUSING - YMCA OF READING & BERKS COUNTY, TRANSITIONAL HOUSING HEALTH FOCUS AREA HEALTH IMPACTS EVERY ASPECT OF A PERSON'S LIFE GOOD HEALTH ALLOWS CHILDREN TO LEARN BETTER AND ADULTS TO LIVE MORE PRODUCTIVE, FULLER LIVES THROUGH FUNDING PROGRAMS WITH OUR PARTNER AGENCIES AND OUR INVOLVEMENT IN VARIOUS COMMUNITY COLLABORATIONS, UWBC IS CREATING OPPORTUNITIES FOR PEOPLE TO ACHIEVE THEIR OPTIMAL HEALTH AND INDEPENDENCE PROGRAMS UNITED WAY SUPPORTS ADDRESS BOTH THE PREVENTIVE ASPECT OF PHYSICAL AND MENTAL HEALTH ISSUES, WHILE ALSO ADDRESSING INTERVENTIONAL NEEDS AND IMPACTED 28,000 BERKS RESIDENTS IN 2018 MENTAL HEALTH - COMMUNITY-LEVEL OUTCOME INDIVIDUALS EXPERIENCING BEHAVIORAL HEALTH PROBLEMS RECEIVE SERVICES THAT IMPROVE THEIR ABILITY TO FUNCTION - FAMILY GUIDANCE CENTER, COUNSELING ASSISTS PERSONS IN IMPROVING THEIR QUALITY OF LIFE BY PROVIDING AFFORDABLE, ACCESSIBLE, QUALITY COUNSELING SERVICES THEY UTILIZE QUALIFIED, CREDENTIALLED, COMPETENT STAFF TRAINED IN EVIDENCE-BASED PRACTICE APPROACHES - GREATER READING MENTAL HEALTH ALLIANCE, ADVOCACY AND SUPPORT GROUPS ASSIST INDIVIDUALS, INCLUDING CHILDREN AND THEIR FAMILIES, AS WELL AS ADULTS, WITH MENTAL ILLNESS TO DEVELOP STRATEGIES AND ADVOCATE FOR THEMSELVES IN ORDER TO RECEIVE THE SERVICES THEY NEED - READING HOSPITAL/TOWER HEALTH, PRIMARY CARE/MENTAL HEALTH INTEGRATION THIS PROGRAM INTEGRATES BEHAVIORAL HEALTH IN PRIMARY CARE SETTINGS, WHICH WILL INCREASE ACCESS AND IMPROVE EARLY DETECTION, TREATMENT, AND RECOVERY - SAFEBERKS, COUNSELING SERVICES ARE PROVIDED TO VICTIMS AND SURVIVORS OF DOMESTIC VIOLENCE AND SEXUAL ASSAULT, AS WELL AS FOR THEIR FAMILY MEMBERS, AND SIGNIFICANT OTHERS SERVICES INCLUDE SAFETY PLANNING, GOAL-SETTING, OPTIONS COUNSELING, EDUCATION, AND REFERRALS TO ADDITIONAL SAFEBERKS AND COMMUNITY RESOURCES HEALTH AND WELLNESS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS RECEIVE ADVOCACY AND PREVENTATIVE AND MANAGED CARE FOR CHRONIC DISEASES AND HEALTH CONDITIONS - BERKS DEAF AND HARD OF HEARING SERVICES ADVOCACY AND CLIENT SERVICES SERVICES INCLUDE SIGN LANGUAGE CLASSES, ADVOCACY, SOCIAL EVENTS, HEARING AID ASSISTANCE, AND INTERPRETING SERVICES - BOYERTOWN AREA MULTI-SERVICE, SUPPORTIVE SERVICES FOR OLDER ADULTS SINCE ITS INCEPTION, BAMS HAS PROVIDED CASE MANAGEMENT SERVICES TO FAMILIES AND INDIVIDUALS OVER AGE 60 A CASE MANAGER ASSESSES CLIENT'S NEEDS AND GUIDES THE FAMILY OR INDIVIDUAL TO SERVICES THAT ARE AVAILABLE, MAKING UNIQUE RECOMMENDATIONS BASED ON THE SI</p>

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<p>FORM 990, PART III, LINE 4A</p>	<p>TUATION - CO-COUNTY WELLNESS SERVICES, CASE MANAGEMENT FOR OLDER ADULTS AS HIV HAS TRANSITIONED TO A CHRONIC DISEASE, CASE MANAGEMENT HELPS PEOPLE LIVING WITH HIV BY PROVIDING THEM WITH INFORMATION ABOUT HIV DISEASE, CONNECTING THEM TO MEDICAL CARE SO THEY CAN LIVE WELL WITH HIV, AND MAKING SURE THEY ARE AWARE OF THE SUPPORTIVE SERVICES THEY MAY BE ELIGIBLE FOR - COMMUNITY-LEVEL OUTCOME INDIVIDUALS DEVELOP AND PRACTICE ACTIVE LIFESTYLES - EA STERSEALS EASTERN PENNSYLVANIA, THERAPEUTIC RECREATION SEVERAL THERAPEUTIC PROGRAMS ARE OFFERED THROUGHOUT THE YEAR THAT PROVIDE SOCIAL, FITNESS, COMMUNITY, LIFE SKILLS, AND OUTDOOR RECREATIONAL OPPORTUNITIES PROGRAMS ARE OFFERED FRIDAY EVENINGS, SATURDAYS, AND ALL WEEK LONG DURING THE SUMMER MONTHS IN ADDITION, THERE ARE A NUMBER OF EVENTS THROUGHOUT THE YEAR IN COMMUNITY-BASED SETTINGS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS HAVE ACCESS TO HIGH-QUALITY, PATIENT-CENTERED HEALTH CARE - TOWER HEALTH AT HOME BERKS, SKILLED NURSING AND RELATED SERVICES PATIENTS ARE REFERRED TO THIS PROGRAM BECAUSE THEY HAVE A MEDICAL CONDITION THAT MAY BE TREATED EFFECTIVELY IN THEIR HOME, RATHER THAN A HOSPITAL OR NURSING HOME SETTING AS MEDICAL TECHNOLOGY HAS IMPROVED, MANY TREATMENTS AND RECOVERY SURGICAL PROCEDURES NOW TAKE PLACE IN THE HOME RATHER THAN IN HOSPITALS, NURSING HOMES, OR REHABILITATION FACILITIES NURSES ESTABLISH A PLAN OF CARE THAT INCLUDES A VISIT-FREQUENCY PLAN AND OUTLINES THE TYPES OF CARE NEEDED - COMMUNITY-LEVEL OUTCOME INDIVIDUALS HAVE ACCESS TO HEALTHY FOODS TO IMPROVE THEIR HEALTH - BERKS ENCORE, MEALS ON WHEELS HOME-BOUND, ISOLATED SENIORS AGED 60+ AND HOME-BOUND DISABLED ADULTS UNDER THE AGE OF 60 RECEIVE A HOT, HOME-DELIVERED MEAL, FIVE DAYS A WEEK THIS HOME DELIVERED MEAL SERVICE ENABLES THE HOME-BOUND SENIOR TO LIVE INDEPENDENTLY AS LONG AS POSSIBLE AND RELIEVES THE ISOLATION AND LONELINESS THEY EXPERIENCE SELF-SUFFICIENCY AND INDEPENDENT LIVING - COMMUNITY-LEVEL OUTCOME INDIVIDUALS RECEIVE EARLY ASSESSMENT AND INTERVENTION SERVICES - BERKS ENCORE, MEALS ON WHEELS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS MAINTAIN INDEPENDENT LIVING IN THEIR RESIDENCE - EA STERSEALS EASTERN PENNSYLVANIA, OUTPATIENT THERAPY AT THEIR CENTER IN READING, EA STERSEALS OFFERS PHYSICAL, OCCUPATIONAL AND SPEECH THERAPIES TO HELP CHILDREN OF ALL AGES DEVELOP NEW SKILLS AND IMPROVE THEIR OVERALL LEVEL OF FUNCTIONING - EA STERSEALS EASTERN PENNSYLVANIA, PEDIATRIC CLINICS SPECIALTY MEDICAL CLINICS BRING THE SERVICES OF TOP-QUALITY MEDICAL AND SURGICAL SPECIALISTS TO BERKS COUNTY TO WORK WITH CHILDREN WITH COMPLEX MEDICAL NEEDS EA STERSEALS PROVIDE SPECIALTY PEDIATRIC NEUROLOGY, ORTHOPEDIC, ORTHOTIC AND FEEDING CLINICS ALL UNDER ONE ROOF CLINIC SERVICES ARE OFFERED AT NO CHARGE TO THE FAMILIES</p>

