

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Form 990

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

2024

Department of the Treasury
Internal Revenue Service

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.

Open to Public Inspection

A For the **2024** calendar year, or tax year beginning **JUL 1, 2024** and ending **JUN 30, 2025**

B Check if applicable: Address change Name change Initial return Final return/terminated Amended return Application pending	C Name of organization UNITED WAY OF THE GREATER LEHIGH VALLEY		D Employer identification number 23-2657933
	Doing business as		E Telephone number 610-807-5755
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	G Gross receipts \$ 38,395,774.
	1110 AMERICAN PARKWAY NE	F-120	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No
City or town, state or province, country, and ZIP or foreign postal code ALLENTOWN, PA 18109		H(b) Are all subordinates included? Yes No	
F Name and address of principal officer: KARA MOHSINGER SAME AS C ABOVE		H(c) Group exemption number 3751	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527			
J Website: WWW.UNITEDWAYGLV.ORG			
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other			L Year of formation: 1992
			M State of legal domicile: PA

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO FIGHT FOR HEALTH, SAFETY AND EDUCATION OF EVERY PERSON IN THE GREATER LEHIGH VALLEY		
	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)	3	26
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	23
	5 Total number of individuals employed in calendar year 2024 (Part V, line 2a)	5	87
	6 Total number of volunteers (estimate if necessary)	6	2970
	7 a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	28,167,295.	34,550,792.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	0.	0.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	334,852.	1,208,343.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	0.	0.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	28,502,147.	35,759,135.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,132,839.	21,260,636.
	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)	5,620,615.	6,374,060.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
	b Total fundraising expenses (Part IX, column (D), line 25)	2,076,022.	
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,425,631.	2,419,938.
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	26,179,085.	30,054,634.	
19 Revenue less expenses. Subtract line 18 from line 12	2,323,062.	5,704,501.	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	19,400,257.	23,388,165.
	22 Net assets or fund balances. Subtract line 21 from line 20	6,441,096.	6,361,217.
22 Net assets or fund balances. Subtract line 21 from line 20	12,959,161.	17,026,948.	

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		
	KARA MOHSINGER, CFO AND TREASURER				
Paid Preparer Use Only	Preparer's name	Preparer's signature	Date	Check if self-employed	PTIN
	JUSTINE N. BAUER	JUSTINE N. BAUER	02/26/26	<input type="checkbox"/>	P01283101
Preparer Use Only	Firm's name	Firm's EIN		Phone no.	
	CHERRY BEKAERT ADVISORY LLC	88-2730877		610-378-1175	
	Firm's address				
	2763 CENTURY BOULEVARD				
	READING, PA 19610-3346				

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission: WE FIGHT FOR THE HEALTH, SAFETY AND EDUCATION OF EVERY PERSON IN THE GREATER LEHIGH VALLEY. WE ENVISION A COMMUNITY WHERE EVERY PERSON BELONGS AND EVERY PERSON THRIVES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.

4a (Code:) (Expenses \$ 25,389,972. including grants of \$ 21,260,636.) (Revenue \$) COMMUNITY IMPACT INVESTMENTS: IN SUPPORT OF OUR 2030 GOAL OF INCREASING THE PERCENTAGE OF STUDENTS READY TO LEARN AND SUCCESSFUL IN SCHOOL, OUR EDUCATION INVESTMENTS TOTALED \$6,653,977; PROVIDING APPROXIMATELY 61,076 CHILDREN AND FAMILIES WITH EARLY LITERACY SKILLS SUPPORT, HIGH-QUALITY EARLY LEARNING, PARENT AND CHILD DEVELOPMENT EDUCATION, SUMMER KINDERGARTEN READINESS AND SKILL-BUILDING COURSES FOR EARLY CHILDHOOD TEACHERS AS WELL AS PROVIDING ELEMENTARY- AND MIDDLE-SCHOOL STUDENTS WITH TARGETED ACADEMIC INTERVENTIONS, SUMMER LEARNING, MENTORING, POSITIVE YOUTH DEVELOPMENT, BEHAVIORAL HEALTH SERVICES AND FAMILY CASE MANAGEMENT.

SEE ADDITIONAL INFO ON SCHEDULE O.

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

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

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

4e Total program service expenses 25,389,972.

Part IV Checklist of Required Schedules

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

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question ID, Description, and Yes/No columns. Rows include questions 22 through 38 regarding organizational reporting, compensation, tax-exempt bonds, and excess benefit transactions.

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

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

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

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

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

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

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members... 26; 1b Enter the number of voting members included on line 1a... 23; 2 Did any officer, director, trustee, or key employee have a family relationship... X; 3 Did the organization delegate control over management duties... X; 4 Did the organization make any significant changes to its governing documents... X; 5 Did the organization become aware during the year of a significant diversion of the organization's assets... X; 6 Did the organization have members or stockholders... X; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body... X; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body... X; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X; b Each committee with authority to act on behalf of the governing body? X; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O... X

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

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? X; 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? X; 11b Describe on Schedule O the process, if any, used by the organization to review this Form 990.; 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? X; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done X; 13 Did the organization have a written whistleblower policy? X; 14 Did the organization have a written document retention and destruction policy? X; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X; b Other officers or key employees of the organization X; If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? X; 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 Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [] Other (explain on Schedule O)
19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records
THE ORGANIZATION - 610-807-5732
1110 AMERICAN PARKWAY NE, F-120, ALLENTOWN, PA 18109

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

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

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) MARCI LESKO CHIEF EXECUTIVE OFFICER	37.50	X		X				239,570.	0.	36,180.
(2) DAVID LEWIS IMMEDIATE PAST PRESIDENT	37.50	X		X				220,499.	0.	28,539.
(3) PAUL HURD, JR. CHIEF PHILANTHROPY OFFICER	37.50				X			193,220.	0.	30,345.
(4) KARA MOHSINGER CFO AND TREASURER	37.50	X		X				165,219.	0.	19,596.
(5) JILL PEREIRA VP, STRATEGIC PARTNERSHIPS	37.50				X			139,341.	0.	33,620.
(6) LAURA MCHUGH CHIEF ENGAGEMENT OFFICER	37.50				X			153,311.	0.	13,586.
(7) ERIN CONNELLY VP, IMPACT	37.50				X			122,979.	0.	32,336.
(8) LAUREN SHANAHAN AVP, STRATEGIC INITIATIVES	37.50				X			111,698.	0.	18,008.
(9) JOE SAVAGE BOARD CHAIR	0.50	X		X				0.	0.	0.
(10) DOROTA GASNIENICA-KOZAK, ESQ. IMMEDIATE PAST BOARD CHAIR	0.50	X		X				0.	0.	0.
(11) ANNE BAUM BOARD MEMBER	0.50	X						0.	0.	0.
(12) CAROL BIRKS, EDD BOARD MEMBER	0.50	X						0.	0.	0.
(13) SCOTT BLAIR BOARD MEMBER	0.50	X						0.	0.	0.
(14) MIKE BUTZ BOARD MEMBER	0.50	X						0.	0.	0.
(15) VICKI DOULE BOARD MEMBER	0.50	X						0.	0.	0.
(16) VERONICA GONZALEZ BOARD MEMBER	0.50	X						0.	0.	0.
(17) LAURIE GOSTLEY HACKETT BOARD MEMBER	0.50	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) MATT GREEN BOARD MEMBER	0.50	X						0.	0.	0.
(19) TRISHA HIGGINS, CPA BOARD MEMBER	0.50	X						0.	0.	0.
(20) JOANE HOCKENBURY BOARD MEMBER	0.50	X						0.	0.	0.
(21) JAMES IRWIN BOARD MEMBER	0.50	X						0.	0.	0.
(22) DWAYNE JONES BOARD MEMBER	0.50	X						0.	0.	0.
(23) ERICA MELENDEZ BOARD MEMBER	0.50	X						0.	0.	0.
(24) DONALD OUTING, PHD BOARD MEMBER	0.50	X						0.	0.	0.
(25) TRACY PIAZZA BOARD MEMBER	0.50	X						0.	0.	0.
(26) THOMAS RIPSAM BOARD MEMBER	0.50	X						0.	0.	0.
1b Subtotal								1,345,837.	0.	212,210.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								1,345,837.	0.	212,210.

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 10

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

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

SEE PART VII, SECTION A CONTINUATION SHEETS

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) PETE RUGGIERO BOARD MEMBER	0.50	X						0.	0.	0.
(28) TYRONE RUSSELL BOARD MEMBER	0.50	X						0.	0.	0.
(29) MELANIE SANCHEZ-JONES BOARD MEMBER	0.50	X						0.	0.	0.
(30) JACK SILVA, ED.D BOARD MEMBER	0.50	X						0.	0.	0.
(31) JILL WHEELER BOARD MEMBER	0.50	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	278,866.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	34,271,926.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 1,512,798.				
	h Total. Add lines 1a-1f			34,550,792.			
Program Service Revenue	2 a _____	Business Code					
	b _____						
	c _____						
	d _____						
	e _____						
	f All other program service revenue						
	g Total. Add lines 2a-2f						
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		292,633.			292,633.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6 a Gross rents	6a	(i) Real				
			(ii) Personal				
	b Less: rental expenses	6b					
	c Rental income or (loss)	6c					
	d Net rental income or (loss)						
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	3,552,349.			
			(ii) Other				
	b Less: cost or other basis and sales expenses	7b	2,636,639.				
	c Gain or (loss)	7c	915,710.				
d Net gain or (loss)			915,710.		915,710.		
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18	8a						
b Less: direct expenses	8b						
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19	9a						
b Less: direct expenses	9b						
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	10a						
b Less: cost of goods sold	10b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue	11 a _____	Business Code					
	b _____						
	c _____						
	d All other revenue						
	e Total. Add lines 11a-11d						
12 Total revenue. See instructions			35,759,135.	0.	0.	1,208,343.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	21,230,136.	21,230,136.		
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, lines 15 and 16	30,500.	30,500.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	709,603.	202,159.	245,050.	262,394.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	4,415,661.	2,107,862.	1,344,692.	963,107.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	208,210.	107,961.	56,665.	43,584.
9 Other employee benefits	675,968.	345,828.	176,156.	153,984.
10 Payroll taxes	364,618.	180,108.	97,947.	86,563.
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting	42,750.		42,750.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	13,211.	13,211.		
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	541,659.	345,755.	98,397.	97,507.
12 Advertising and promotion				
13 Office expenses	47,913.	20,671.	17,167.	10,075.
14 Information technology				
15 Royalties				
16 Occupancy	392,851.	172,468.	142,670.	77,713.
17 Travel	30,792.	13,046.	9,577.	8,169.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	104,058.	44,090.	32,366.	27,602.
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	102,846.	45,151.	37,350.	20,345.
23 Insurance	26,615.	4,581.	19,767.	2,267.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DIRECT PROGRAM COSTS	493,824.	207,411.	112,566.	173,847.
b DUES AND FAIR SHARE SUP	350,026.	214,883.	33,547.	101,596.
c EQUIPMENT COSTS	213,366.	93,820.	77,391.	42,155.
d BANK CHARGES	49,225.	8,472.	36,559.	4,194.
e All other expenses	10,802.	1,859.	8,023.	920.
25 Total functional expenses. Add lines 1 through 24e	30,054,634.	25,389,972.	2,588,640.	2,076,022.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing		1	
	2 Savings and temporary cash investments	1,879,817.	2	2,556,057.
	3 Pledges and grants receivable, net	4,601,381.	3	5,350,368.
	4 Accounts receivable, net	115,910.	4	214,677.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	129,413.	9	121,653.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 1,083,074.		
	b Less: accumulated depreciation	10b 842,249.	321,147.	10c 240,825.
	11 Investments - publicly traded securities	6,458,612.	11	9,300,921.
	12 Investments - other securities. See Part IV, line 11	2,750,161.	12	2,774,994.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	3,143,816.	15	2,828,670.
16 Total assets. Add lines 1 through 15 (must equal line 33)	19,400,257.	16	23,388,165.	
Liabilities	17 Accounts payable and accrued expenses	338,420.	17	483,591.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,102,676.	25	5,877,626.
	26 Total liabilities. Add lines 17 through 25	6,441,096.	26	6,361,217.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	-4,005,549.	27	-4,162,114.
	28 Net assets with donor restrictions	16,964,710.	28	21,189,062.
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	12,959,161.	32	17,026,948.
33 Total liabilities and net assets/fund balances	19,400,257.	33	23,388,165.	

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	35,759,135.
2	Total expenses (must equal Part IX, column (A), line 25)	2	30,054,634.
3	Revenue less expenses. Subtract line 2 from line 1	3	5,704,501.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	12,959,161.
5	Net unrealized gains (losses) on investments	5	-612,104.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,024,610.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	17,026,948.

Part XII Financial Statements and Reporting

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

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? _____ If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
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 on Schedule O.	X	
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F? _____	X	
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 on Schedule O and describe any steps taken to undergo such audits _____	X	

Form 990 (2024)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
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Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

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

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

g Provide the following information about the supported organization(s).

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	20,671,992.	25,785,442.	23,212,454.	28,167,295.	34,550,792.	132,387,975.
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	20,671,992.	25,785,442.	23,212,454.	28,167,295.	34,550,792.	132,387,975.
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)						27,131,512.
6 Public support. Subtract line 5 from line 4.						105,256,463.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	20,671,992.	25,785,442.	23,212,454.	28,167,295.	34,550,792.	132,387,975.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	174,641.	181,239.	194,511.	255,336.	292,633.	1,098,360.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 Total support. Add lines 7 through 10						133,486,335.

12 Gross receipts from related activities, etc. (see instructions) **12**

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	78.85 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	78.70 %

16a 33 1/3% support test - 2024. 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 - 2023. 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 - 2024. 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 - 2023. 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

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 8 Public support.

Section B. Total Support

Table with 7 columns: (a) 2020, (b) 2021, (c) 2022, (d) 2023, (e) 2024, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on; 12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.); 13 Total support.

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

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Row 15: Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2023 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2023 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2024. 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 - 2023. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Rows 11, 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2.

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1.

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2, 3.

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Rows 1, 2a, 2b, 3a, 3b.