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FORM 990, PART III, LINE 4A	<p>HEALTH CASE MANAGEMENT - INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES - BERKS TEENS MATTER (MANAGED BY CO-COUNTY WELLNESS SERVICES) UNITED WAY IS A FOUNDING PARTNER AND FUNDER IN THE DEVELOPMENT OF BERKS TEENS MATTER, A NEW TEEN PREGNANCY PREVENTION INITIATIVE MANAGED BY CO-COUNTY WELLNESS SERVICES, TO MEASURABLY DECREASE TEEN PREGNANCY RATES THROUGHOUT BERKS COUNTY - BERKS ENCORE, MEALS ON WHEELS - CO-COUNTY WELLNESS SERVICES, CASE MANAGEMENT FOR OLDER ADULTS - EASTERSEALS EASTERN PENNSYLVANIA, OUTPATIENT THERAPY SERVICES - EASTERSEALS EASTERN PENNSYLVANIA, PEDIATRIC CLINICS - SAFE BERKS, COUNSELING COMMUNITY COLLABORATIONS COMMUNITY HEALTH NEEDS ASSESSMENT UNITED WAY ASSISTED READING HOSPITAL/TOWER HEALTH WITH THE NEW COMMUNITY HEALTH NEEDS ASSESSMENT (CHNA) MANDATED TO BE DONE BY NONPROFIT HOSPITALS EVERY THREE YEARS UNDER THE AFFORDABLE CARE ACT, WE USE THIS COLLABORATIVE EFFORT TO GET THE LATEST DATA ON KEY HEALTH ISSUES IN BERKS COUNTY, FOLLOWED BY JOINT PLANNING AND DEVELOPMENT OF NEW PROGRAMS AND STRATEGIES TO BETTER ADDRESS THOSE KEY ISSUES BERKS COMMUNITY HEALTH CENTER TO ASSIST IN MAKING HEALTH CARE EASIER TO OBTAIN FOR BERKS COUNTY RESIDENTS WHO ARE UNINSURED OR UNDERINSURED, UNITED WAY PARTNERED WITH LOCAL HOSPITALS AND OTHER ORGANIZATIONS TO ESTABLISH THE BERKS COMMUNITY HEALTH CENTER (BCHC), WHICH OPERATES OUR COMMUNITY'S TWO FEDERALLY QUALIFIED HEALTH CENTERS AND PROVIDES QUALITY, PRIMARY HEALTH CARE FOR ADULTS AND CHILDREN, REGARDLESS OF ABILITY TO PAY UNITED WAY'S ROLE IN THIS EFFORT INCLUDES PROVIDING STAFF TO SERVE ON THE ADVISORY COUNCIL TO THE BOARD, BUILDING RELATIONSHIPS WITH OTHER COMMUNITY ORGANIZATIONS TO IDENTIFY POTENTIAL CLIENTS, AND ASSISTING WITH MARKETING AND AWARENESS FOR THE CENTER UWBC INVESTED \$25,000 IN PENN STATE HEALTH ST JOSEPH FOR PHASE 2 OF VEGGIE RX PROGRAM WITH MORE FAST FOOD AND CORNER STORES THAN GROCERY OR MARKET OPTIONS, THE CITY OF READING IS CONSIDERED A "FOOD DESERT" IN A 2014 READING FOOD NEEDS ASSESSMENT, RESPONDENTS LISTED AFFORDABILITY AND ACCESSIBILITY AS BARRIERS AND 62 PERCENT CONSUMED VEGETABLES AND FRUIT LESS THAN FOUR TIMES A WEEK RESULTS FROM TWO RECENT COMMUNITY HEALTH NEEDS ASSESSMENTS FOR BERKS COUNTY PRIORITIZE OBESITY AND CHRONIC ILLNESS AS AREAS OF GREATEST NEED OVER 20 PERCENT OF ADULTS SUFFER FROM DIABETES, NEARLY 40 PERCENT HAVE HIGH BLOOD PRESSURE, AND 35 PERCENT ARE CONSIDERED OBESE (HTTP://WWW.THEFUTUREOFHEALTHCARE.ORG/ASSETS/COMMUNITY-HEALTH-NEEDS-ASSESSMENT.PDF) IN RESPONSE TO THESE COMMUNITY NEEDS, PENN STATE HEALTH ST JOSEPH IMPLEMENTED A PREVENTATIVE HEALTHCARE PROGRAM IN WHICH PHYSICIANS AT THEIR DOWNTOWN READING CAMPUS PRESCRIBE VOUCHERS FOR DISCOUNTED FRUITS AND VEGETABLES TO PATIENTS AT-RISK FOR, OR CURRENTLY FACING, FOOD INSECURITY AND/OR DIET-RELATED CHRONIC ILLNESSES THROUGH PARTNERSHIPS WITHIN THE LOCAL COMMUNITY AND ADAPTING THE NATIONALLY USED, EVIDENCE-BASED VEGGIE RX MODEL, PATIENTS REDEEM VOUCHERS AT PARTICIPATING FARMER'S</p>