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

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

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

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

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

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - <i>provide details in Part VI</i>)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (<i>provide details in Part VI</i>). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1 Distributable amount for 2024 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2024 (reasonable cause required - <i>explain in Part VI</i>). See instructions.			
3 Excess distributions carryover, if any, to 2024			
a From 2019			
b From 2020			
c From 2021			
d From 2022			
e From 2023			
f Total of lines 3a through 3e			
g Applied to under distributions of prior years			
h Applied to 2024 distributable amount			
i Carryover from 2019 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4 Distributions for 2024 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2024 distributable amount			
c Remainder. Subtract lines 4a and 4b from line 4.			
5 Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
6 Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
7 Excess distributions carryover to 2025. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2020			
b Excess from 2021			
c Excess from 2022			
d Excess from 2023			
e Excess from 2024			

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.)

Lined area for supplemental information.

**Schedule B
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

Name of the organization

UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number

23-2657933

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

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

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

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

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

501(c)(3) taxable private foundation

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

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

General Rule

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

Special Rules

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

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

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

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

Name of organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
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Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<hr/> <hr/> <hr/>	\$ <u>3,172,804.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<hr/> <hr/> <hr/>	\$ <u>3,103,170.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<hr/> <hr/> <hr/>	\$ <u>783,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<hr/> <hr/> <hr/>	\$ <u>1,086,257.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<hr/> <hr/> <hr/>	\$ <u>1,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
--	---

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

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<hr/> <hr/> <hr/>	\$ <u>1,180,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ <u>2,400,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ <u>864,092.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ <u>759,267.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
--	---

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

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

Name of organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
--	---

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

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

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2024

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

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

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

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

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

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

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

Name of organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number (EIN) 23-2657933
--	---

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political campaign activity expenditures \$ 0.
- 3 Volunteer hours for political campaign activities 0.

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$ 0.
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$ 0.
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

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

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

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)														
c	Total lobbying expenditures (add lines 1a and 1b)														
d	Other exempt purpose expenditures	4,995.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	4,995.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	999.													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">IF the amount on line 1e, column (a) or (b), is:</th> <th style="text-align: left;">THEN the lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:	not over \$500,000	20% of the amount on line 1e.	over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	over \$17,000,000	\$1,000,000.		
IF the amount on line 1e, column (a) or (b), is:	THEN the lobbying nontaxable amount is:														
not over \$500,000	20% of the amount on line 1e.														
over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2021	(b) 2022	(c) 2023	(d) 2024	(e) Total
2a Lobbying nontaxable amount	731.	651.	426.	999.	2,807.
b Lobbying ceiling amount (150% of line 2a, column(e))					4,211.
c Total lobbying expenditures					
d Grassroots nontaxable amount	183.	163.	107.	250.	703.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,055.
f Grassroots lobbying expenditures					

Schedule C (Form 990) 2024

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

Table with 3 main columns: (a) Yes, (a) No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to not be described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

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

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

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

Part IV Supplemental Information

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

PART I-A, LINE 1:

THE ORGANIZATION HAS NOT SUPPORTED ANY POLITICAL CANDIDATE.

SCHEDULE D
(Form 990)

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number

23-2657933

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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 (for example, recreation or education) Preservation of a 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 Tax 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 on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, 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?

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

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

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

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

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

(i) Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) (Rev. 12-2024)

LHA 432051 01-02-25

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

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

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

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	3,517,355.	2,857,216.	2,498,894.	2,864,020.	1,639,733.
b Contributions	2,425,000.	330,000.	161,500.	55,000.	731,165.
c Net investment earnings, gains, and losses	329,792.	431,631.	278,255.	-368,745.	519,068.
d Grants or scholarships					
e Other expenditures for facilities and programs	144,171.	101,492.	81,433.	51,381.	25,946.
f Administrative expenses					
g End of year balance	6,127,976.	3,517,355.	2,857,216.	2,498,894.	2,864,020.

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment 17.0180 %
- b** Permanent endowment 82.9820 %
- c** Term 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:
- | | Yes | No |
|---|-----|-------------------------------------|
| (i) Unrelated organizations? | | <input checked="" type="checkbox"/> |
| (ii) Related organizations? | | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		161,123.	32,348.	128,775.
d Equipment		921,951.	809,901.	112,050.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B))				240,825.

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) SPLIT INTEREST AGREEMENTS	152,618.	COST
(B) PERPETUAL TRUSTS	2,548,725.	COST
(C) INVESTMENT IN INSURANCE		
(D) TRUST	73,651.	COST
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))	2,774,994.	

Part VIII Investments - Program Related.

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

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

Part IX Other Assets

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

(a) Description	(b) Book value
(1) CASH SURRENDER VALUE OF LIFE INSURANCE	101,955.
(2) RIGHT-OF-USE ASSETS - FINANCE LEASES	55,107.
(3) RIGHT-OF-USE ASSETS - OPERATING LEASES	2,671,608.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, col. (B))	2,828,670.

Part X Other Liabilities

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) DESIGNATIONS PAYABLE	2,921,608.
(3) LIABILITY TO DONORS UNDER SPLIT-INTEREST TRUSTS	95,609.
(4) FINANCE LEASE LIABILITIES	57,406.
(5) OPERATING LEASE LIABILITIES	2,803,003.
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, col. (B))	5,877,626.

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

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

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

1	Total revenue, gains, and other support per audited financial statements		1	20,947,542.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a	-612,104.	
b	Donated services and use of facilities	2b	660,830.	
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d	37,419.	
e	Add lines 2a through 2d	2e		86,145.
3	Subtract line 2e from line 1		3	20,861,397.
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	13,211.	
b	Other (Describe in Part XIII.)	4b	14,884,527.	
c	Add lines 4a and 4b	4c		14,897,738.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5	35,759,135.

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	16,879,755.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a	660,830.	
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d	2e		660,830.
3	Subtract line 2e from line 1		3	16,218,925.
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	13,211.	
b	Other (Describe in Part XIII.)	4b	13,822,498.	
c	Add lines 4a and 4b	4c		13,835,709.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5	30,054,634.

Part XIII Supplemental Information

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

PART IV, LINE 2B:

DISBURSEMENT OF FUNDS ARE AUTHORIZED BY THE CO-CHAIRS OF THE PROFESSIONAL STAFF COMMITTEE. UNITED WAY OF THE GREATER LEHIGH VALLEY IS A LIMITED FISCAL SPONSOR AND HAS NO LEGAL CONTROL OF FUNDS, HAS NO VARIANCE POWER OVER FUNDS AND PROVIDES NO ADMINISTRATIVE SUPPORT. UNITED WAY OF THE GREATER LEHIGH VALLEY PROVIDES A MONTHLY REPORT OF RECEIPTS AND DISBURSEMENTS.

PART V, LINE 4:

THE ORGANIZATION'S ENDOWMENT CONSISTS OF FUNDS DESIGNATED BY THE BOARD OF DIRECTORS AND RESTRICTED BY DONORS TO FUNCTION AS ENDOWMENTS. AS REQUIRED BY GENERALLY ACCEPTED ACCOUNTING PRINCIPLES, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS, INCLUDING FUNDS DESIGNATED BY THE BOARD OF DIRECTORS TO FUNCTION AS ENDOWMENTS, ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.

THE BOARD OF DIRECTORS OF THE ORGANIZATION HAS INTERPRETED THE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA AS REQUIRING THE PRESERVATION OF THE FAIR VALUE OF THE ORIGINAL GIFT AS OF THE GIFT DATE OF THE DONOR-RESTRICTED ENDOWMENT FUNDS ABSENT EXPLICIT DONOR STIPULATIONS TO THE CONTRARY. AS A RESULT OF THIS INTERPRETATION, THE ORGANIZATION CLASSIFIES AS NET ASSETS WITH DONOR RESTRICTIONS IN PERPETUITY (A) THE ORIGINAL VALUE OF GIFT DONATED TO THE PERMANENT ENDOWMENT, (B) THE ORIGINAL VALUE OF SUBSEQUENT GIFTS TO THE PERMANENT ENDOWMENT, AND (C) ACCUMULATIONS TO THE PERMANENT ENDOWMENT MADE IN ACCORDANCE WITH THE DIRECTION OF THE APPLICABLE DONOR

Part XIII Supplemental Information (continued)

GIFT INSTRUMENT AT THE TIME THE ACCUMULATION IS ADDED TO THE FUND. IN ACCORDANCE WITH THE LAWS OF THE COMMONWEALTH OF PENNSYLVANIA, THE ORGANIZATION CONSIDERS THE FOLLOWING FACTORS IN MAKING A DETERMINATION TO APPROPRIATE OR ACCUMULATE DONOR-RESTRICTED ENDOWMENT FUNDS: (1) THE DURATION AND PRESERVATION OF THE VARIOUS FUNDS, (2) THE PURPOSE OF THE DONOR-RESTRICTED ENDOWMENT FUND, (3) GENERAL ECONOMIC CONDITIONS, (4) THE POSSIBLE EFFECT OF INFLATION AND DEFLATION, (5) THE EXPECTED TOTAL RETURN FROM INCOME AND THE APPRECIATION OF INVESTMENTS, (6) OTHER RESOURCES OF THE ORGANIZATION, AND (7) THE ORGANIZATION'S INVESTMENT POLICIES.

INVESTMENT RETURN OBJECTIVES, RISK PARAMETERS, AND STRATEGIES: THE ORGANIZATION HAS ADOPTED INVESTMENT POLICIES, APPROVED BY THE BOARD OF DIRECTORS, FOR DONOR-RESTRICTED ENDOWMENT FUNDS AND BOARD-DESIGNATED ENDOWMENTS. THE PRIMARY PURPOSE OF THE DONOR-RESTRICTED ENDOWMENT FUND IS TO ALLOW FOR THE PRESERVATION OF PRINCIPAL FOR GIFTS GIVEN IN PERPETUITY; WHOSE EARNINGS WILL BE UTILIZED AS DEFINED BY THE DONOR UPON CREATION OF THE GIFT. THE TARGET BALANCE OF THE FUND IS \$10M SHORT-TERM AND \$100M LONG-TERM. THE FUND EXCLUDES THE PERPETUAL TRUSTS. THE FINANCE COMMITTEE WILL OVERSEE THE MANAGEMENT OF THE FUND.

INVESTMENT RETURN OBJECTIVES: THE PURPOSE OF ESTABLISHING AN INVESTMENT POLICY ASSET MIX IS TO CONSTRUCT A TARGET OR "NORMAL" SET OF INVESTMENTS, WELL DIVERSIFIED AMONG SUITABLE ASSET CLASSES THAT WILL GENERATE, ON AVERAGE, THE LEVEL OF EXPECTED RETURN NECESSARY TO MEET ENDOWMENT OBJECTIVES AT THE LOWEST VOLATILITY CONSISTENT WITH ACHIEVING THAT RETURN. THE INVESTMENT ASSET ALLOCATIONS MIX, INCLUDING TARGET LEVELS AND RANGES APPROVED BY THE BOARD OF DIRECTORS. THE TARGET LEVELS AT JUNE 30, 2025 WERE 65% EQUITIES AND 35% BONDS.

SPENDING POLICY: THE SPENDING POLICY OF THE DONOR-RESTRICTED ENDOWMENT FUND SHALL BE 4% OF THE TWELVE QUARTERS MOVING AVERAGE MARKET VALUE, ANNUALLY AS PART OF THE ANNUAL BUDGET.

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.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

UNREALIZED GAIN ON BENEFICIAL INTEREST IN PERPETUAL TRUSTS	21,486.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	4,460.
UNREALIZED GAIN ON INVESTMENT IN INSURANCE TRUST	11,473.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	37,419.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED CONTRIBUTIONS	14,884,527.
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PART XII, LINE 4B - OTHER ADJUSTMENTS:

DONOR DESIGNATED CONTRIBUTIONS	13,822,498.
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**SCHEDULE F
(Form 990)**

(Rev. December 2024)
Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

Attach to Form 990.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
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Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
3 a Subtotal	0	0			0.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			0.

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA,	DONOR DESIGNATED FOR GENERAL SUPPORT	30,500.	CHECK	0.		

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter 1

3 Enter total number of other organizations or entities

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Part IV Foreign Forms

- 1** Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see the Instructions for Form 926)* Yes No
- 2** Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see the Instructions for Forms 3520 and 3520-A; don't file with Form 990)* Yes No
- 3** Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see the Instructions for Form 5471)* Yes No
- 4** Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see the Instructions for Form 8621)* Yes No
- 5** Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see the Instructions for Form 8865)* Yes No
- 6** Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see the Instructions for Form 5713; don't file with Form 990)* Yes No

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

MONITORING POLICIES FOR ALLOCATED FUNDING BEGINS WITH A SCREENING PROCESS CALLED THE QUALIFICATION REVIEW PROCESS. ALL ORGANIZATIONS RECEIVING UNITED WAY FUNDING MUST COMPLETE AND PASS A RIGOROUS QUALIFICATIONS CRITERIA APPLICATION FOR FUNDING CONSIDERATION. QUALIFYING FOR FUNDING, HOWEVER, DOES NOT GUARANTEE FUNDING. SERVICE PROVIDERS MUST MEET ALL 18 QUALIFICATIONS CRITERIA - LEGAL, GOVERNANCE, FINANCE, AND ORGANIZATIONAL QUALITY ASSURANCE - TO BE CONSIDERED FOR UNITED WAY FUNDING. THE PROGRAM OPERATING WITH UNITED WAY SUPPORT ARE MONITORED ANNUALLY ON CUSTOMER COUNT, LOW-INCOME STATUS OF CUSTOMERS, AND RESULTS - BASED ACCOUNTABILITY DATA COLLECTION AND RESULTS REPORTING MEASUREMENTS.

**SCHEDULE I
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **UNITED WAY OF THE GREATER LEHIGH VALLEY** Employer identification number **23-2657933**

Part I General Information on Grants and Assistance

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
826CHI, INC PO BOX 220868 CHICAGO, IL 60622	30-0248920	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AFRICA INLAND MISSION INTERNATIONAL INCORPORATED - PO BOX 3611 - PEACHTREE CITY, GA 30269	11-1873101	501(C)(3)	31,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALL INDIA MOVEMENT AIM FOR SEVA, INC. - PO BOX 639 - SAYLORSBURG, PA 18353	11-3573392	501(C)(3)	89,438.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN AREA ECUMENICAL FOOD BANK - 534 W CHEW STREET - ALLENTOWN, PA 18102	23-2214543	501(C)(3)	35,772.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN ART MUSEUM 31 N 5TH STREET ALLENTOWN, PA 18101-1616	23-1548101	501(C)(3)	93,602.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
ALLENTOWN CENTRAL CATHOLIC HIGH SCHOOL - 301 N 4TH ST. - ALLENTOWN, PA 18102	23-1598117	501(C)(3)	6,562.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 373.