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FORM 990, PART III, LINE 4A	<p>MARKETS, GROCERY STORES, AND BODEGAS AUGMENTED WITH COOKING DEMONSTRATIONS AND NUTRITION EDUCATION, THIS PROGRAM IS CLOSELY MONITORED TO TRACK KEY PATIENT HEALTH INDICATORS, WHICH EVALUATE PROGRESS AND OVERALL PROGRAM EFFECTIVENESS FAMILYWIZE DISCOUNT PRESCRIPTION DRUG PROGRAM UNITED WAY OF BERKS COUNTY HAS JOINED WITH 1,000 UNITED WAYS ACROSS THE NATION IN LOWERING THE COSTS OF PRESCRIPTION MEDICATION THROUGH ADMINISTERING THE FAMILYWIZE PROGRAM THE FAMILYWIZE DISCOUNT PRESCRIPTION CARD IS AVAILABLE FREE-OF-CHARGE TO ANYONE WHO NEEDS ASSISTANCE IN PAYING FOR PRESCRIPTIONS NOT COVERED BY AN INSURANCE PLAN IN 2018, INDIVIDUALS WERE ASSISTED WITH A PRESCRIPTION DISCOUNT UTILIZING FAMILYWIZE, REPRESENTING \$228,491.91 IN SAVINGS FOR PEOPLE ACROSS THE COUNTY SAFETY-NET SERVICES PART OF UNITED WAY'S MISSION IS TO ENSURE THAT THE BASIC NECESSITIES OF LIFE ARE AVAILABLE FOR THOSE IN NEED UNITED WAY'S PARTNERSHIPS AND FUNDED PROGRAMS PROVIDE A CRUCIAL SAFETY NET FOR VULNERABLE POPULATIONS TO QUICKLY ACCESS HELP AND RECEIVE THE NECESSARY SUPPORT TO HELP THEM HAVE A BETTER QUALITY OF LIFE, BOTH NOW AND IN THE FUTURE MANY OF OUR FUNDED PROGRAMS ARE ALSO TAKING AN ADDED APPROACH TO PROVIDING EMERGENCY SERVICES THAT SIMPLY TAKE CARE OF THE CRISIS AT HAND FOR THEIR CLIENTS, PROGRAMS ARE NOW STARTING TO HELP ADDRESS THE ROOT CAUSES OF WHY A CLIENT NEEDS SAFETY NET SERVICES, TO HOPEFULLY AVOID THE CLIENT REQUIRING THESE TYPES OF SERVICES IN THE FUTURE THE FOLLOWING PROGRAM SUPPORTS MORE THAN 26,000 RESIDENTS IN BERKS COUNTY BASIC NEEDS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS IN CRISIS HAVE THEIR BASIC NEEDS MET - AMERICAN RED CROSS TRI-COUNTY CHAPTER, DISASTER SERVICES DISASTER CYCLE SERVICES PROVIDES IMMEDIATE EMERGENCY ASSISTANCE TO THE RESIDENTS OF BERKS COUNTY WHO HAVE BEEN AFFECTED BY NATURAL OR MAN-MADE DISASTERS TRAINED RED CROSS VOLUNTEERS AND STAFF RESPOND TO DISASTER SITUATIONS AND PROVIDE FOR THE IMMEDIATE EMERGENCY NEEDS OF SHELTER, FOOD, AND CLOTHING ADDITIONAL ASSISTANCE IN OBTAINING LOST MEDICATIONS AND EYEGASSES IS ALSO PROVIDED RED CROSS STAFF CONTINUES TO WORK LONGER TERM WITH CLIENTS THAT NEED HELP WITH RENT OR BEDDING OR REFERRALS FOR HOUSEHOLD FURNISHING IN LARGER DISASTER SITUATIONS, THE RED CROSS IS RESPONSIBLE FOR MASS CARE SHELTERING AND FEEDING OF DISPLACED RESIDENTS RED CROSS ALSO PROVIDES MASS CARE FEEDINGS FOR EMERGENCY RESPONSE PERSONNEL ON THE SCENE OF A DISASTER STAFF AND VOLUNTEERS ARE TRAINED IN RED CROSS DISASTER SERVICES - BERKS COALITION TO END HOMELESSNESS (BCEH), HOMELESS PREVENTION EMERGENCY SOLUTIONS GRANT (ESG) PROGRAM PROVIDES FUNDING FOR RENTAL AND UTILITY ASSISTANCE IF A CLIENT IS UNABLE TO PAY THEIR PORTION OF THE BILL, A REQUEST IS MADE TO BCEH FOR UNITED WAY ASSISTANCE THIS ALLOWS BCEH TO MAKE SURE THE ASSISTANCE GETS TO THE NEEDIEST, IN THE FASTEST AMOUNT OF TIME A CHECK IS MADE OUT TO THE LANDLORD OR UTILITY COMPANY AFTER THE ESG CASE MANAGER HAS DETERMINED THE CLIENT NEED FOR AN OUTSIDE SOURCE</p>

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FORM 990, PART III, LINE 4A	<p>CE OF MATCHING FUNDS - GREATER BERKS FOOD BANK, ACCESS TO FOOD THE WEEKENDER PROGRAM WAS ESTABLISHED TO HELP NOURISH LOW-INCOME, AT-RISK, ELEMENTARY SCHOOL STUDENTS OVER THE WEEK END, A TIME WHEN THEY MAY OTHERWISE GO WITHOUT PROPER NOURISHMENT CHILDHOOD POVERTY, AND AS A RESULT HUNGER, ARE UNFORTUNATELY GROWING PROBLEMS IN BERKS COUNTY ACCORDING TO THE PENNSYLVANIA DEPARTMENT OF EDUCATION, FOOD AND NUTRITION DIVISION, APPROXIMATELY 50% OF BERKS COUNTY ELEMENTARY SCHOOL STUDENTS QUALIFY FOR FREE OR REDUCED LUNCHES, MEANING, THEIR FAMILY IS LIVING IN OR CLOSE TO POVERTY IN 2018, 800 BERKS STUDENTS WERE IMPACTED THROUGH THIS PROGRAM IN ADDITION, THROUGH THE BIG CHEESE 4, OVER 500,000 MEALS WERE PACKAGED AND DONATED TO SUPPORT THE GBFB PROGRAMS AND READING SCHOOL DISTRICT IN JUNE OF 2018 - JEWISH FAMILY SERVICE, SUPPORTIVE SERVICES SUPPORTIVE SERVICES PROGRAM HELPS CLIENTS AND THEIR FAMILIES FACE VARIOUS CHALLENGES INCLUDING HEALTH, AGING, INTERPERSONAL RELATIONSHIPS, TRANSPORTATION, AND FINANCIAL DIFFICULTIES CLIENTS ARE EITHER SELF-REFERRED OR REFERRED TO BY NEIGHBORS, FAMILY MEMBERS, CLERGY, PROFESSIONALS IN THE COMMUNITY, AND THROUGH HOSPITAL OUTREACH VISITS EACH CLIENT IS EVALUATED TO DETERMINE THE APPROPRIATE LEVEL OF SERVICE - JEWISH FAMILY SERVICE, FOOD PANTRY THE FOOD PANTRY IS OFFERED THE THIRD WEDNESDAY OF THE MONTH HELD AT ANOTHER UWBC PARTNER, OLIVET'S PENDORA PARK LOCATION, EACH MONTH 125-150 FAMILIES RECEIVE GROCERIES AT NO COST THROUGH THE FOOD PANTRY VOLUNTEERS ARE ESSENTIAL TO THE RUNNING OF THE PROGRAM, 20 - 25 VOLUNTEERS ASSIST WITH SET UP, UNLOADING THE TRUCK, PLACING FOOD ON TABLES, SIGNING IN CLIENTS, PACKING FOOD FOR DELIVERY TO THE HOME BOUND, BAGGING FRESH PRODUCE, BREAKING DOWN BOXES, MONITORING THE LINE, TRANSLATING TO AID IN THE COMPLETION OF REQUIRED PAPERWORK, AND HELPING CLIENTS CARRY THEIR GROCERIES OUT OF THE BUILDING - MIDPENN LEGAL SERVICES, LEGAL REPRESENTATION TO SECURE BASIC NEEDS LOW-INCOME CLIENTS RECEIVE LEGAL COUNSEL AND ADVICE REGARDING THEIR PARTICULAR LEGAL SITUATION THROUGH MIDPENN'S READING OFFICE MIDPENN WORKS WITH SAFEBERKS TO ENSURE THAT ALL DOMESTIC VIOLENCE SURVIVORS HAVE ACCESS TO THE JUSTICE SYSTEM THEY ARE A MEMBER OF BERKS COALITION TO END HOMELESSNESS (BCEH), AND THROUGH THIS PARTNERSHIP, MIDPENN MAKES AND ACCEPTS REFERRALS ON BEHALF OF INDIVIDUALS WHO REQUIRE THEIR LEGAL SERVICES</p>

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<p>FORM 990, PART III, LINE 4A</p>	<p>- OPPORTUNITY HOUSE, EMERGENCY SHELTER PROVIDES EMERGENCY SHELTER HOUSING TO HOMELESS CHILDREN, WOMEN AND MEN AS WELL AS ON-SITE CASE MANAGEMENT SERVICES, AND CHILDCARE BERKS COUNSELING SERVICES PROVIDES ON-SITE BEHAVIORAL HEALTH COUNSELING AND MEDICAL CARE IS PROVIDED THROUGH THE BERKS COMMUNITY HEALTH CENTER AT 2ND STREET - SALVATION ARMY READING CORPS, FAMILY SERVICES PROGRAM ASSIST CLIENTS RECEIVE EMERGENCY BASIC NEEDS, INCLUDING MONTHLY FOOD DISTRIBUTIONS, CLOTHING DISTRIBUTIONS, AND THROUGH CASE MANAGEMENT PROVIDED UTILITY ASSISTANCE, PRESCRIPTION DRUG ASSISTANCE, RENTAL ASSISTANCE, EDUCATION ABOUT COMMUNITY RESOURCES AND APPROPRIATE REFERRALS THEY ALSO OFFER A YEAR-ROUND FURNITURE BANK - SALVATION ARMY SERVICE EXTENSION UNITS, COMMUNITY WELFARE COVERING THE HAMBURG AREA, THEY PROVIDE IMMEDIATE EMERGENCY ASSISTANCE TO MEET A SHORT-TERM NEED AS A SERVICE UNIT, THEY ARE A VOLUNTEER COMMITTEE IN A REGION WHERE THERE IS NO PROFESSIONAL SALVATION ARMY PERSONNEL EXAMPLES OF SERVICE UNIT EMERGENCY ASSISTANCE PROVIDED INCLUDED GROCERIES, RENTAL ASSISTANCE, FUEL/UTILITIES, MEDICAL/DENTAL/EYE CARE, CLOTHING, SCHOOL SUPPLIES FOR SCHOOL AGED CHILDREN, TEMPORARY SHELTER, AND SEASONAL ASSISTANCE - COMMUNITY-LEVEL OUTCOME VICTIMS OF DOMESTIC VIOLENCE AND/OR SEXUAL ASSAULT ARE ENSURED SAFETY AND SUPPORTIVE SERVICES - OPPORTUNITY HOUSE, CHILDREN'S ALLIANCE CENTER RECEIVES REFERRALS FROM BOTH CHILDREN & YOUTH AND LAW ENFORCEMENT CHILDREN, AGES 3 TO 18, ARE SEEN IN A CHILD FRIENDLY ENVIRONMENT A MULTIDISCIPLINARY APPROACH ALLOWS THE CHILDREN TO BE INTERVIEWED ONLY ONE OR TWO TIMES, REDUCING THE TRAUMA OF CONSTANTLY REPEATING THEIR STORY TO EACH INDIVIDUAL AGENCY PARTNER IF A CHILD DISCLOSES SEXUAL ABUSE DURING THE INTERVIEW, THEY ARE SCHEDULED FOR A MEDICAL EXAM AND A SEXUAL ASSAULT EVALUATION - SAFE BERKS, CRISIS SERVICES SUPPORTS THE SAFE HOUSE PROGRAM, AN EMERGENCY SHELTER TO INDIVIDUALS AND FAMILIES IMPACTED BY DOMESTIC VIOLENCE AND SEXUAL ASSAULT FOR UP TO 60 DAYS ALL DAILY NECESSITIES OF FOOD, CLOTHING, HYGIENE PRODUCTS, IN ADDITION TO SAFETY PLANNING, CASE MANAGEMENT AND CONNECTION TO COMMUNITY RESOURCES, DOMESTIC VIOLENCE AND SEXUAL ASSAULT COUNSELING, CHILDREN'S PROGRAMMING, INCLUDING A READY TO READ PROGRAM, NUTRITION PROGRAMS, RECREATIONAL SUPPORTS ARE PROVIDED CRISIS SERVICES INCLUDES THE EMERGENCY HOTLINE, WITH TEXTING NOW AVAILABLE 24/7/365 IN ENGLISH AND SPANISH THE RAPID RESPONSE PROGRAM PROVIDES SUPPORT TO VICTIMS SEEKING EMERGENCY PROTECTION OR WHO ARE ACCESSING EMERGENCY MEDICAL SERVICES, BASIC CARE, OR RAPE EXAMS AT AREA EMERGENCY ROOMS AND CLINICS - COMMUNITY-LEVEL OUTCOME INDIVIDUALS HAVE ACCESS TO TRANSPORTATION - AMERICAN RED CROSS BERKS COUNTY CHAPTER, VETERANS TRANSPORTATION VETERANS RECEIVE SAFE AND RELIABLE TRANSPORTATION TO AND FROM THE LEBANON VA MEDICAL CENTER TO REACH NECESSARY MEDICAL APPOINTMENTS - BOYERTOWN AREA MULTI-SERVICE, BASIC NEEDS (UNDER AGE 60 POPULATION) - OPPORTUNITY HOUSE, EMERGENCY SHE</p>