3 Enter total number of other organizations listed in the line 1 table 5.

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

Schedule I (Form 990) (Rev. 12-2024)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ALLENTOWN DRIVE BASEBALL 840 HAMILTON ST, STE 210 ALLENTOWN, PA 18101-2456	27-1768416	501(C)(3)	9,206.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN ECONOMIC DEVELOPMENT CORPORATION - 905 HARRISON ST - ALLENTOWN, PA 18103	23-2101393	501(C)(3)	6,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN PUBLIC THEATRE 417 N 7TH STREET ALLENTOWN, PA 18102	26-3054573	501(C)(3)	10,000.	0.			PROGRAM OPERATING COSTS
ALLENTOWN RESCUE MISSION, INC. PO BOX 748 ALLENTOWN, PA 18105-0748	23-6005983	501(C)(3)	50,789.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN SCHOOL DISTRICT FOUNDATION - 31 S PENN ST - ALLENTOWN, PA 18105	27-0743152	501(C)(3)	43,973.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALLENTOWN SYMPHONY ASSOCIATION 23 N. 6TH. ST. ALLENTOWN, PA 18101	23-6272140	501(C)(3)	424,265.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALS THERAPY DEVELOPMENT INSTITUTE 480 ARSENAL STRRET, SUITE 201 WATERTOWN, MA 02472	04-3462719	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALVIN AILEY DANCE FOUNDATION INC 405 W 55TH ST NEW YORK, NY 10019-4402	13-2584273	501(C)(3)	45,221.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ALZHEIMERS ASSOCIATION - GREATER PENNSYLVANIA CHAPTER - 2595 INTERSTATE DR, STE 100 - HARRISBURG, PA 17110-9378	13-3039601	501(C)(3)	7,621.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN CANCER SOCIETY - PA PITTSBURGH - PO BOX 862 - CARNEGIE, PA 15106	13-1788491	501(C)(3)	39,017.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN CANCER SOCIETY LEHIGH VALLEY UNIT - 3893 ADLER PLACE, SUITE 170 - BETHLEHEM, PA 18017-9000	13-1788491	501(C)(3)	6,858.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN FOUNDATION FOR SUICIDE PREVENTION - 199 WATER ST. FLOOR 11 - NEW YORK, NY 10038-3541	13-3393329	501(C)(3)	6,117.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN HEART ASSOCIATION (LEHIGH VALLEY) - 4250 CRUMS MILL RD. STE. 100 - HARRISBURG, PA 17112-2889	13-5613797	501(C)(3)	11,782.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN RED CROSS NATIONAL HEADQUARTERS - 431 18TH ST NW - WASHINGTON, DC 20006	53-0196605	501(C)(3)	49,092.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AMERICAN RED CROSS PA RIVERS CHAPTER - 3939 BROADWAY - ALLENTOWN, PA 18104	23-1381431	501(C)(3)	89,878.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
AMICA CENTER FOR IMMIGRANT RIGHTS 1025 CONNECTICUT AVENUE NW SUITE 70 WASHINGTON, DC 20036	52-2141497	501(C)(3)	10,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ARC-LEHIGH/NORTHAMPTON COUNTIES 2289 AVENUE A BETHLEHEM, PA 18017-2107	23-1679102	501(C)(3)	43,469.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ARTSQUEST 25 W. THIRD ST. BETHLEHEM, PA 18015	23-2280560	501(C)(3)	280,756.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARTSQUEST FOUNDATION 25 W. THIRD ST., SUITE 300 BETHLEHEM, PA 18015	20-0652958	501(C)(3)	24,748.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ASSOC. OF GRADUATES OF THE US MILITARY ACADEMY - BLDG 698 HERBERT HALL - WEST POINT, NY 10996	14-1260763	501(C)(3)	7,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ASSUMPTION BVM CHURCH 4101 OLD BETHLEHEM PIKE BETHLEHEM, PA 18015	23-1598116	501(C)(3)	52,495.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
AUTISM SOCIETY LEHIGH VALLEY AFFILIATE - PO BOX 3523 - ALLENTOWN, PA 18106	23-2578768	501(C)(3)	6,396.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BACH CHOIR OF BETHLEHEM 440 HECKEWELDER PL BETHLEHEM, PA 18018	24-0795385	501(C)(3)	27,169.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BASEMENT POETRY 1333 GREENVIEW DR BETHLEHEM, PA 18018	37-1979081	501(C)(3)	12,500.	0.			PROGRAM OPERATING COSTS
BATTLE BORNE PO BOX 366 CENTER VALLEY, PA 18034	82-4585504	501(C)(3)	20,000.	0.			PROGRAM OPERATING COSTS
BELMONT CHILD CARE ASSOCIATION, INC. - 2150 HEMPSTEAD TURNPIKE GATE 6, BELMONT PARK - ELMONT, NY 11003	31-1646091	501(C)(3)	27,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BETHLEHEM AREA PUBLIC LIBRARY 11 W CHURCH ST BETHLEHEM, PA 18353	24-0795387	501(C)(3)	19,145.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BETHLEHEM AREA SCHOOL DISTRICT BUSINESS OFFICE 1516 SYCAMORE ST BETHLEHEM, PA 18017			75,000.	0.			PROGRAM OPERATING COSTS
BETHLEHEM CATHOLIC HIGH SCHOOL 2133 MADISON AVE BETHLEHEM, PA 18017	23-1598116	501(C)(3)	7,100.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BIG BROTHERS BIG SISTERS OF THE LEHIGH VALLEY - 41 S CARLISLE ST - ALLENTOWN, PA 18109-2558	23-1746895	501(C)(3)	50,183.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BISHOPS ANNUAL APPEAL CHARITABLE TRUST - 1515 MARTIN LUTHER KING JR DRIVE - ALLENTOWN, PA 18102	46-4060526	501(C)(3)	5,381.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BLAIR ACADEMY 2 PARK ST BLAIRSTOWN, NJ 07825	22-1500475	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BLOOM FOR WOMEN 1425 MOUNTAIN DRIVE NORTH BETHLEHEM, PA 18015	20-1221107	501(C)(3)	109,808.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BOY SCOUTS OF AMERICA - 83 CENTRAL FLORIDA COUNCIL - 1951 S ORANGE BLOSSOM TRL - APOPKA, FL 32703	59-0624376	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BOY SCOUTS OF AMERICA - HAWK MOUNTAIN - 5027 POTTSVILLE PIKE - READING, PA 19605-9713	23-7196296	501(C)(3)	9,159.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BOY SCOUTS OF AMERICA - MINSI TRAILS COUNCIL - 991 POSTAL RD. - ALLENTOWN, PA 18109	23-1708585	501(C)(3)	92,289.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BOYS & GIRLS CLUB OF ALLENTOWN 720 N 6TH ST ALLENTOWN, PA 18102	23-1352042	501(C)(3)	189,281.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BOYS & GIRLS CLUB OF BETHLEHEM 1430 FRITZ DR BETHLEHEM, PA 18017	23-6298476	501(C)(3)	136,425.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BOYS & GIRLS CLUB OF EASTON 210 JONES HOUSTON WAY EASTON, PA 18042	23-1941228	501(C)(3)	111,574.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BRADBURY-SULLIVAN LGBT COMMUNITY CENTER - 522 WEST MAPLE STREET - ALLENTOWN, PA 18101	20-1443960	501(C)(3)	84,249.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS
BREAD & ROSES COMMUNITY FUND 100 S. BROAD STREET, SUITE 1600 PHILADELPHIA, PA 19102	23-2047297	501(C)(3)	20,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BREAKTHROUGH COLLABORATIVE PO BOX 71420 OAKLAND, CA 94612	94-3140620	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BRECKENRIDGE CREATIVE ARTS P.O. BOX 4269 BRECKENRIDGE, CO 80424	47-2066832	501(C)(3)	29,600.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BRIGHT HOPE PREGNANCY SUPPORT CENTERS - 1034 W. HAMILTON ST - ALLENTOWN, PA 18101-1036	23-2185001	501(C)(3)	5,104.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BROWN COUNTY UNITED WAY, INC. PO BOX 1593 GREEN BAY, WI 54305	39-0806299	501(C)(3)	15,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BRUCE SPRINGSTEEN ARCHIVES AND CENTER FOR AMERICAN MUSIC - 400 CEDAR AVENUE - WEST LONG BRANCH, NJ 07764	82-5325604	501(C)(3)	33,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
BURN PREVENTION NETWORK 236 N 17TH ST, 2ND FLOOR ALLENTOWN, PA 18104-5605	22-2839595	501(C)(3)	12,173.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CAMELOT FOR CHILDREN 2354 W EMMAUS AVE ALLENTOWN, PA 18103	23-2565740	501(C)(3)	8,148.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CANCER SUPPORT COMMUNITY OF THE GREATER LEHIGH VALLEY - 944 MARCON BLVD, SUITE 110 - ALLENTOWN, PA 18109	73-1657537	501(C)(3)	28,636.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CAPITAL AREA UNITED WAY (LA) 700 LAUREL ST BATONROUGE, LA 70802-5634	72-0447100	501(C)(3)	10,817.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CARBON COUNTY ACTION COMMITTEE 267 S. 2ND ST LEHIGHTON, PA 18235-2175	47-5001962	501(C)(3)	10,000.	0.			PROGRAM OPERATING COSTS
CARBON COUNTY RIGHT FROM THE START PO BOX 243 LEHIGHTON, PA 18235	43-5001962	501(C)(3)	33,000.	0.			PROGRAM OPERATING COSTS
CARNEGIE MELLON UNIVERSITY PO BOX 371525 PITTSBURGH, PA 15251-7525	25-0969449	501(C)(3)	22,925.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CASA GUADALUPE CENTER 218 N 2ND ST ALLENTOWN, PA 18102-3508	23-1988203	501(C)(3)	151,934.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT; PROGRAM OPERATING COSTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHEDRAL CHURCH OF THE NATIVITY 321 WYANDOTTE STREET BETHLEHEM, PA 18015	23-3007278	501(C)(3)	17,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CATHEDRAL OF ST. CATHARINE OF SIENA - 1825 WEST TURNER ST - ALLENTOWN, PA 18104	23-1598116	501(C)(3)	19,281.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CATHOLIC CHARITIES OF HARRISBURG 4800 UNION DEPOSIT RD HARRISBURG, PA 17111-3710	23-1494791	501(C)(3)	5,170.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CATHOLIC CHARITIES, DIOCESE OF ALLENTOWN - 900 S WOODWARD ST. - ALLENTOWN, PA 18103-4179	23-1598117	501(C)(3)	94,291.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
CATHOLIC FOUNDATION OF EASTERN PENNSYLVANIA - PO BOX 1430 - ALLENTOWN, PA 18105	46-4060385	501(C)(3)	189,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CATHOLIC LEADERSHIP INSTITUTE 301 LINDENWOOD DRIVE, STE 310 MALVERN, PA 19355	23-2661414	501(C)(3)	50,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CATHOLIC RELIEF SERVICES INC P.O. BOX 5200 HARLAN, IA 51593-0700	13-5563422	501(C)(3)	21,802.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CAY GALGON LIFE HOUSE 714 W BROAD ST BETHLEHEM, PA 18018	83-3008929	501(C)(3)	59,222.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CEDAR CREST BIBLE FELLOWSHIP 1151 S CEDAR CREST BLVD ALLENTOWN, PA 18103	23-2123359	501(C)(3)	9,008.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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CEDAR CREST COLLEGE 100 COLLEGE DR ALLENTOWN, PA 18104	23-1365953	501(C)(3)	24,372.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CENTER FOR HUMANISTIC CHANGE 3400 BATH PIKE, STE 306 BETHLEHEM, PA 18107	23-2107264	501(C)(3)	106,444.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
CENTRAL BUCKS FAMILY YMCA 2500 LOWER STATE RD DOYLESTOWN, PA 18901-2634	23-1903158	501(C)(3)	11,521.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CENTRAL MORAVIAN CHURCH 73 W CHURCH ST BETHLEHEM, PA 18018	24-0795954	501(C)(3)	7,068.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CHARITYVEST 75 5TH STREET NW SUITE 2200 ATLANTA, GA 30308	81-2771871	501(C)(3)	28,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CHARTER ARTS FOUNDATION 321 E 3RD ST BETHLEHEM, PA 18015	45-3986393	501(C)(3)	13,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CHILDREN INTERNATIONAL 2000 EAST RED BRIDGE ROAD KANSAS CITY, MO 64131	44-6005794	501(C)(3)	11,918.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CHILDREN'S HOME OF EASTON 2000 S 25TH ST EASTON, PA 18042	24-0806100	501(C)(3)	96,128.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CHURCH OF OUR SAVIOUR 59 PARK AVENUE NEW YORK, NY 10016	81-3193830	501(C)(3)	6,125.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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

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CIVIC THEATRE OF ALLENTOWN PA 527 N 19TH ST. ALLENTOWN, PA 18104	23-2152581	501(C)(3)	12,692.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CLINTON COUNTY UNITED WAY 2975 EAGLE VALLEY RD MILL HALL, PA 17751	23-2121043	501(C)(3)	6,706.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CLL SOCIETY INC P.O. BOX 3197 OLATHE, KS 66063	46-4131354	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
COHESION NETWORK, INC. 1000 POSTAL ROAD ALLENTOWN, PA 18109	27-5034772	501(C)(3)	50,000.	0.			PROGRAM OPERATING COSTS
COLLEGE OF THE HOLY CROSS 1 COLLEGE ST WORCESTER, MA 01610	04-2103558	501(C)(3)	35,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
COMMUNITIES IN SCHOOLS OF EASTERN PENNSYLVANIA, INC. - 739 N 12TH STREET - ALLENTOWN, PA 18102	23-2222874	501(C)(3)	1,103,540.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
COMMUNITY ACTION COMMITTEE OF THE LEHIGH VALLEY - 1337 E 5TH ST - BETHLEHEM, PA 18015-2103	23-1669589	501(C)(3)	188,244.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
COMMUNITY BIKE WORKS 235 N MADISON ST ALLENTOWN, PA 18102	23-2867945	501(C)(3)	269,263.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
COMMUNITY SERVICES FOR CHILDREN, INC. - 1520 HANOVER AVE. - ALLENTOWN, PA 18109-2360	23-2204725	501(C)(3)	161,100.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS

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CONGREGATION KENESETH ISRAEL 2227 W CHEW ST. ALLENTOWN, PA 18104	23-1489807	501(C)(3)	14,700.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
CORPORATION FOR NATIONAL & COMMUNITY SERVICE - 8TH FLOOR 1201 NEW YORK AVENUE, NW - WASHINGTON, DC 20525	52-0971471		53,549.	0.			PROGRAM OPERATING COSTS
CRIME VICTIMS COUNCIL OF THE LEHIGH VALLEY - 2132 S. 12TH ST. SUITE 101 - ALLENTOWN, PA 18103	23-1997899	501(C)(3)	46,265.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
DA VINCI SCIENCE CENTER 815 W. HAMILTON STREET ALLENTOWN, PA 18103-3686	23-2824084	501(C)(3)	910,690.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
DELAWARE AND LEHIGH NATIONAL HERITAGE CORRIDOR, INC - 2750 HUGH MOORE PARK RD - EASTON, PA 18042-7120	23-2977618	501(C)(3)	10,863.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DELAWARE MUSEUM OF NATURAL HISTORY 4840 KENNETT PIKE WILMINGTON, DE 19807	51-0083535	501(C)(3)	20,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DESALES UNIVERSITY 2755 STATION AVE CENTER VALLEY, PA 18034	23-1653718	501(C)(3)	127,366.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DIAMOND BLACKFAN ANEMIA FOUNDATION P.O. BOX 1092 WEST SENECA, NY 14224	16-1459422	501(C)(3)	10,001.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DIOCESE OF ALLENTOWN 2145 MADISON AVE. BETHLEHEM, PA 18017-4698	23-1598117	501(C)(3)	155,076.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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DOCTORS WITHOUT BORDERS USA, INC 40 RECTOR ST., 16TH FLOOR NEW YORK, NY 10006	13-3433452	501(C)(3)	24,631.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DOMESTIC VIOLENCE SER CTR (WILKES BARRE) - PO BOX 2177 - WILKES BARRE, PA 18703-2177	23-2070668	501(C)(3)	15,000.	0.			PROGRAM OPERATING COSTS
DR PHILLIPS CENTER FOR THE PERFORMING ARTS, INC - 155 E ANDERSON ST - ORLANDO, FL 32801-3713	20-0695917	501(C)(3)	20,125.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DREAM COME TRUE PO BOX 21167 LEHIGH VALLEY, PA 18002-1167	22-2550269	501(C)(3)	16,999.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DREXEL UNIVERSITY 3141 CHESTNUT ST PHILADELPHIA, PA 19104	23-1352630	501(C)(3)	5,256.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
DUQUESNE UNIVERSITY OF THE HOLY SPIRIT - 600 FORBES AVENUE - PITTSBURGH, PA 15282	25-1035663	501(C)(3)	40,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
EAST STROUDSBURG UNIVERSITY FOUNDATION - 200 PROSPECT STREET - EAST STROUDSBURG, PA 18301	22-2826714	501(C)(3)	15,438.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
EASTER SEALS SOCIETY OF EASTERN PENNSYLVANIA - 1501 LEHIGH STREET SUITE 201 - ALLENTOWN, PA 18103	23-2823542	501(C)(3)	31,552.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
EASTERN PA TRANS EQUITY PROJECT, INC. - 1807 MAJESTIC DR. - OREFIELD, PA 18069	84-3324666	501(C)(3)	20,000.	0.			PROGRAM OPERATING COSTS

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EASTON AREA COMMUNITY CENTER 901 WASHINGTON ST EASTON, PA 18042-4389	23-2147613	501(C)(3)	41,562.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
EASTON AREA NEIGHBORHOOD CENTER, INC. - 902 PHILADELPHIA ROAD - EASTON, PA 18042-6599	23-2039194	501(C)(3)	50,756.	0.			PROGRAM OPERATING COSTS
ELEVATE ORLANDO, INC P.O. BOX 940633 MAITLAND, FL 32794	26-3330456	501(C)(3)	10,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
EMMAUS CREATIVE ARTS & INNOVATION CENTER - 375 S. 10TH ST - EMMAUS, PA 18049	83-3932023	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
EMMAUS PUBLIC LIBRARY 11 E MAIN ST EMMAUS, PA 18049-4012	23-1443435	501(C)(3)	27,372.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ENGINEERS WITHOUT BORDERS USA, INC 1031 33RD ST STE 210 DENVER, CO 80205-2767	84-1589324	501(C)(3)	44,950.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
EQUI-LIBRIUM, INC. 524 FEHR RD NAZARETH, PA 18064-9153	23-3088228	501(C)(3)	30,849.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FACES INTERNATIONAL LLC 1000 POSTAL RD. P.O. BOX 90331 ALLENTOWN, PA 18109	27-4170024		15,000.	0.			PROGRAM OPERATING COSTS
FAITH EVANGELICAL FREE CHURCH TREXLERTOWN - 6528 HAMILTON BLVD - ALLENTOWN, PA 18106-9184	23-6408347	501(C)(3)	12,635.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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FAITH LUTHERAN CHURCH - WHITEHALL 3355 MACARTHUR RD WHITEHALL, PA 18052	23-1887428	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FAMILY CONNECTION OF EASTON, INC. 723 COAL ST EASTON, PA 18042	20-4934762	501(C)(3)	158,268.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
FAMILY PROMISE OF CARBON COUNTY 167 S 3RD ST, LEHIGHTON, PA 18235	27-0763520	501(C)(3)	15,737.	0.			PROGRAM OPERATING COSTS
FINE FEATHER FOUNDATION INC 526 N SAINT CLOUD ST STE 257 ALLENTOWN, PA 18104	87-3331670	501(C)(3)	15,000.	0.			PROGRAM OPERATING COSTS
FIRST 72 2915 PERDIDO STREET NEW ORLEANS, LA 70119	47-1833909	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FIRST PRESBYTERIAN CHURCH OF ALLENTOWN - 3231 W TILGHMAN ST - ALLENTOWN, PA 18104-3412	23-1352423	501(C)(3)	21,925.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FIRST TEE OF THE LEHIGH VALLEY & BERKS (EMBRACE YOUR DREAMS) - PO BOX 3352 - ALLENTOWN, PA 18106	23-3079346	501(C)(3)	5,600.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FOLDS OF HONOR EASTERN PENNSYLVANIA - NEW JERSEY CHAPTER - P.O. BOX 276 - CENTER VALLEY, PA 18034	82-4852655	501(C)(3)	9,835.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FOLDS OF HONOR FOUNDATION 5800 N. PATRIOT DRIVE OWASSO, OK 74055	75-3240683	501(C)(3)	6,400.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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FOR PETE'S SAKE CANCER RESPITE FOUNDATION - 620 W GERMANTOWN PIKE STE 250 - PLYMOUTH MEETING, PA 19462	23-3013896	501(C)(3)	12,550.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FOUNDATION FOR MOUNT NITTANY MEDICAL CENTER - 1800 EAST PARK AVE - STATE COLLEGE, PA 16803	57-1138956	501(C)(3)	15,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FOX CHASE CANCER CENTER 333 COTTMAN AVE PHILADELPHIA, PA 19111-2497	23-6296135	501(C)(3)	16,283.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FRIENDS OF FATHER JUDGE HIGH SCHOOL INC - 3301 SOLLY AVE - PHILADELPHIA, PA 19136-2340	75-3053213	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FRIENDS OF THE 1803 HOUSE, INC PO BOX 7 EMMAUS, PA 18049	23-2053852	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FRIENDS OF THE BETHLEHEM MOUNTED POLICE - 615 E LANGHORNE AVE - BETHLEHEM, PA 18017	45-1546262	501(C)(3)	7,654.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FUND FOR THE ARTS 623 W MAIN ST LOUISVILLE, KY 40202	61-0479626	501(C)(3)	17,579.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
FUND TO BENEFIT CHILDREN & YOUTH, INC. - 903 E. ELM ST. - ALLENTOWN, PA 18109-2629	23-2643243	501(C)(3)	42,195.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GEORGETOWN UNIVERSITY 37TH AND O STS NW WASHINGTON, DC 20007	53-0196603	501(C)(3)	6,448.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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GETTYSBURG COLLEGE 300 N WASHINGTON ST GETTYSBURG, PA 17325-1400	23-1352641	501(C)(3)	5,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GIRL SCOUTS HEART OF NEW JERSEY INC - PO BOX 2429 - WESTFIELD, NJ 07090	22-1638950	501(C)(3)	17,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GIRL SCOUTS OF EASTERN PENNSYLVANIA - 330 MANOR ROAD - MIQUON, PA 19444-1741	23-1599656	501(C)(3)	82,688.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
GIRLS ON THE RUN LEHIGH VALLEY 2206 APPLE RD. FOGELSVILLE, PA 18051	88-1559099	501(C)(3)	31,986.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
GLOBAL HUNGER PROJECT DBA THE HUNGER PROJECT - 110 W 30TH ST FL 6 - THP 6TH FLOOR - NEW YORK, NY 10001	94-2443282	501(C)(3)	21,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GOOD SHEPHERD 850 S 5TH ST ALLENTOWN, PA 18103-3308	23-2216041	501(C)(3)	83,025.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GRACE CHURCH BETHLEHEM 4301 HECKTOWN RD BETHLEHEM, PA 18020	81-4710701	501(C)(3)	25,100.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GREATER EASTON DEVELOPMENT PARTNERSHIP - 325 NORTHAMPTON ST. - EASTON, PA 18042	23-2660344	501(C)(3)	104,755.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
GREATER SUSQUEHANNA VALLEY UNITED WAY - 228 ARCH ST. - SUNBURY, PA 17801	23-1697631	501(C)(3)	22,370.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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GREATER VALLEY YMCA 2132 S. 12TH ST. STE 201 ALLENTOWN, PA 18103	24-0798706	501(C)(3)	165,480.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
GROW AHEAD FOUNDATION PO BOX 86104 PORTLAND, OR 97286	46-1047083	501(C)(3)	10,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HABITAT FOR HUMANITY OF THE LEHIGH VALLEY - 245 N. GRAHAM ST - ALLENTOWN, PA 18109-2191	23-2544326	501(C)(3)	15,633.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HAWK MOUNTAIN SANCTUARY ASSOCIATION - 1700 HAWK MOUNTAIN ROAD - KEMPTON, PA 19529	23-1392700	501(C)(3)	13,915.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HCU NETWORK AMERICA 15 SOUTH MALLORY AVE. BATAVIA, IL 60510	81-3646006	501(C)(3)	52,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HILLSIDE SCHOOL 2697 BROOKSIDE RD MACUNGIE, PA 18062-9045	23-2263178	501(C)(3)	11,591.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HISPANIC CENTER LEHIGH VALLEY 520 E 4TH ST BETHLEHEM, PA 18015	23-1882308	501(C)(3)	116,612.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
HISTORIC BETHLEHEM PARTNERSHIP INC. - 74 W BROAD ST STE 310 - BETHLEHEM, PA 18018	23-2741808	501(C)(3)	27,547.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HONOR WATER 2140 E CHISHOLM TRL FLAGSTAFF, AZ 86005	88-1488952	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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HUMANE PENNSYLVANIA 1729 N 11TH STREET READING, PA 19604	23-1384936	501(C)(3)	16,625.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HUMANITARIAN SOCIAL INNOVATIONS 301 BROADWAY, SUITE 115 BETHLEHEM, PA 18015	46-4779591	501(C)(3)	25,000.	0.			PROGRAM OPERATING COSTS
HUNTINGTON'S DISEASE SOCIETY OF AMERICA, INC - 505 8TH AVENUE SUITE 1402 - NEW YORK, NY 10018	13-3349872	501(C)(3)	10,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
HUTCHINSON COUNTY UNITED WAY INC PO BOX 1430 BORGER, TX 79008	75-0875853	501(C)(3)	17,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ILLINOIS RAILWAY MUSEUM PO BOX 427 UNION, IL 60180	36-6108196	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
IMMUNE DEFICIENCY FOUNDATION 7550 TEAGUE ROAD, SUITE 220 HANOVER, MD 21076	52-1214782	501(C)(3)	8,838.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
INDEPENDENT PRESBYTERIAN CHURCH FOUNDATION - 3100 HIGHLAND AVENUE S. - BIRMINGHAM, AL 35205	23-7396600	501(C)(3)	14,875.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
INTERNATIONAL OCD FOUNDATION PO BOX 961029 BOSTON, MA 02196	22-2894564	501(C)(3)	35,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
IRONCLAD MANAGEMENT CONSULTING LLC 4740 BROOKRIDGE DRIVE CENTER VALLEY, PA 18034	84-3877913		15,000.	0.			PROGRAM OPERATING COSTS