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FORM 990, PART III, LINE 4A	<p>LTER - SALVATION ARMY SERVICE EXTENSION UNITS, COMMUNITY WELFARE SAFETY NET CASE MANAGEMENT - COMMUNITY-LEVEL OUTCOME INDIVIDUALS RECEIVE CASE MANAGEMENT TO IMPROVE THEIR LIVES - BOYERTOWN AREA MULTI-SERVICE, BASIC NEEDS (UNDER AGE 60 POPULATION) CASE MANAGER MEETS WITH FAMILIES/INDIVIDUALS TO ASSESS CIRCUMSTANCES AND HELPS PROVIDE SUPPORT DURING A CRISIS SITUATION TO ADDRESS BASIC NEEDS SUCH AS FOOD, HEAT, RENT, PRESCRIPTIONS AND TRANSPORTATION ADDITIONAL SUPPORT IS PROVIDED TO GUIDE CLIENTS TO OTHER PROGRAMS AND SERVICES, INCLUDING EMPLOYMENT SERVICES, TO HELP IMPROVE THEIR SITUATION - CASA OF BERKS COUNTY (COURT APPOINTED SPECIAL ADVOCATE PROGRAM) CASA IS A NATIONAL PROGRAM THAT RECRUITS AND TRAINS VOLUNTEERS TO SERVE AS ADVOCATES FOR CHILDREN WHO HAVE BEEN PLACED IN THE FOSTER CARE SYSTEM THERE ARE CURRENTLY 640 CHILDREN IN THE FOSTER CARE SYSTEM/RESIDENTIAL TREATMENT FACILITIES IN BERKS COUNTY UWBC'S INVESTMENT INCLUDES OPERATIONAL SUPPORT AS WELL TO BUILD UP PROGRAM CAPACITY ALLOWING CASA TO MAKE THEIR PART-TIME VOLUNTEER MANAGER FULL-TIME, THUS INCREASING THE PROGRAM'S CAPACITY FROM 30 TO 45 VOLUNTEERS, WHICH ENABLES CASA TO BETTER SERVE THIS GROWING POPULATION OF YOUTH IN NEED OF SUPPORT - CATHOLIC CHARITIES DIOCESE OF ALLENTOWN, CASE MANAGEMENT AND COUNSELING FOR VETERANS AND THEIR FAMILIES VETERANS ARE ASSESSED BY A CASE MANAGER TO DETERMINE THEIR IMMEDIATE NEEDS A SERVICE PLAN IS CREATED TO IDENTIFY THE GOALS AND ACTION STEPS THE CASE MANAGER WORKS WITH THE VETERAN TO ACCOMPLISH THESE GOALS, WHICH MAY INCLUDE JOB SEARCH, BUDGET COUNSELING AND GUIDANCE, REFERRAL TO BERKS COUNTY VETERAN'S ADMINISTRATION FOR SPECIFIC ASSISTANCE/ENTITLEMENTS, ASSISTANCE WITH APPLICATIONS FOR SUBSIDIZED HOUSING, FOOD STAMPS, AND OTHER LOW-INCOME PROGRAMS FOR WHICH THE VETERAN MAY BE ELIGIBLE - CENTRO HISPANO DANIEL TORRES, INC, INFORMATION AND REFERRAL THE MAJORITY OF CENTRO HISPANO'S CLIENTS ARE EITHER UNEMPLOYED OR UNDEREMPLOYED THEY ARE SEEKING ASSISTANCE OR SERVICES TO HELP THEM IN IMPROVING THE QUALITY OF LIFE FOR THEM AND FOR THEIR FAMILIES INFORMATION AND REFERRAL, INCLUDES CLIENT/SYSTEM ADVOCACY, TRANSLATION AND INTERPRETATION, AND ASSISTANCE AND SUPPORT WITH COMPLETING DOCUMENTATION CENTRO HISPANO ALSO PROVIDES SUPPORT WITH HELPING CLIENTS APPLY FOR BENEFITS THROUGH THE STATE'S COMPASS SYSTEM - FRIEND, INC COMMUNITY SERVICES, COMMUNITY RESOURCE CONNECTIONS SERVING THE KUTZTOWN AREA, CLIENTS ARE REFERRED BY CHURCHES, SCHOOLS, OTHER AGENCIES OR NEIGHBORS THE CASE MANAGER MEETS WITH THE CLIENT TO DETERMINE WHAT SERVICES ARE NEEDED AND WHAT THE CLIENT QUALIFIES FOR IF THERE IS AN IMMEDIATE CRISIS, THE CASE MANAGER WILL WORK WITH THE CLIENT TO ADDRESS THE ISSUE IT COULD INCLUDE EMERGENCY FOOD, ASSISTANCE WITH RENT, HEAT, ELECTRIC THE CLIENT IS REFERRED TO OTHER AGENCIES AND/OR CONNECTED TO OTHER SERVICES DEPENDING ON THEIR NEEDS COMMUNITY COLLABORATION 2-1-1 INFORMATION AND REFERRAL THE 2-1-1 SERVICE PROVIDES PEOPLE WITH INFO</p>

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FORM 990, PART III, LINE 4A	<p>RMATION ABOUT ESSENTIAL HUMAN SERVICES, SUCH AS LOCATING CHILD CARE, FINDING QUALITY CARE FOR AGING PARENTS, NEEDING ASSISTANCE TO MEET BASIC NEEDS OR JOB TRAINING PROGRAMS 2-1-1 CENTERS ARE STAFFED BY TRAINED SPECIALISTS WHO ASSESS THE CALLERS' NEEDS AND REFER THEM TO THE HELP THEY SEEK IN ADDITION, THE CALL CENTER SPECIALISTS, SEVERAL POSSESSING BILINGUA L SKILLS, FACILITATE CALLS AND QUESTIONS FROM THOSE INTERESTED IN VOLUNTEERING OR DONATING ITEMS, SUCH AS FOOD AND CLOTHING 2-1-1 SERVES AS A VALUED COMMUNITY RESOURCE AND SERVES AS A VITAL CONNECTION FOR THOSE NEEDING HELP, AS WELL AS FOR THOSE WANTING TO GIVE HELP A DDITIONALLY, 2-1-1 IS A USEFUL PLANNING TOOL SINCE IT PROVIDES REAL TIME INFORMATION ABOUT THE SCOPE OF ISSUES LOCAL PEOPLE ARE FACING IN 2018, 7,227 CALLS/WEB VISITS/TEXTS/EMAILS WERE RECEIVED TOP NEEDS REQUESTED WERE HOUSING ASSISTANCE (1,672), UTILITY ASSISTANCE (1 ,194), MENTAL HEALTH/ADDICTIONS (518) AND FOOD/MEALS (233) TOP AGENCY REFERRALS INCLUDED CATHOLIC CHARITIES, THE SALVATION ARMY READING CORPS AND FAMILY PROMISE OF BERKS COUNTY, AS WELL AS OTHER LOCAL NONPROFITS AND GOVERNMENT ORGANIZATIONS 2-1-1 PHONE SERVICE IS AVA ILABLE 24 HOURS A DAY, 7 DAYS A WEEK, 365 DAYS A YEAR ONLINE SEARCH CAPABILITY OF THE PA 2-1-1 DATABASE IS ALSO AVAILABLE AT WWW PA211EAST ORG</p>

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FORM 990, PART VI, SECTION A, LINE 2	THE FOLLOWING BOARD MEMBERS ARE RELATED PAMELA AND PETER BARBEY SPOUSES ELLEN AND DANIEL HUYETT SPOUSES MEG AND PAT SHIELDS SPOUSES PETER AND SANTINA CONNORS SPOUSES SHELLEY AND DAVID SHAFFER SPOUSES FIVE MARRIED COUPLES MAINTAIN POSITIONS ON THE UNITED WAY OF BERKS COUNTY BOARD OF DIRECTORS THIS SITUATION OCCURS BECAUSE IT IS A COMMON PRACTICE FOR A HUSBAND AND WIFE TEAM TO SERVE AS CO-CHAIRS OF THE ANNUAL FUND-RAISING CAMPAIGN, WHICH HAS BEEN A VERY SUCCESSFUL AND POPULAR APPROACH WITH THE VOLUNTEERS THE COUPLES REPRESENT PAST, CURRENT AND/OR FUTURE CAMPAIGN CO-CHAIRS NO OTHER BOARD MEMBERS ARE RELATED

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FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 IS REVIEWED AND APPROVED BY THE GOVERNANCE COMMITTEE AND REPORTED TO THE BOARD OF DIRECTORS ANNUALLY PRIOR TO SUBMISSION ALL BOARD MEMBERS RECEIVE A COPY OF THE FORM 990