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IRONPIGS CHARITIES 1050 IRON PIGS WAY ALLENTOWN, PA 18109-3513	26-0193246	501(C)(3)	17,270.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
JAZZ HOUSE KIDS, INC. 347 BLOOMFIELD AVE LOWER LEVEL MONTCLAIR, NJ 07042	56-2303577	501(C)(3)	5,625.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
JEFFERSON COUNTY UNITED WAY 100 EAST SECOND STREET, SUITE B MADISON, IN 47250	35-6006467	501(C)(3)	8,584.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
JEWISH COMMUNITY CENTER OF ALLENTOWN - 702 N 22ND ST - ALLENTOWN, PA 18104	23-0734200	501(C)(3)	6,720.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
JEWISH FEDERATION OF THE LEHIGH VALLEY - 702 N 22ND STREET - ALLENTOWN, PA 18104	23-6396949	501(C)(3)	34,517.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
JOYFUL GIVING P.O. BOX 253 TREXLERTOWN, PA 18087	30-1286290	501(C)(3)	11,865.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
JUSTICE COLLABORATIVE, LLC P.O. BOX 82563 PITTSBURGH, PA 15218-0563	92-3935729		18,050.	0.			PROGRAM OPERATING COSTS
KELLYN FOUNDATION PO BOX 369 TATAMY, PA 18085	26-2623498	501(C)(3)	77,239.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
KIDSPACE 4085 INDEPENDENCE DRIVE SCHNECKSVILLE, PA 18078	23-1353394	501(C)(3)	18,799.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
KINDNESS PROJECT 4752 MILL RD EMMAUS, PA 18049	84-2299018	501(C)(3)	12,513.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
KOLPING YOUTH INTERNATIONAL 1140 EVERGREEN ST SAN DIEGO, CA 92106	45-3156956	501(C)(3)	32,164.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LAFAYETTE COLLEGE 201 HOGG HALL EASTON, PA 18042	24-0795686	501(C)(3)	129,592.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LANDMARK COLLEGE 19 RIVER RD. S PUTNEY, VT 05346	22-2586208	501(C)(3)	6,125.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LAUGHING AT MY NIGHTMARE INC 2732 LAFAYETTE AVE. BETHLEHEM, PA 18017-4028	45-4553464	501(C)(3)	9,067.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH CONFERENCE OF CHURCHES 457 W. ALLEN ST ALLENTOWN, PA 18102	23-1484205	501(C)(3)	29,635.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
LEHIGH COUNTY HUMANE SOCIETY 640 DIXON ST ALLENTOWN, PA 18103	23-1365372	501(C)(3)	6,035.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH UNIVERSITY - COMMUNITY SCHOOL OFFICE - 29 TREMBLY DR - BETHLEHEM, PA 18015	24-0795445	501(C)(3)	198,000.	0.			PROGRAM OPERATING COSTS
LEHIGH UNIVERSITY - OFFICE OF DEV AND ALUMNI RELATIONS - 306 S. NEW ST. SUITE 500 - BETHLEHEM, PA 18015-1652	24-0795445	501(C)(3)	185,838.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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LEHIGH VALLEY ACTIVE LIFE 1633 W ELM ST. ALLENTOWN, PA 18102	23-1627030	501(C)(3)	57,288.	0.			PROGRAM OPERATING COSTS
LEHIGH VALLEY ATHLETIC CLUB 54 S COMMERCE WAY STE 172 BETHLEHEM, PA 18017	23-3019288	501(C)(3)	25,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY BLACK CHURCH HOUSING ALLIANCE - 600 COUNTRY CLUB RD - EASTON, PA 18045	83-1407226	501(C)(3)	15,000.	0.			PROGRAM OPERATING COSTS
LEHIGH VALLEY CENTER FOR INDEPENDENT LIVING - 713 N. 13TH STREET - ALLENTOWN, PA 18102	23-2610549	501(C)(3)	20,000.	0.			PROGRAM OPERATING COSTS
LEHIGH VALLEY CHILDREN'S CENTERS, INC. - 1501 LEHIGH ST STE 208 - ALLENTOWN, PA 18103-3880	23-1908158	501(C)(3)	117,075.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
LEHIGH VALLEY COMMUNITY FOUNDATION 840 HAMILTON ST STE 310 ALLENTOWN, PA 18101-2456	23-1686634	501(C)(3)	91,134.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY ECONOMIC DEVELOPMENT CORP. - 520 NORTH NEW STREET - BETHLEHEM, PA 18018	23-2798276	501(C)(3)	11,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY HEALTH NETWORK 2100 MACK BLVD ALLENTOWN, PA 18103	23-1689692	501(C)(3)	446,624.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY INTER-REGIONAL NETWORKING - 26 E 3RD ST UNIT 2 - BETHLEHEM, PA 18015	47-2612358	501(C)(3)	5,505.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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LEHIGH VALLEY PBS/WLVT 839 SESAME STREET BETHLEHEM, PA 18015	23-1642883	501(C)(3)	64,474.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LEHIGH VALLEY ZOO 5150 GAMES PRESERVE RD SCHNECKSVILLE, PA 18078-3305	05-0606070	501(C)(3)	17,078.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LIFE SCIENCE CARES, INC. PO BOX 425486 CAMBRIDGE, MA 02142	81-2435939	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LIFEPATH FOUNDATION 3500 HIGH POINT BLVD BETHLEHEM, PA 18017	23-7402943	501(C)(3)	68,389.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LITTLE AMIGOS EARLY LEARNING CENTER INC - 1195 CENTRE ST - BOSTON, MA 02130	88-4291936	501(C)(3)	9,231.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LORD'S PANTRY OF DOWNINGTOWN 141 E. LANCASTER AVE DOWNINGTOWN, PA 19335	23-3092880	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
LYCOMING COUNTY UNITED WAY 1 WEST THIRD ST SUITE 208 WILLIAMSPORT, PA 17701-6542	24-0828149	501(C)(3)	22,504.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MAIN LINE REFORM TEMPLE 410 MONTGOMERY AVE WYNNEWOOD, PA 19096	13-1663143	501(C)(3)	5,425.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MANHATTAN COLLEGE 4513 MANHATTAN PARKWAY RIVERDALE, NY 10471-0000	13-1740468	501(C)(3)	11,414.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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MARIA VERAS FAMILY DAYCARE, INC. 27 N 12TH ST ALLENTOWN, PA 18101-1029	83-3208835		64,700.	0.			PROGRAM OPERATING COSTS
MARTHA LLOYD SCHOOL INC 66 LLOYD LN TROY, PA 16947-1502	23-1459614	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MARYHURST, INC 1015 DORSEY LN LOUISVILLE, KY 40223	31-1542209	501(C)(3)	15,846.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MASSACHUSETTS INSTITUTE OF TECHNOLOGY - 77 MASSACHUSETTS AVENUE - CAMBRIDGE, MA 02139-4822	04-2103594	501(C)(3)	97,062.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MATTIE N DIXON COMM CUPBOARD INC 150 N MAIN ST AMBLER, PA 19002-5712	23-3061645	501(C)(3)	7,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MAYO CLINIC (MAYO CLINIC FLORIDA) 4500 SAN PABLO RD S JACKSONVILLE, FL 32224-1865	59-0714831	501(C)(3)	12,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MEALS ON WHEELS OF THE GREATER LEHIGH VALLEY - 1302 N. SHERMAN ST. - ALLENTOWN, PA 18109	23-1861779	501(C)(3)	161,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
MERCER MUSEUM(OUTREACH) 84 S PINE ST DOYLESTOWN, PA 18901-4930	23-1371952	501(C)(3)	10,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MERCY SPECIAL LEARNING CENTER 830 S WOODWARD ST ALLENTOWN, PA 18103-3440	90-0988217	501(C)(3)	49,176.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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METRO UNITED WAY PO BOX 4488 LOUISVILLE, KY 40204	61-0444680	501(C)(3)	50,836.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MILLER-KEYSTONE BLOOD CENTER 1465 VALLEY CENTER PKWY BETHLEHEM, PA 18017	23-1731796	501(C)(3)	51,557.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
MIRACLE LEAGUE OF THE LEHIGH VALLEY - 4460 PARK VIEW DR - SCHNECKSVILLE, PA 18078-2579	74-3167008	501(C)(3)	8,979.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MOCK TURTLE MARIONETTE THEATER 421 SECOND AVE. BETHLEHEM, PA 18018	23-2992625	501(C)(3)	12,000.	0.			PROGRAM OPERATING COSTS
MONMOUTH UNIVERSITY 400 CEDAR AVE W LONG BRANCH, NJ 07764-1898	21-0634584	501(C)(3)	15,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MORAVIAN ACADEMY 7 E MARKET ST. FL 2 BETHLEHEM, PA 18018-5963	24-0829838	501(C)(3)	15,761.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MORAVIAN UNIVERSITY 1200 MAIN STREET BETHLEHEM, PA 18018	24-0795460	501(C)(3)	179,888.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
MOTHER2MOTHER 208 S. 13TH ST. ALLENTOWN, PA 18103	85-4177086	501(C)(3)	30,000.	0.			PROGRAM OPERATING COSTS
MOVEMENT MOVES MEDIA 1232 BRANDT DRIVE BREININGSVILLE, PA 18031	83-1777891	501(C)(3)	7,500.	0.			PROGRAM OPERATING COSTS

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MUHLENBERG COLLEGE 2400 CHEW STREET ALLENTOWN, PA 18104-5564	23-1352664	501(C)(3)	27,777.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
MUHLENBERG COLLEGE INSTITUTE OF PUBLIC OPINION - 2400 W. CHEW ST. - ALLENTOWN, PA 18104	23-1352664	501(C)(3)	8,750.	0.			PROGRAM OPERATING COSTS
MUNCY BAPTIST CHURCH 11 W PENN ST MUNCY, PA 17756	13-5563018	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
NAMI LEHIGH VALLEY 802 W. BROAD ST. BETHLEHEM, PA 18018-5225	91-1846073	501(C)(3)	5,748.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
NATIONAL MUSEUM OF INDUSTRIAL HISTORY - 754 ROBLE RD STE 70 - ALLENTOWN, PA 18109	23-2912750	501(C)(3)	95,181.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
NEW BETHANY, INC. 333 W. 4TH ST. BETHLEHEM, PA 18015	23-2365694	501(C)(3)	220,753.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
NORTH CAROLINA SYMPHONY SOCIETY, INC. - 3700 GLENWOOD AVE, SUITE 130 - RALEIGH, NC 27612	56-0556755	501(C)(3)	14,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
NORTHAMPTON COMMUNITY COLLEGE 3835 GREEN POND ROAD BETHLEHEM, PA 18020	23-2064496	501(C)(3)	40,000.	0.			PROGRAM OPERATING COSTS
NORTHAMPTON COUNTY COMMUNITY COLLEGE FOUNDATION - 3835 GREEN POND RD - BETHLEHEM, PA 18020-7568	23-2064496	501(C)(3)	131,776.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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NORTHAMPTON COUNTY HISTORICAL & GENEALOGICAL SOCIETY - 342 NORTHAMPTON STREET - EASTON, PA 18042-3514	24-6021192	501(C)(3)	17,573.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
NORTHEAST COMMUNITY CENTER PO BOX 1463 BETHLEHEM, PA 18016-1463	23-2339841	501(C)(3)	20,000.	0.			PROGRAM OPERATING COSTS
NOTRE DAME HIGH SCHOOL 3417 CHURCH RD. EASTON, PA 18045	24-0834373	501(C)(3)	222,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
NOTRE DAME OF BETHLEHEM CHURCH 1861 CATASAQUA RD BETHLEHEM, PA 18018	23-1440569	501(C)(3)	12,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
OHIO STATE UNIVERSITY FOUNDATION 1480 WEST LANE AVENUE COLUMBUS, OH 43221	31-1145986	501(C)(3)	9,438.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PARADIGM ONE 302 NORTH 6TH STREET ALLENTOWN, PA 18102	81-1339078	501(C)(3)	20,000.	0.			PROGRAM OPERATING COSTS
PARKLAND CARES FOOD PANTRY 5074 KERNSVILLE RD. UNIT #4 OREFIELD, PA 18069	83-0559064	501(C)(3)	9,892.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PARKLAND SCHOOL DISTRICT EDUCATION FOUNDATION - 1210 SPRINGHOUSE RD - ALLENTOWN, PA 18104-2119	42-2645543	501(C)(3)	51,908.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PEACEABLE KINGDOM, INC PO BOX 424 WHITEHALL, PA 18052	23-2958207	501(C)(3)	6,851.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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PEDIATRIC CANCER FOUNDATION OF THE LEHIGH VALLEY - 4501 CRACKERSPORT ROAD - ALLENTOWN, PA 18104	20-2297295	501(C)(3)	17,005.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PELICAN SOUND CHARITABLE FOUNDATION, INC - 4569 PELICAN SOUND BLVD - ESTERO, FL 33928	84-1746629	501(C)(3)	7,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PENN HIGHLANDS HEALTHCARE FUND DEVELOPMENT - 100 HOSPITAL AVENUE PO BOX 447 - DUBOIS, PA 15801	32-0345810	501(C)(3)	16,700.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PENNSYLVANIA JUNIOR ACADEMY OF SCIENCE - 4050 ASCOT CIRCLE - ALLENTOWN, PA 18103	23-6396183	501(C)(3)	6,125.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PENNSYLVANIA SINFONIA ORCHESTRA 1524 W LINDEN ST ALLENTOWN, PA 18104	23-2215547	501(C)(3)	19,538.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PENNSYLVANIA STATE UNIVERSITY PHILANTHROPIC FUND - 408 OLD MAIN - UNIVERSITY PARK, PA 16802	27-4628784	501(C)(3)	274,017.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PEOPLES SECURITY CHARITABLE FOUNDATION - 150 N WASHINGTON AVE - SCRANTON, PA 18503	25-1886434	501(C)(3)	6,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PHILABUNDANCE 3616 S GALLOWAY ST PHILADELPHIA, PA 19148-5402	23-2290505	501(C)(3)	14,203.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PHOEBE-DEVITT HOMES 1925 TURNER ST. ALLENTOWN, PA 18104-5551	23-2302675	501(C)(3)	22,376.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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PINEBROOK FAMILY ANSWERS 402 N. FULTON ST. ALLENTOWN, PA 18102	23-2112204	501(C)(3)	302,733.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
PLANNED PARENTHOOD FEDERATION OF AMERICA - 123 WILLIAMS ST 10TH FLOOR - NEW YORK, NY 10038	13-1644147	501(C)(3)	6,117.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PLANNED PARENTHOOD KEYSTONE PO BOX 944 BENSALEM, PA 19020	23-2450112	501(C)(3)	15,680.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
POCONO MOUNTAINS UNITED WAY PO BOX 790 TANNERSVILLE, PA 18372-0790	24-0797026	501(C)(3)	30,378.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
PRATYUSH SINHA FOUNDATION 961 MARCON BLVD. STE 102 ALLENTOWN, PA 18109	46-0733274	501(C)(3)	40,000.	0.			PROGRAM OPERATING COSTS
PREVENTIVE MEASURES FOUNDATION 519 W LINDEN ST ALLENTOWN, PA 18101	87-4662979	501(C)(3)	20,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
PROJECT OF EASTON, INC. 320 FERRY ST. EASTON, PA 18042-4541	23-2112204	501(C)(3)	112,960.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
PROMISE NEIGHBORHOODS OF THE LEHIGH VALLEY - 1101 HAMILTON STREET STE 102 - ALLENTOWN, PA 18101	23-3025771	501(C)(3)	154,816.	0.			PROGRAM OPERATING COSTS
PUSH THE ROCK PO BOX 95 EMMAUS, PA 18049-0095	23-2990640	501(C)(3)	28,754.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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QUAKERTOWN COMMUNITY OUTREACH PO BOX 929 RICHLANDTOWN, PA 18955	81-0850188	501(C)(3)	10,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
REFUGEE COMMUNITY CENTER 1620 WEST TURNER STREET ALLENTOWN, PA 18102	99-4547554	501(C)(3)	28,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
RESURRECTED COMMUNITY DEVELOPMENT CORP, INC. - 916 WEST TURNER ST. - ALLENTOWN, PA 18102	45-1018523	501(C)(3)	151,938.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
RIPPLE COMMUNITY INC. 1335 W. LINDEN ST. ALLENTOWN, PA 18102	47-4828012	501(C)(3)	14,981.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
RODALE INSTITUTE 611 SIEGFRIEDALE RD KUTZTOWN, PA 19530-9749	23-7206884	501(C)(3)	6,245.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
RONALD MCDONALD HOUSE OF SOUTHERN NEW JERSEY INC - 550 MICKLE BLVD - CAMDEN, NJ 08103-1144	22-2430393	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ROTARY CLUB FOUNDATION OF ALLENTOWN WEST-WESTERN L - 138 DEER RUN RD - KUTZTOWN, PA 19530	82-0589636	501(C)(3)	54,375.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
RUFF LIFE RESCUE & REHABILITATION INC - 2148 AMLISA RD - NAZARETH, PA 18064	81-5029263	501(C)(3)	8,538.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SAFE HARBOR EMERGENCY SHELTER 536 BUSHKILL DRIVE EASTON, PA 18042	23-2589941	501(C)(3)	41,005.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS