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FORM 990, PART VI, SECTION B, LINE 12C	<p>DISCLOSURE OF ACTUAL OR POTENTIAL CONFLICTS OF INTEREST AN INTERESTED PARTY IS UNDER A CONTINUING OBLIGATION TO DISCLOSE ANY ACTUAL OR POTENTIAL CONFLICT OF INTEREST AS SOON AS IT IS KNOWN, OR REASONABLY SHOULD BE KNOWN AN INTERESTED PARTY SHALL COMPLETE A QUESTIONNAIRE/DISCLOSURE STATEMENT, IN THE FORM ATTACHED TO FULLY AND COMPLETELY DISCLOSE THE MATERIAL FACTS ABOUT ANY ACTUAL OR POTENTIAL CONFLICTS OF INTEREST THE DISCLOSURE STATEMENT SHALL BE COMPLETED UPON HIS OR HER ASSOCIATION WITH UNITED WAY OF BERKS COUNTY AND SHALL BE UPDATED ANNUALLY AN ADDITIONAL DISCLOSURE STATEMENT SHALL BE COMPLETED AT SUCH TIMES AS AN ACTUAL POTENTIAL CONFLICT ARISES FOR BOARD MEMBERS, THE DISCLOSURE STATEMENTS SHALL BE PROVIDED TO THE PRESIDENT, WHO WILL REVIEW THE DISCLOSURE STATEMENTS AND PRESENT A SUMMARY OF THE FINDINGS TO THE GOVERNANCE COMMITTEE THE GOVERNANCE COMMITTEE SHALL REVIEW THE SUMMARY OF THE FINDINGS PREPARED BY THE PRESIDENT AND PRESENT A REPORT TO THE EXECUTIVE COMMITTEE IN THE SPRING OF EACH YEAR IN THE CASE OF MEMBERS OF THE FINANCE COMMITTEE, THE INVESTMENT COMMITTEE AND THE AUDIT COMMITTEE, THE DISCLOSURE STATEMENTS SHALL BE PROVIDED TO THE PRESIDENT, WHO WILL REVIEW THE DISCLOSURE STATEMENTS AND PRESENT A SUMMARY OF THE FINDINGS TO THE EXECUTIVE COMMITTEE IN THE SPRING OF EACH YEAR IN THE CASE OF STAFF, THE DISCLOSURE STATEMENTS SHALL BE PRESENTED TO THE SENIOR VICE PRESIDENT FINANCE & ADMINISTRATION, WHO WILL REVIEW THE DISCLOSURE STATEMENTS AND PRESENT A SUMMARY OF THE FINDINGS TO THE PRESIDENT IN THE SPRING OF EACH YEAR IN THE CASE OF THE SENIOR VICE PRESIDENT FINANCE & ADMINISTRATION, THE DISCLOSURE STATEMENT SHALL BE PROVIDED TO THE PRESIDENT THE PRESIDENT SHALL PROVIDE HIS/HER DISCLOSURE STATEMENT TO THE CHAIRMAN OF THE BOARD THE PRESIDENT SHALL FILE THE VOLUNTEER DISCLOSURE STATEMENTS WITH THE OFFICIAL CORPORATE RECORDS OF UNITED WAY OF BERKS COUNTY THE SENIOR VICE PRESIDENT FINANCE & ADMINISTRATION SHALL FILE THE STAFF DISCLOSURE STATEMENTS WITH OTHER EMPLOYEE RECORDS GENERAL PROCEDURES FOR THE REVIEW OF ACTUAL OR POTENTIAL CONFLICTS WHENEVER THERE IS REASON TO BELIEVE THAT AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST EXISTS BETWEEN UNITED WAY OF BERKS COUNTY AND AN INTERESTED PARTY, THE BOARD OF DIRECTORS, UPON THE RECOMMENDATION OF THE EXECUTIVE COMMITTEE OR THE GOVERNANCE COMMITTEES, SHALL DETERMINE THE APPROPRIATE ORGANIZATIONAL RESPONSE THIS SHALL INCLUDE, BUT IS NOT NECESSARILY LIMITED TO, INVOKING THE PROCEDURES DESCRIBED IN SECTION V BELOW, WITH RESPECT TO A SPECIFIC PROPOSED ACTION OR TRANSACTION WHERE THE ACTUAL OR POTENTIAL CONFLICT INVOLVES AN EMPLOYEE OF UNITED WAY OF BERKS COUNTY OTHER THAN THE PRESIDENT, THE PRESIDENT SHALL, IN THE FIRST INSTANCE, BE RESPONSIBLE FOR REVIEWING THE MATTER AND MAY TAKE APPROPRIATE ACTION AS NECESSARY TO PROTECT THE INTERESTS OF UNITED WAY OF BERKS COUNTY THE PRESIDENT SHALL DETERMINE WHETHER THE RESULTS OF ANY REVIEW AND ACTION SHALL BE REPORTED TO THE CHAIRMAN WHEN REPORT</p>

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FORM 990, PART VI, SECTION B, LINE 12C	<p>ED TO THE CHAIRMAN, THE CHAIRMAN IN CONSULTATION WITH THE EXECUTIVE COMMITTEE, SHALL DETERMINE IF ANY FURTHER BOARD REVIEW OR ACTION IS REQUIRED. PROCEDURES FOR ADDRESSING CONFLICTS OF INTEREST SPECIFIC TRANSACTIONS WHERE AN ACTUAL OR POTENTIAL CONFLICT EXISTS BETWEEN THE INTERESTS OF UNITED WAY OF BERKS COUNTY AND AN INTERESTED PARTY WITH RESPECT TO A SPECIFIC PROPOSED ACTION OR TRANSACTION, THE UNITED WAY OF BERKS COUNTY SHALL REFRAIN FROM THE PROPOSED ACTION OR TRANSACTION UNTIL SUCH TIME AS THE PROPOSED ACTION OR TRANSACTION HAS BEEN APPROVED BY THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS OF THE ORGANIZATION. THE FOLLOWING PROCEDURES MAY APPLY: AN INTERESTED PARTY WHO HAS AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST WITH RESPECT TO A PROPOSED ACTION OR TRANSACTION OF THE ORGANIZATION SHALL NOT PARTICIPATE, AND MAY BE EXCUSED FROM THE DELIBERATIONS AND DECISION MAKING, WITH RESPECT TO SUCH ACTION OR TRANSACTION UPON REQUEST BY THE BOARD. THE INTERESTED PARTY MAY ANSWER QUESTIONS OR PROVIDE MATERIAL OR FACTUAL INFORMATION ABOUT THE PROPOSED ACTION OR TRANSACTION. THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS MAY APPROVE THE PROPOSED ACTION OR TRANSACTION UPON FINDING THAT IT IS IN THE BEST INTERESTS OF UNITED WAY OF BERKS COUNTY. THE BOARD SHALL CONSIDER WHETHER THE TERMS OF THE PROPOSED TRANSACTION ARE FAIR AND REASONABLE TO THE UNITED WAY OF BERKS COUNTY AND WHETHER IT WOULD BE POSSIBLE, WITH REASONABLE EFFORT, TO FIND A MORE ADVANTAGEOUS ARRANGEMENT WITH A PARTNER OR ENTITY THAT IS NOT AN INTERESTED PARTY. APPROVAL BY THE DISINTERESTED MEMBERS OF THE BOARD OF DIRECTORS SHALL BE BY VOTE OF A MAJORITY OF DIRECTORS IN ATTENDANCE AT A REGULAR OR SPECIAL MEETING OF THE BOARD OF DIRECTORS. AN INTERESTED PARTY SHALL NEITHER BE COUNTED FOR PURPOSES OF DETERMINING WHETHER A QUORUM IS PRESENT NOR FOR THE PURPOSES OF DETERMINING WHAT CONSTITUTES A MAJORITY VOTE OF DIRECTORS IN ATTENDANCE. THE MINUTES OF THE MEETING SHALL REFLECT THAT THE CONFLICT DISCLOSURE WAS MADE, THE VOTE TAKEN AND, WHERE APPLICABLE, THE ABSTENTION FROM VOTING AND PARTICIPATION BY THE INTERESTED PARTY. VIOLATIONS OF CONFLICT OF INTEREST POLICY IF THE BOARD OF DIRECTORS HAS REASON TO BELIEVE THAT AN INTERESTED PARTY HAS FAILED TO DISCLOSE AN ACTUAL OR POTENTIAL CONFLICT OF INTEREST, IT SHALL INFORM THE PERSON OF THE BASIS FOR SUCH BELIEF AND AFFORD THE PERSON AN OPPORTUNITY TO EXPLAIN THE ALLEGED FAILURE TO DISCLOSE. IF, AFTER HEARING THE RESPONSE OF THE INTERESTED PARTY AND MAKING SUCH FURTHER INVESTIGATION AS MAY BE WARRANTED IN THE CIRCUMSTANCES, THE BOARD DETERMINES THAT THE INTERESTED PARTY HAS IN FACT FAILED TO DISCLOSE AN ACTUAL OR POSSIBLE CONFLICT OF INTEREST, IT SHALL TAKE APPROPRIATE CORRECTIVE ACTION.</p>