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SALVAGGIO ACADEMY 3145 HAMILTON BLVD BYPASS ALLENTOWN, PA 18103	46-5443812	501(C)(3)	1,951,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SALVATION ARMY OF THE LEHIGH VALLEY - 344 NORTH 7TH ST. - ALLENTOWN, PA 18102	13-5562351	501(C)(3)	88,023.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
SANCTUARY AT HAAFVILLE PO BOX 921 FOGELSVILLE, PA 18051-0921	27-2756157	501(C)(3)	24,311.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SARASOTA-MANATEE JEWISH FEDERATION INC - 580 MCINTOSH RD - SARASOTA, FL 34232-1957	59-1227747	501(C)(3)	112,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SAVE THE CHILDREN FEDERATION INC 501 KINGS HIGHWAY EAST SUITE 400 FAIRFIELD, CT 06825	06-0726487	501(C)(3)	7,875.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SCHUYLKILL UNITED WAY 9 N CENTRE ST STE 301 POTTSVILLE, PA 17901-2925	23-1999071	501(C)(3)	17,204.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SELF! LV 40 S. 5TH STREET ALLENTOWN, PA 18101	36-4916578	501(C)(3)	10,000.	0.			PROGRAM OPERATING COSTS
SETON HALL UNIVERSITY 400 SOUTH ORANGE AVENUE BAYLEY HALL SOUTH ORANGE, NJ 07079	22-1500645	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SHANTHI PROJECT P.O. BOX 91423 ALLENTOWN, PA 18109	27-3592356	501(C)(3)	51,671.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHARE CARE FAITH IN ACTION 321 WYANDOTTE ST BETHLEHEM, PA 18015	23-2635994	501(C)(3)	30,000.	0.			PROGRAM OPERATING COSTS
SIGHTS FOR HOPE 845 W WYOMING STREET ALLENTOWN, PA 18103	23-1352260	501(C)(3)	74,141.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
SKILLSUSA COUNCIL 555 UNION BLVD ALLENTOWN, PA 18109	23-2695915	501(C)(3)	12,478.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SLATER FAMILY NETWORK 187 FIVE POINTS RICHMOND RD BANGOR, PA 18013	16-1672864	501(C)(3)	48,822.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
SMALL MAGIC PO BOX 785 BIRMINGHAM, AL 35201	84-2967401	501(C)(3)	5,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SOUTHERN LEHIGH EDUCATION FOUNDATION - 5775 MAIN ST - CENTER VALLEY, PA 18034	20-2514811	501(C)(3)	13,168.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SPECIAL OLYMPICS NEW YORK 94 NEW KARNER ROAD, SUITE 208 ALBANY, NY 12203	23-7061382	501(C)(3)	15,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SPECIAL OPERATIONS FUND 901 N STUART ST STE 1200 ARLINGTON, VA 22203	52-1765222	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST BALDRICKS FOUNDATION 1333 S MAYFLOWER AVE STE 400 MONROVIA, CA 91016-5268	20-1173824	501(C)(3)	16,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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ST JUDE CHILDRENS RESEARCH HOSPITAL - 501 ST. JUDE PLACE - MEMPHIS, TN 38105-2729	62-0646012	501(C)(3)	38,168.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST MICHAEL THE ARCHANGEL SCHOOL - ELEMENTARY SCHOOL CAMPUS - 51 S 3RD STREET - COOPERSBURG, PA 18036	23-2042774	501(C)(3)	167,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST MICHAEL THE ARCHANGEL SCHOOL - MIDDLE SCHOOL CAMPUS - 4121 OLD BETHLEHEM PK - BETHLEHEM, PA 18015-9097	23-2042774	501(C)(3)	7,793.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST THOMAS MORE CHURCH 1040 FLEXER AVE ALLENTOWN, PA 18103	23-2091672	501(C)(3)	54,381.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST. ANN SCHOOL 435 SOUTH 6TH STREET EMMANUS, PA 18049	23-2091672	501(C)(3)	21,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST. BENEDICT'S PREPARATORY SCHOOL 520 MARTIN LUTHER KING JR BLVD NEWARK, NJ 07102	22-1861903	501(C)(3)	285,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST. FRANCIS DESALES HIGH SCHOOL FOUNDATION, INC - 425 WEST KENWOOD DRIVE - LOUISVILLE, KY 40214	26-0689151	501(C)(3)	5,646.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST. HUBERT CATHOLIC HIGH SCHOOL FOR GIRLS - 7320 TORRESDALE AVE - PHILADELPHIA, PA 19136	23-1355131	501(C)(3)	14,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST. JOHN'S EPISCOPAL CHURCH 158 WEST HIGH STREET SOMERVILLE, NJ 08876	22-6002945	501(C)(3)	29,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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ST. LUKE'S HOSPICE (VNA) 240 UNION STATION PLZ #1 BETHLEHEM, PA 18015-1281	24-0795497	501(C)(3)	119,487.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
ST. LUKE'S HOSPITAL 801 OSTRUM STREET BETHLEHEM, PA 18015-1014	23-1352213	501(C)(3)	545,209.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
ST. LUKE'S UNITED METHODIST CHURCH 4851 S. APOPKA-VINELAND ROAD ORLANDO, FL 32819	36-2167731	501(C)(3)	7,875.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
ST. LUKE'S UNIVERSITY HEALTH NETWORK - 1110 ST. LUKE'S WAY 2ND FLOOR - ALLENTOWN, PA 18109	23-1352213	501(C)(3)	79,906.	0.			PROGRAM OPERATING COSTS
STEPHEN SILLER TUNNEL TO TOWERS FOUNDATION - 2361 HYLAN BLVD - STATEN ISLAND, NY 10306	02-0554654	501(C)(3)	7,605.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SUMMIT HILL HERITAGE CENTER ATTN: DEBRA S. RANCK 1 WEST HAZARD SUMMIT HILL, PA 18250	27-1271043	501(C)(3)	5,234.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
SWEETWATER-MONROE COUNTY UNITED FD 695 NEW HIGHWAY 68 SWEETWATER, TN 37874	23-7433635	501(C)(3)	6,969.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE ALLENTOWN PARKNERSHIP 600 HAMILTON ST STE 310 ALLENTOWN, PA 18101	88-4245260	501(C)(3)	9,845.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE BARN 682 N BROOKSIDE RD STE 200 ALLENTOWN, PA 18106	39-2068368	501(C)(3)	25,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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THE BAUM SCHOOL OF ART 510 W. LINDEN ST. ALLENTOWN, PA 18101	23-1607174	501(C)(3)	83,177.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE CENTURY PROMISE 840 W HAMILTON STREET SUITE 600 ALLENTOWN, PA 18101	86-1493961	501(C)(3)	88,765.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
THE CHILDREN'S CENTER VOLUNTEER OF AMERICA - 730 W UNION STREET - ALLENTOWN, PA 18101	13-1692595	501(C)(3)	122,174.	0.			PROGRAM OPERATING COSTS
THE CHILDREN'S HOSPITAL OF PHILADELPHIA(CHOP) - 3401 CIVIC CENTER BLVD - PHILADELPHIA, PA 19104-9829	23-1352166	501(C)(3)	11,451.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE FOUNDATION FOR EASTON SCHOOLS 1801 BUSHKILL DR. EASTON, PA 18040	27-4701323	501(C)(3)	36,339.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE FOUNDATION FOR THE BASD PO BOX 646 BETHLEHEM, PA 18016	23-2896860	501(C)(3)	13,887.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE LITERACY CENTER 1132 HAMILTON ST. SUITE 300 ALLENTOWN, PA 18101	22-2458322	501(C)(3)	35,931.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
THE NEIGHBORHOOD CENTER 344 N. 7TH ST. ALLENTOWN, PA 18102	23-3094703	501(C)(3)	5,770.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE ORTIZ ARK FOUNDATION 523 W TILGHMAN ST ALLENTOWN, PA 18102	84-3640684	501(C)(3)	10,000.	0.			PROGRAM OPERATING COSTS

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THE PARKESBURG POINT YOUTH CENTER 700 MAIN STREET PARKESBURG, PA 19365	03-0399261	501(C)(3)	14,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE PENNSYLVANIA SHAKESPEARE FESTIVAL - 2755 STATION AVE - CENTER VALLEY, PA 18034-9565	23-2655672	501(C)(3)	105,630.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE STATE THEATRE CENTER FOR THE ARTS - 453 NORTHAMPTON ST - EASTON, PA 18042	23-2173216	501(C)(3)	36,650.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE SUMMIT FOUNDATION PO BOX 4000 BRECKENRIDGE, CO 80424	74-2341399	501(C)(3)	29,038.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE THRIVE HUB INC P.O BOX 21652 LEHIGH VALLEY, PA 18002	86-2041744	501(C)(3)	12,500.	0.			PROGRAM OPERATING COSTS
THE TRUSTEES OF STEVENS INSTITUTE OF TECHNOLOGY - 1 CASTLE POINT TERRACE - HOBOKEN, NJ 07030	22-1487354	501(C)(3)	14,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE TRUSTEES OF TRINITY COLLEGE 300 SUMMIT ST, HARTFORD, CT 06106	06-0646927	501(C)(3)	15,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THE UNITED WAY OF LACKAWANNA, WAYNE AND PIKE COUNTIES - 615 JEFFERSON AVENUE - SCRANTON, PA 18501-0526	24-0824164	501(C)(3)	25,263.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
THIRD STREET ALLIANCE FOR WOMEN & CHILDREN - 41 N 3RD ST - EASTON, PA 18042	24-0795639	501(C)(3)	170,560.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS

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THRIVE DC 1525 NEWTON ST NW WASHINGTON, DC 20010	52-1485474	501(C)(3)	6,854.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
TOUCHSTONE THEATRE 321 E. 4TH. ST. BETHLEHEM, PA 18018	23-2073331	501(C)(3)	10,000.	0.			PROGRAM OPERATING COSTS
TRINITY HALL 101 CORREGIDOR RD TINTON FALLS, NJ 07724	45-4641636	501(C)(3)	50,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA - 3535 MARKET STREET, SUITE 750 - PHILADELPHIA, PA 19104	23-1352685	501(C)(3)	48,625.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
TUG MCGRAW FOUNDATION PO BOX 45 YOUNTVILLE, CA 94599-0045	20-0586256	501(C)(3)	12,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
TURNING POINT OF LEHIGH VALLEY 444 E. SUSQUEHANNA ST. ALLENTOWN, PA 18103	23-2100651	501(C)(3)	117,660.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
UNBOUND 1 ELMWOOD AVE KANSAS CITY, KS 66103-2118	43-1243999	501(C)(3)	21,375.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNIDOS, INC. 1329 HAMILTON ST FL 1 ALLENTOWN, PA 18102	83-4310898	501(C)(3)	25,000.	0.			PROGRAM OPERATING COSTS
UNION UNITED CHURCH OF CHRIST PO BOX 66 NEFFS, PA 18065	23-1465631	501(C)(3)	39,188.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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UNITED CHURCH OF MARCO ISLAND 320 N. BARFIELD DR MARCO ISLAND, FL 34145	34-1927041	501(C)(3)	5,530.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED HEARTS LIFE MISSION 4 W MAIN ST MACUNGIE, PA 18062	85-3353636	501(C)(3)	15,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED STATES FUND FOR UNICEF 125 MAIDEN LN FL 11 NEW YORK, NY 10038-4999	13-1760110	501(C)(3)	8,923.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY BAY AREA 550 KEARNEY ST STE 1000 SAN FRANCISCO, CA 94108-2524	94-1312348	501(C)(3)	5,455.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY FOR GREATER AUSTIN 5930 MIDDLE FISKVILLE ROAD, 5TH FLO AUSTIN, TX 78752	74-1193439	501(C)(3)	5,899.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY GALVESTON COUNTY MAINLAND - 922 14TH STREET N - TEXAS CITY, TX 77590	74-1198299	501(C)(3)	6,694.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY INC (GREATER LOS ANGELES) - 515 SOUTH FIGUEROA STREET - LOS ANGELES, CA 90071-3309	95-2274801	501(C)(3)	6,097.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF BERKS COUNTY 25 N. 2ND STREET SUITE 101 READING, PA 19601	23-1655375	501(C)(3)	158,747.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF BUCKS COUNTY 413 HOOD BLVD FAIRLESS HILLS, PA 19030	23-1409706	501(C)(3)	14,933.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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UNITED WAY OF CENTRAL ALABAMA, INC. - PO BOX 320189 - BIRMINGHAM, AL 35232-0189	63-0288846	501(C)(3)	12,500.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF CHESTER COUNTY 495 THOMAS JONES WAY SUITE 302 EXTON, PA 19341	57-0521945	501(C)(3)	6,150.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GLOUCESTER COUNTY 454 CROWN POINT RD. THOROFARE, NJ 08086-2124	21-6006822	501(C)(3)	8,925.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER ATLANTA 100 EDGEWOOD AVE NE ATLANTA, GA 30303-3026	58-0566194	501(C)(3)	8,552.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER HAZLETON 134 S. WYOMING ST. HAZLETON, PA 18201-7084	24-0796034	501(C)(3)	15,472.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER HOUSTON 50 WAUGH DR HOUSTON, TX 77007	74-1167964	501(C)(3)	52,436.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER PHILA AND SOUTHERN NEW JERSEY - 1709 BENJAMIN FRANKLIN PKWY - PHILADELPHIA, PA 19103-1294	23-1556045	501(C)(3)	28,892.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF GREATER ST. LOUIS, INC - 910 N 11TH ST - ST. LOUIS, MO 63101	43-0714167	501(C)(3)	14,855.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF KING COUNTY - WA 720 2ND AVE SEATTLE, WA 98104-1702	91-0565555	501(C)(3)	71,261.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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UNITED WAY OF LANCASTER COUNTY 1910 HARRINGTON DRIVE SUITE A LANCASTER, PA 17601	23-1352093	501(C)(3)	164,006.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
UNITED WAY OF NORTHERN NEW JERSEY PO BOX 6835 BRIDGEWATER, NJ 08807-0835	22-1487247	501(C)(3)	5,258.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF NORTHWEST ARKANSAS 100 PARKWOOD STREET LOWELL, AR 72745-8807	71-0305700	501(C)(3)	5,091.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF RHODE ISLAND 50 VALLEY ST PROVIDENCE, RI 02909-2459	05-0276059	501(C)(3)	63,569.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF SOUTHEAST LOUISIANA PO BOX 791790 NEW ORLEANS, LA 70179	72-0471369	501(C)(3)	6,162.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF THE BRADFORD AREA PO BOX 504 BRADFORD, PA 16701-0504	25-0965269	501(C)(3)	13,936.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF THE CAPE FEAR AREA 127 GRACE ST WILMINGTON, NC 28401	56-0529949	501(C)(3)	5,510.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF THE CAPITAL REGION - PA - 2235 MILLENUM WAY - ENOLA, PA 17025-1497	23-1352095	501(C)(3)	28,038.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY OF THE GREATER TRIANGLE 2400 PERIMETER PARK DR SUITE 150 MORRISVILLE, NC 27560	56-1949103	501(C)(3)	7,494.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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UNITED WAY OF WYOMING VALLEY 100 N. PENNSYLVANIA AVE. WILKES-BARRE, PA 18701	24-0831490	501(C)(3)	60,156.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNITED WAY SUNCOAST - TAMPA 5201 W KENNEDY BLVD, STE 600 TAMPA, FL 33609-1820	59-3725701	501(C)(3)	5,188.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNIVERSITY AT BUFFALO FOUNDATION, INC - PO BOX 900 - BUFFALO, NY 14226	16-0865182	501(C)(3)	27,563.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNIVERSITY OF CINCINNATI FOUNDATION - PO BOX 19970 - CINCINNATI, OH 45219-0970	31-0896555	501(C)(3)	8,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNIVERSITY OF ILLINOIS FOUNDATION PO BOX 734500 CHICAGO, IL 60673-4500	37-6006007	501(C)(3)	50,350.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UNIVERSITY OF VIRGINIA LAW SCHOOL FOUNDATION - 580 MASSIE RD - CHARLOTTESVILLE, VA 22903-1738	54-0838566	501(C)(3)	10,150.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
UPPER MACUNGIE TOWNSHIP COMMUNITY FUND - PO BOX 5 - FOGELSVILLE, PA 18051	84-3361134	501(C)(3)	50,000.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
URSINUS COLLEGE MAIN ST COLLEGEVILLE, PA 19426	23-1177930	501(C)(3)	7,875.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
VALLEY HEALTH PARTNERS COMMUNITY HEALTH CENTER - 400 N 17TH ST. - ALLENTOWN, PA 18104	84-4777167	501(C)(3)	26,293.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS

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VALLEY YOUTH HOUSE 3400 HIGH POINT BLVD BETHLEHEM, PA 18017-7815	23-7178820	501(C)(3)	1,106,954.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
VIA OF THE LEHIGH VALLEY, INC. 336 W SPRUCE ST BETHLEHEM, PA 18018-3789	23-1457999	501(C)(3)	54,354.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
VICTORY HOUSE OF LEHIGH VALLEY PO BOX 5458 BETHLEHEM, PA 18015-5458	23-2370759	501(C)(3)	55,978.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
VILLANOVA UNIVERSITY 800 E LANCASTER AVE VILLANOVA, PA 19085-1603	23-1352688	501(C)(3)	50,250.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
VOA CHILDREN'S CENTER 730 W UNION ST ALLENTOWN, PA 18101-6328	13-1692595	501(C)(3)	35,040.	0.			PROGRAM OPERATING COSTS
VOLUNTEER CENTER OF THE LEHIGH VALLEY - 25 W 3RD ST - BETHLEHEM, PA 18015	23-2862188	501(C)(3)	81,492.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
WASHINGTON UNIVERSITY 1 BROOKINGS DRIVE MSC 1082-414-2555 - ST. LOUIS, MO 63130	43-0653611	501(C)(3)	7,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WATCHTOWER BIBLE AND TRACT SOCIETY OF NEW YORK, INC. - 900 RED MILLS ROAD - WALLKILL, NY 12589	11-1753577	501(C)(3)	16,263.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WDIY 301 BROADWAY BETHLEHEM, PA 18015	23-2354475	501(C)(3)	22,219.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT

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WEST VIRGINIA UNIVERSITY FOUNDATION INC - PO BOX 1650 - MORGANTOWN, WV 26507-1650	55-6017181	501(C)(3)	5,005.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WHAS CRUSADE FOR CHILDREN 520 W CHESTNUT ST LOUISVILLE, KY 40202	23-7075524	501(C)(3)	39,401.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WHYY 150 N 6TH STREET PHILADELPHIA, PA 19106	23-1438083	501(C)(3)	6,533.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WILDLANDS CONSERVANCY 3701 ORCHID PLACE EMMAUS, PA 18049	23-7401326	501(C)(3)	200,914.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
WILKES UNIVERSITY 84 WEST SOUTH STREET WILKES-BARRE, PA 18766	24-0795506	501(C)(3)	13,750.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WORLD CENTRAL KITCHEN, INC 200 MASSACHUSETTS AVENUE NW SUITE 7 WASHINGTON, DC 20001-5654	27-3521132	501(C)(3)	14,757.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
WOUNDED WARRIOR PROJECT INC 4899 BELFORT RD STE 300 JACKSONVILLE, DC 32256-6033	20-2370934	501(C)(3)	24,256.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
YMCA RIVER CROSSING 2500 LOWER STATE DOYLESTOWN, PA 18901	23-1903158	501(C)(3)	26,167.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT ; PROGRAM OPERATING COSTS
YMCA RIVER CROSSING - PEN ARGYL 315 W. PENNSYLVANIA AVENUE PEN ARGYL, PA 18072	23-1903158	501(C)(3)	5,633.	0.			PROGRAM OPERATING COSTS

Schedule I (Form 990)

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

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOUNG LIFE LEHIGH VALLEY PO BOX 5249 BETHLEHEM, PA 18015	84-0385934	501(C)(3)	14,987.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
YWCA ALLENTOWN 609 HAMILTON ST. STE. LL200 ALLENTOWN, PA 18101	23-1352605	501(C)(3)	8,842.	0.			DONOR DESIGNATED FOR GENERAL SUPPORT
YWCA OF BETHLEHEM 3893 ADLER PL BLDG A STE 180 BETHLEHEM, PA 18017	23-6395256	501(C)(3)	42,500.	0.			PROGRAM OPERATING COSTS

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance

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

PART I, LINE 2:

MONITORING POLICIES FOR ALLOCATED FUNDING BEGINS WITH A SCREENING PROCESS CALLED THE QUALIFICATION REVIEW PROCESS. ALL ORGANIZATIONS RECEIVING UNITED WAY FUNDING MUST COMPLETE AND PASS A RIGOROUS QUALIFICATIONS CRITERIA APPLICATION FOR FUNDING CONSIDERATION. QUALIFYING FOR FUNDING, HOWEVER, DOES NOT GUARANTEE FUNDING. SERVICE PROVIDERS MUST MEET ALL 18 QUALIFICATIONS CRITERIA - LEGAL, GOVERNANCE, FINANCE, AND ORGANIZATIONAL QUALITY ASSURANCE - TO BE CONSIDERED FOR UNITED WAY FUNDING. THE PROGRAM OPERATING WITH UNITED WAY SUPPORT ARE MONITORED ANNUALLY ON CUSTOMER COUNT, LOW-INCOME STATUS OF CUSTOMERS, AND RESULTS - BASED ACCOUNTABILITY DATA COLLECTION AND RESULTS REPORTING MEASUREMENTS.

PART II, LINE 1

TOTAL GRANT EXPENSES REPORTED ON SCHEDULE I, PART II IS HIGHER THAN THE TOTAL GRANT EXPENSES REPORTED ON FORM 990, PART IX, LINE 1 DUE TO TIMING OF WHEN CAMPAIGN PAYOUTS OCCUR FOR DONOR DESIGNATIONS AND WHEN THE ORGANIZATION RECOGNIZES INCOME FROM THE ANNUAL CAMPAIGN. UWGLV RAN THE 2024 ANNUAL CAMPAIGN FROM SEPTEMBER 1, 2024 THROUGH MARCH 31, 2025.

Part IV Supplemental Information

THE MONEY RAISED FROM THE ANNUAL CAMPAIGN IS RELEASED FROM RESTRICTION AT THE START OF THE NEW FISCAL YEAR ON JULY 1, 2025. AS PART OF THE CAMPAIGN, DONORS ARE ABLE TO DESIGNATE THEIR DONATIONS TO LOCAL AGENCIES OF THEIR CHOICE, AND ONCE PAYMENT IS RECEIVED FROM A DONOR, UWGLV PROCESS PAYMENTS AND SENDS THE MONEY TO THE AGENCY OF THEIR CHOICE. THIS CAN CAUSE TIMING DIFFERENCES AND A SIGNIFICANT AMOUNT OF DONOR DESIGNATIONS WERE RECEIVED AND PAID OUT AS PART OF THE 2024 CAMPAIGN DURING THE FISCAL YEAR 2024-2025, BUT WILL NOT BE REFLECTED AS GRANT EXPENSES ON THE 990 UNTIL JULY 1, 2025 WHEN THE 2024 CAMPAIGN ACTIVITY IS RELEASED FROM RESTRICTION. UWGLV ALSO RUNS "OUT OF AREA CAMPAIGNS" FOR LOCAL WORKPLACES. IF A DONOR DESIGNATES FUNDS TO A DIFFERENT AGENCY, OTHER THAN UWGLV, THE AGENCY DESIGNATION IS PAID OUT DIRECTLY AND IS NOT RECOGNIZED AS A GRANT EXPENSE. THESE AGENCY DESIGNATION PAYOUTS ARE REFLECTED IN THE GRANTS REPORTED ON SCHEDULE I, PART II.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

(Rev. December 2024)
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

Open to Public
Inspection

Name of the organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
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Part I Questions Regarding Compensation

	Yes	No
1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items. <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 (such as maid, chauffeur, chef)		
b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	
3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III. <input type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input checked="" type="checkbox"/> Form 990 of other organizations <input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a Receive a severance payment or change-of-control payment?	4a	X
b Participate in or receive payment from a supplemental nonqualified retirement plan?	4b	X
c Participate in or receive payment from an equity-based compensation arrangement?	4c	X
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a The organization?	5a	X
b Any related organization?	5b	X
If "Yes" on line 5a or 5b, describe in Part III.		
6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a The organization?	6a	X
b Any related organization?	6b	X
If "Yes" on line 6a or 6b, describe in Part III.		
7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III	7	X
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	8	X
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

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

Schedule J (Form 990) (Rev. 12-2024)

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) MARCI LESKO CHIEF EXECUTIVE OFFICER	(i)	223,267.	16,303.	0.	11,722.	24,458.	275,750.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DAVID LEWIS IMMEDIATE PAST PRESIDENT	(i)	185,011.	35,488.	0.	13,833.	14,706.	249,038.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) PAUL HURD, JR. CHIEF PHILANTHROPY OFFICER	(i)	166,215.	27,005.	0.	11,505.	18,840.	223,565.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) KARA MOHSINGER CFO AND TREASURER	(i)	152,000.	13,219.	0.	3,640.	15,956.	184,815.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) JILL PEREIRA VP, STRATEGIC PARTNERSHIPS	(i)	128,193.	11,148.	0.	8,984.	24,636.	172,961.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LAURA MCHUGH CHIEF ENGAGEMENT OFFICER	(i)	140,136.	13,175.	0.	9,993.	3,593.	166,897.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ERIN CONNELLY VP, IMPACT	(i)	114,167.	8,812.	0.	7,992.	24,344.	155,315.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

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

PART I, LINE 3:**PRESIDENT'S ANNUAL PERFORMANCE EVALUATION**

- CONDUCTED BY THE BOARD CHAIR, VICE-CHAIR
- PERFORMANCE METRICS DEVELOPED WITH PRESIDENT IN JUNE/JULY FOR THE NEXT FISCAL YEAR
- PERFORMANCE METRICS DOCUMENTED AND APPROVED BY EXECUTIVE COMMITTEE, COPY TO HR
- PERFORMANCE METRICS SHARED WITH FULL BOARD
- ANNUAL PERFORMANCE EVALUATION CONDUCTED BY BOARD CHAIR AND VICE-CHAIR AT END OF FISCAL YEAR.
- EVALUATION DOCUMENTED AND HIGHLIGHTS SHARED WITH EXECUTIVE COMMITTEE, COPY TO HR
- EXECUTIVE COMMITTEE VOTES ON ANNUAL SALARY ADJUSTMENT
- HIGHLIGHTS OF EVALUATION SHARED WITH FULL BOARD