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<p>FORM 990, PART VI, SECTION B, LINE 15</p>	<p>EXECUTIVE COMPENSATION PROCEDURES UNITED WAY OF BERKS COUNTY'S PRIMARY OBJECTIVE IS TO PR OVIDE A REASONABLE AND COMPETITIVE EXECUTIVE COMPENSATION OPPORTUNITY CONSISTENT WITH COMP ENSATION PRACTICES FOR INDIVIDUALS POSSESSING THE EXPERIENCE AND SKILLS NEEDED TO IMPROVE THE OVERALL PERFORMANCE OF THE ORGANIZATION THE ORGANIZATION'S EXECUTIVE COMPENSATION PHI LOSOPHY IS DESIGNED TO - ENCOURAGE THE ATTRACTION AND RETENTION OF A HIGH CALIBER EXECUTI VE - REINFORCE THE GOALS FOR THE ORGANIZATION BY SUPPORTING TEAMWORK AND COLLABORATION - E NSURE THAT PAY IS PERCEIVED TO BE FAIR AND EQUITABLE - BE FLEXIBLE TO REWARD INDIVIDUAL AC COMPLISHMENTS AS WELL AS ORGANIZATIONAL SUCCESS - ENSURE THAT THE PROGRAM IS EASY TO EXPLA IN, UNDERSTAND AND ADMINISTER - BALANCE THE NEED TO BE COMPETITIVE WITH THE LIMITS OF AVAI LABLE FINANCIAL RESOURCES THE CHAIRPERSON OF THE BOARD LEADS THE BOARD OF DIRECTORS IN THE EVALUATION OF THE PRESIDENT'S PERFORMANCE ON AN ANNUAL BASIS THE PRESIDENT PRESENTS TO T HE CHAIRPERSON INFORMATION ON THE ACCOMPLISHMENTS OF THE ORGANIZATION AND ITS PROGRESS TOW ARD ACHIEVING THE GOALS OUTLINED IN THE STRATEGIC PLAN, THE FULFILLMENT OF HIS/HER DUTIES AND RESPONSIBILITIES AS OUTLINED IN THE POSITION DESCRIPTION, AND THE MANNER IN WHICH THE CHALLENGES OF THE ORGANIZATION HAVE BEEN ADDRESSED AND THE OPPORTUNITIES TAKEN THE PRESID ENT ALSO DEFINES AND DISCUSSES CURRENT AND FUTURE ORGANIZATIONAL CHALLENGES AND OPPORTUNIT IES THIS INFORMATION IS SHARED WITH THE BOARD OF DIRECTORS IN ADDITION TO THE ANNUAL REV IEW, A PRESIDENT'S EVALUATION SURVEY IS CONDUCTED SEMI-ANNUALLY WITH FULL BOARD PARTICIPAT ION, THE RESULTS OF WHICH ARE COMPILED AND ANALYZED BY A THIRD-PARTY PROVIDER HAVING NO VE STED INTEREST IN THE OUTCOME OF THIS PROCESS A FORMAL REPORT IS PRESENTED BY THE PROVIDER FIRST TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS FOR INITIAL DISCUSSION, THEN T O THE FULL BOARD OF DIRECTORS AS PART OF AN EXECUTIVE SESSION FOLLOWING THIS SESSION, THE CHAIRPERSON MEETS WITH THE PRESIDENT AND SHARES THE RESULTS OF THE GROUP EVALUATION AS WE LL AS ANY GOALS OR SUGGESTIONS THE BOARD HAS RELATIVE TO THE INFORMATION PRESENTED AND THE FUTURE DIRECTION OF THE ORGANIZATION THE CHAIRPERSON OF THE BOARD COMMUNICATES THE RESUL TS OF THE ASSESSMENT VERBALLY TO THE PRESIDENT AND THE INFORMATION IS CAPTURED THROUGH THE MINUTES OF THE EXECUTIVE SESSIONS FOR EXECUTIVE COMMITTEE AND THE BOARD OF DIRECTORS THE RESULTS OF THE ASSESSMENT ARE INCLUDED IN THE PRESIDENT'S PERSONNEL FILE THE LEVEL AND F ORM OF COMPENSATION IS DETERMINED FOLLOWING A REVIEW OF LOCAL COMPENSATION LEVELS OF CEO'S OF ORGANIZATIONS OF SIMILAR SIZE AND SCOPE, AS WELL AS THE COMPENSATION LEVELS OF CEO'S O F UNITED WAY ORGANIZATIONS OF SIMILAR SIZE AND SCOPE WHILE UNITED WAY FOCUSES ON OTHER UN ITED WAYS AND NONPROFITS TO BENCHMARK COMPENSATION, THE ORGANIZATION UNDERSTANDS THAT THE MARKET FOR EXECUTIVE TALENT MAY BE BROADER THAN THE GROUP OF CHARITIES MARKET INFORMATION FROM ADDITIONAL MARKET SEGMEN</p>

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FORM 990, PART VI, SECTION B, LINE 15	<p>TS AND PUBLISHED NOT-FOR-PROFIT COMPENSATION SURVEYS, MAY BE USED AS A SUPPLEMENT THE PRE SIDENT'S ANNUAL COMPENSATION IS COMMUNICATED BOTH VERBALLY AND IN WRITING TO THE PRESIDENT AND IS INCLUDED IN HIS/HER PERSONNEL FILE KEY EMPLOYEE COMPENSATION PROCEDURES COMPENSA TION PROCEDURES FOR KEY EMPLOYEES OF UNITED WAY OF BERKS COUNTY FOLLOW THE ORGANIZATION'S SALARY AND ADMINISTRATION PROGRAM AND THE PERSONNEL POLICIES AS PROVIDED TO ALL STAFF THE COMPETITIVENESS OF THE SALARY STRUCTURE AT UNITED WAY OF BERKS COUNTY WILL BE ASSESSED PE RIODICALLY, AS DETERMINED BY THE PRESIDENT BUT NOT MORE THAN EVERY THREE YEARS, BASED ON S URVEYS OF SALARIES PAID BY OTHER EMPLOYERS FOR SIMILAR WORK AN OUTSIDE HUMAN RESOURCES FI RM NORMALLY DOES THE ASSESSMENT IF THERE IS EVIDENCE OF A CHANGE IN GENERAL SALARY LEVELS , THE SALARY RANGES ARE ADJUSTED ACCORDING TO THE PROGRAM'S OBJECTIVES, WITH THE APPROVAL OF THE EXECUTIVE COMMITTEE (SEE BELOW) THESE ADJUSTMENTS DO NOT CHANGE THE GRADES TO WHIC H POSITIONS ARE ASSIGNED AND DO NOT RESULT IN AUTOMATIC CHANGES IN INDIVIDUAL SALARIES TH E EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS, SITTING AS THE PERSONNEL COMMITTEE, SHALL REVIEW AND APPROVE THE SALARY STRUCTURE THE REVIEW AND APPROVAL NORMALLY FOLLOWS THE ASS ESSMENT DONE BY AN OUTSIDE HUMAN RESOURCES FIRM TO DETERMINE WHETHER CHANGES HAVE OCCURRED IN THE GENERAL SALARY LEVELS THE EXECUTIVE COMMITTEE WILL DETERMINE IF A REPORT ON THE O RGANIZATION'S COMPENSATION PLAN/SALARY STRUCTURE SHALL BE MADE TO THE FULL BOARD OF DIRECT ORS UNITED WAY OF BERKS COUNTY'S POLICY IS THAT SALARY INCREASES ARE BASED ON MERIT AND S HOULD REFLECT AN EMPLOYEE'S CONTRIBUTION TO THE ORGANIZATION IN RELATION TO THE RESPONSIBI LITIES OF HIS OR HER POSITION SALARY INCREASES MAY BE LIMITED BY THE AVAILABILITY OF FUND S THE SALARY ADMINISTRATION PROGRAM THEREFORE HAS BEEN DESIGNED TO PROVIDE THE BEST PERFO RMERS WITH HIGHER PERCENTAGES OF MERIT INCREASES WITH THE EXCEPTION OF SPECIAL TYPES OF S ALARY ADJUSTMENTS, MERIT INCREASES ARE THE ONLY TYPE OF SALARY INCREASES NORMALLY GRANTED</p>

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FORM 990, PART VI, SECTION C, LINE 19	<p>COMPLIANCE WITH PUBLIC INSPECTION REQUIREMENTS IN GENERAL, EXEMPT ORGANIZATIONS MUST MAKE AVAILABLE FOR PUBLIC INSPECTION CERTAIN ANNUAL RETURNS AND APPLICATIONS FOR EXEMPTION, AND MUST PROVIDE COPIES OF SUCH RETURNS AND APPLICATIONS TO INDIVIDUALS WHO REQUEST THEM IN COMPLIANCE WITH THIS REQUIREMENT, UNITED WAY OF BERKS COUNTY ADHERES TO THE FOLLOWING - IN RESPONSE TO A WRITTEN REQUEST AT THE PRINCIPAL OFFICE OF UNITED WAY OF BERKS COUNTY, A COPY OF THE COVERED TAX DOCUMENTS SHALL BE PROVIDED TO THE REQUESTER WITHIN THIRTY (30) DAYS PER IRS GUIDANCE, A REQUEST THAT IS FAXED, E-MAILED OR SENT BY PRIVATE COURIER IS CONSIDERED A WRITTEN REQUEST - IN RESPONSE TO AN IN-PERSON REQUEST AT THE PRINCIPAL OFFICE OF UNITED WAY OF BERKS COUNTY, A COPY OF THE COVERED TAX DOCUMENTS SHALL GENERALLY BE PROVIDED THE DAY OF THE REQUEST - REQUESTS EITHER IN-PERSON OR WRITTEN SHALL BE PROVIDED INFORMATION THAT OFFERS THE REQUESTOR THE OPPORTUNITY TO ACCESS THE DOCUMENTS FREE OF CHARGE VIA THE WEB, OR AT A COST SHOULD A HARD COPY BE REQUESTED - UNITED WAY OF BERKS COUNTY SHALL CHARGE A REASONABLE FEE FOR COPYING COSTS AND THE ACTUAL COST OF POSTAGE BEFORE PROVIDING COPIES OF THE DOCUMENTS REASONABLE FEES FOR COPYING ARE CONSISTENT WITH THE IRS STANDARD CHARGE OF NO MORE THAN \$ 20 PER PAGE WHILE POSTAGE FEES SHALL BE THE ACTUAL COST INCURRED BY THE ORGANIZATION - TIMELY NOTICE OF THE APPROXIMATE COST AND ACCEPTABLE FORM OF PAYMENT WILL BE PROVIDED WITHIN SEVEN DAYS OF RECEIPT OF THE REQUEST IF IN WRITING OR IMMEDIATELY UPON A REQUEST FROM AN IN-PERSON REQUEST ACCEPTABLE FORMS OF PAYMENT INCLUDE CASH AND MONEY ORDER (IN THE CASE OF AN IN-PERSON REQUEST) AND CERTIFIED CHECK, MONEY ORDER, AND PERSONAL CHECK OR CREDIT CARD, IN THE CASE OF A WRITTEN REQUEST PAYMENT IN FULL IS DUE PRIOR TO PROVIDING COPIES - THE NAMES OR ADDRESSES OF THE ORGANIZATION'S CONTRIBUTORS ON ITS ANNUAL RETURN SHALL NOT BE DISCLOSED IN ACCORDANCE WITH IRS REGULATIONS PUBLIC INSPECTION OF GOVERNING DOCUMENTS UNITED WAY OF BERKS COUNTY IS COMMITTED TO OPENNESS AND TRANSPARENCY TO DONORS/FUNDERS, PARTNER AGENCIES, GOVERNMENTAL ORGANIZATIONS, ITS VARIOUS STAKEHOLDERS, AND THE GENERAL PUBLIC PROACTIVE DISCLOSURE AND DISSEMINATION OF INFORMATION CONCERNING THE GOVERNANCE, OPERATIONS, AND FINANCIAL INFORMATION CONCERNING UNITED WAY OF BERKS COUNTY IS AVAILABLE THE FOLLOWING DOCUMENTS ARE ACCESSIBLE FOR PUBLIC INSPECTION AT THE OFFICE OF UNITED WAY OF BERKS COUNTY - ALL DOCUMENTS AS REQUIRED BY FEDERAL, STATE, AND LOCAL LAW, INCLUDING BUT NOT LIMITED TO THE IRS FORM 990 - ANNUAL REPORT - ARTICLES OF INCORPORATION - AUDITED FINANCIAL STATEMENTS - CAMPAIGN HIGHLIGHTS REPORT - CODE OF ETHICS AND CONDUCT AND WHISTLEBLOWER POLICY - RECORD RETENTION - CONFLICT OF INTEREST POLICY - ORGANIZATIONAL BY-LAWS - MISSION STATEMENT - VISION STATEMENT PERSONS REQUESTING HARD COPIES OF DOCUMENTS SHALL BE PROVIDED INFORMATION THAT OFFERS THE REQUESTOR THE OPPORTUNITY TO ACCESS THE INFORMATION FREE OF CHARGE</p>

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FORM 990, PART VI, SECTION C, LINE 19	GE VIA THE WEB UNITED WAY OF BERKS COUNTY SHALL CHARGE A REASONABLE FEE FOR COPYING COSTS AND THE ACTUAL COST OF POSTAGE BEFORE PROVIDING COPIES OF THE DOCUMENTS IF A HARD COPY IS REQUESTED REASONABLE FEES FOR COPYING ARE CONSISTENT WITH THE IRS STANDARD CHARGE OF NO MORE THAN \$ 20 PER PAGE WHILE POSTAGE FEES SHALL BE THE ACTUAL COST INCURRED BY THE ORGANIZATION THE FOLLOWING DOCUMENTS ARE ACCESSIBLE VIA UNITED WAY OF BERKS COUNTY WEB-SITE AT WWW UWBERKS ORG - ANNUAL REPORT - AUDITED FINANCIAL STATEMENTS - CAMPAIGN HIGHLIGHTS REPORT - CODE OF ETHICS AND CONDUCT AND WHISTLEBLOWER POLICY - LINKS TO FORM 990 VIA CHARITY NAVIGATOR AND GUIDESTAR - MISSION STATEMENT - VISION STATEMENT

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FORM 990, PART XI, LINE 9	UNREALIZED GAIN/LOSS ON BENEFICIAL INTEREST -96,892