EXECUTIVE COMPENSATION & BENEFIT PACKAGE AND CONTRACT

- BOARD CHAIR AND VICE-CHAIR REVIEW EXECUTIVE COMPENSATION AND BENEFITS.
- CHAIR AND VICE-CHAIR WILL REVIEW CURRENT COMPENSATION & BENEFITS PACKAGE AND COMPARE WITH LIKE-SIZED UW'S AND/OR AREA NON-PROFITS.
- AN EMPLOYMENT CONTRACT WILL BE DRAFTED WITH INPUT AND REVIEW OF COUNSEL.
- EMPLOYMENT CONTRACT IS PRESENTED TO THE EXECUTIVE COMMITTEE FOR APPROVAL. EXECUTIVE COMMITTEE VOTES TO RECOMMEND CONTRACT FOR APPROVAL BY BOARD.
- BOARD REVIEWS AND VOTES TO APPROVE CONTRACT, INCLUDING AUTHORIZING UP TO A 10% VARIANCE IN TOTAL CONTRACT VALUE FOR NEGOTIATION WITH EMPLOYEE.
- BOARD CHAIR AND/OR VICE-CHAIR PRESENT CONTRACT TO PRESIDENT. PRESIDENT SHALL PRESENT CONTRACT FOR ALL OTHER EMPLOYEES.
- EMPLOYEE ADVISED TO SEEK OUTSIDE LEGAL COUNSEL FOR REVIEW OF CONTRACT.
- IF CONTRACT REVISIONS ARE NEEDED THEY ARE REVIEWED AND APPROVED BY UWGLV COUNSEL.
- CONTRACT IS SIGNED BY EMPLOYEE AND BOARD CHAIR
- COPY OF FULLY EXECUTED CONTRACT TO HR. DETAILS OF CONTRACT ARE CONFIDENTIAL AND WILL NOT BE SHARED OUTSIDE OF THE BOARD OF DIRECTORS.
- ALL EMPLOYMENT CONTRACTS SHALL FOLLOW THIS PROCESS WITH INPUT FROM THE PRESIDENT FOR ANY OF HIS/HER DIRECT REPORTS.

PART I, LINE 5:

ALL EMPLOYEES PARTICIPATE IN A VARIABLE PAY INCENTIVE PROGRAM WHICH ONE OF THE PROGRAM REQUIREMENTS IS TOTAL CAMPAIGN REVENUE RAISED.

Part III Supplemental Information

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

PART I, LINE 6:

ALL EMPLOYEES PARTICIPATE IN A VARIABLE PAY INCENTIVE PROGRAM WHICH ONE OF THE PROGRAM REQUIREMENTS IS TOTAL CAMPAIGN REVENUE RAISED.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2024

Open to Public Inspection

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

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

Department of the Treasury
Internal Revenue Service

Name of the organization **UNITED WAY OF THE GREATER LEHIGH VALLEY** Employer identification number **23-2657933**

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	44	1,512,798.	FMV AT DATE OF GIFT
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ()				
26 Other ()				
27 Other ()				
28 Other ()				

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

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

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

Schedule M (Form 990) 2024

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.

Multiple horizontal lines for supplemental information.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

UNITED WAY OF THE GREATER LEHIGH VALLEY

Employer identification number

23-2657933

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

IN SUPPORT OF OUR 2030 GOAL OF INCREASING THE PERCENTAGE OF OLDER ADULTS CONNECTED WITH RESOURCES THAT IMPROVE THEIR HEALTH AND QUALITY OF LIFE, OUR HEALTHY AGING INVESTMENTS TOTALED \$594,313 PROVIDING 9,475 OLDER ADULTS AND CAREGIVERS WITH CONNECTIONS TO RESOURCES INCLUDING GROCERY-SHOPPING SERVICES, FALL-PREVENTION PROGRAMS, TRANSPORTATION SERVICES, CHRONIC DISEASE PROGRAMS AND IN-HOME SUPPORT SERVICES.

IN SUPPORT OF OUR 2030 GOAL OF INCREASING COMMUNITY SAFETY AND STABILITY THROUGH FOOD, HOUSING AND MENTAL HEALTH, OUR COMMUNITY STABILITY INVESTMENTS TOTALED \$2,719,417, AND CONNECTED MORE THAN 109,822 PEOPLE TO ESSENTIAL SERVICES THROUGH HOUSING SUPPORTS; THE PA211 HEALTH AND HUMAN SERVICES HELPLINE; FOOD ACCESS PROGRAMS SUCH AS PANTRIES, MEAL CENTERS AND SUMMER MEAL DISTRIBUTIONS; RESIDENTIAL LEADERSHIP PROGRAMS, AND CRISIS AND DISASTER RESPONSE.

AGENCY DESIGNATIONS ACHIEVEMENTS: UNITED WAY OF THE GREATER LEHIGH VALLEY HONORS DONOR REQUESTS TO DESIGNATE THEIR CONTRIBUTIONS TO ANY 501(C)(3) AGENCY WITH HEALTH AND HUMAN SERVICE PROGRAMS. UNITED WAYS AROUND THE COUNTRY PERFORM THIS SERVICE FOR AGENCIES AS A COURTESY TO DONORS.

LEHIGH VALLEY COMMUNITY SCHOOLS: UNITED WAY OF GREATER LEHIGH VALLEY INVESTS IN COMMUNITY SCHOOLS THAT IMPROVE ACADEMIC OUTCOMES BY REMOVING BARRIERS TO LEARNING. THIS APPROACH ENSURES ACCESS TO SAFE AND STABLE LEARNING ENVIRONMENTS WHERE EVERY CHILD CAN BELONG AND EVERY CHILD CAN THRIVE. THERE ARE CURRENTLY 34 LEHIGH VALLEY COMMUNITY SCHOOLS SERVING APPROXIMATELY 20,000 KIDS IN FIVE LEHIGH VALLEY SCHOOL DISTRICTS: ALLENTOWN SCHOOL DISTRICT, BANGOR AREA SCHOOL DISTRICT, BETHLEHEM AREA SCHOOL DISTRICT, EASTON AREA SCHOOL DISTRICT AND PANTHER VALLEY SCHOOL DISTRICT. UNITED WAY SERVES AS THE CONVENER AND THOUGHT LEADER IN MOBILIZING SCHOOL DISTRICT LEADERSHIP, PRINCIPALS AND STAFF WHO LEAD THE VISION AT EACH SITE, AND TEAM OF PARENTS, EDUCATORS, COMMUNITY AND BUSINESS PARTNERS. THEY INVEST IN STAFFING AND SUPPORTS THAT IMPROVE ACADEMIC PERFORMANCE IN READING AND MATH, INCREASE STUDENT ATTENDANCE AND ENGAGE MORE FAMILIES IN THEIR CHILDREN'S LEARNING.

AGE-FRIENDLY LEHIGH VALLEY: RECOGNIZED BY THE WORLD HEALTH ORGANIZATION AND AARP NETWORK OF AGE-FRIENDLY COMMUNITIES, AGE-FRIENDLY LEHIGH VALLEY IS A COLLECTIVE IMPACT COALITION DEDICATED TO BUILDING A COMMUNITY WHERE EVERYONE WILL HAVE THE OPPORTUNITY TO AGE SUCCESSFULLY. LED BY UNITED WAY OF THE GREATER LEHIGH VALLEY AGE-FRIENDLY LV FOCUSES ON KEY AREAS INCLUDING HEALTH SERVICES, SOCIAL PARTICIPATION AND SOCIAL INCLUSION.

OTHER PROGRAM SERVICES:

OUR UNITED WAY RESPONDS QUICKLY EMERGING NEEDS, INCLUDING IMMEDIATE DISASTER RELIEF AND CRISIS SUPPORT. OVER \$34,000 WAS RAISED TO SUPPORT 110 INDIVIDUALS DISPLACED BY MULTI-UNIT FIRES IN ALLENTOWN AND EASTON. 100% OF CONTRIBUTIONS DIRECTLY AIDED PEOPLE AFFECTED BY THE FIRES.

Name of the organization	Employer identification number
UNITED WAY OF THE GREATER LEHIGH VALLEY	23-2657933

TEENWORKS IS A UNIQUE COLLABORATION OF LOCAL TEENS, LABOR UNIONS AND MEMBERS AND UNITED WAY OF THE GREATER LEHIGH VALLEY. GUIDED BY A VOLUNTEER BOARD OF TEENS AND LABOR LEADERS, TEENWORKS HAS PROVIDED MORE THAN \$500,000 IN GRANTS TO SUPPORT 500+ COMMUNITY SERVICE PROJECTS LED BY TEENS.

RESILIENT LEHIGH VALLEY'S HANDLE WITH CARE INITIATIVE, A PROGRAM THAT ENABLES LAW ENFORCEMENT TO COMMUNICATE WITH SCHOOLS WHEN A CHILD HAS EXPERIENCED A TRAUMA, CONNECTED 796 YOUTH TO SCHOOL-BASED SUPPORT SERVICES.

THROUGH A NEW HOUSING HERO INITIATIVE, UNITED WAY INVESTED \$500,000 INTO EMERGENCY RENTAL ASSISTANCE AND SHELTER PROGRAMMING TO ADDRESS HOMELESSNESS RATES AND MEET THE GROWING NEED FOR SAFE, STABLE AND AFFORDABLE HOUSING. ALMOST 1,000 PEOPLE HAD ACCESS TO EMERGENCY SHELTER, AND ANOTHER 164 FAMILIES OR HOUSEHOLDS WERE ABLE TO AVOID EVICTION AND MAINTAIN STABLE HOUSING WITH FUNDING AVAILABLE THROUGH THE RENTAL ASSISTANCE PROGRAM.

FORM 990, PART IV, LINE 28A

THE FOLLOWING BOARD MEMBERS HAVE RELATIONSHIPS WITH ORGANIZATIONS THAT CONDUCT BUSINESS WITH UWGLV, HOWEVER ARE UNDER THE REPORTING THRESHOLD FOR SCHEDULE L. THE RELATIONSHIPS ARE BEING NOTED AS SUPPLEMENTARY INFORMATION. THE BOARD MEMBERS ABSTAIN FROM VOTING ON BUSINESS TRANSACTIONS OR GRANTS AWARDS WHEN THEY HAVE A CONFLICT OF INTEREST.

- BOARD MEMBER DOROTA GASIENICA-KOZAK IS A PARTNER AT KING, SPRY, HERMAN, FREUND & FAUL LLC WITH WHOM THE ORGANIZATION CONDUCTS BUSINESS WITH;

- BOARD MEMBER TRISHA HIGGINS IS VP AND CFO OF THE LEHIGH VALLEY COMMUNITY FOUNDATION WITH WHOM THE ORGANIZATION PARTNERS WITH ON COMMUNITY INITIATIVES;

- BOARD MEMBER DR. DONALD OUTING IS VP FOR EQUITY AND COMMUNITY AT LEHIGH UNIVERSITY WITH WHOM THE ORGANIZATION FUNDS PROGRAMS SERVING STUDENTS IN THE BETHLEHEM AREA SCHOOL DISTRICT

- BOARD MEMBER VERONICA GONZALEZ IS THE CEO OF VALLEY HEALTH PARTNERS WITH WHOM THE ORGANIZATION FUNDS MENTAL HEALTH PROGRAMS FOR VETERANS

- BOARD MEMBER DWAYNE JONES IS THE CEO OF PREVENTIVE MEASURES, INC. WITH WHOM THE ORGANIZATION FUNDS MENTAL HEALTH PROGRAMS FOR YOUTH

- BOARD MEMBER JACK SILVA, ED.D. IS SUPERINTENDENT OF BETHLEHEM AREA SCHOOL DISTRICT WITH WHOM THE ORGANIZATION FUNDS PROGRAMS SERVING THE STUDENTS IN THIS DISTRICT

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

THE FORM 990 IS DISTRIBUTED TO ALL BOARD MEMBERS AND FEEDBACK SOLICITED PRIOR TO SUBMITTING.

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

ALL VOLUNTEERS AND EMPLOYEES ARE ASKED TO SIGN A CONFLICT OF INTEREST DISCLOSURE FORM. QUESTIONS ABOUT POTENTIAL CONFLICTS OF INTEREST ARE DIRECTED TO THE CHIEF VOLUNTEER OFFICER OR DESIGNEE BY VOLUNTEERS AND TO THE PRESIDENT BY STAFF. THE CHIEF VOLUNTEER OFFICER IS RESPONSIBLE FOR MONITORING POLICY COMPLIANCE AMONG VOLUNTEERS AND FOR TAKING CORRECTIVE ACTION CONCERNING VIOLATION. THE PRESIDENT IS RESPONSIBLE IN A SIMILAR MANNER FOR STAFF.

Name of the organization UNITED WAY OF THE GREATER LEHIGH VALLEY	Employer identification number 23-2657933
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FORM 990, PART VI, SECTION B, LINE 15:

EXECUTIVE COMPENSATION & BENEFIT PACKAGE AND CONTRACT:

-BOARD CHAIR AND VICE-CHAIR REVIEW EXECUTIVE COMPENSATION AND BENEFITS.
 -CHAIR AND VICE-CHAIR WILL REVIEW CURRENT COMPENSATION & BENEFITS PACKAGE AND COMPARE WITH LIKE-SIZED UW'S AND/OR AREA NON-PROFITS.
 -AN EMPLOYMENT CONTRACT WILL BE DRAFTED WITH INPUT AND REVIEW OF COUNSEL.
 -EMPLOYMENT CONTRACT IS PRESENTED TO THE EXECUTIVE COMMITTEE FOR APPROVAL. EXECUTIVE COMMITTEE VOTES TO RECOMMEND CONTRACT FOR APPROVAL BY BOARD.
 -BOARD REVIEWS AND VOTES TO APPROVE CONTRACT, INCLUDING AUTHORIZING UP TO A 10% VARIANCE IN TOTAL CONTRACT VALUE FOR NEGOTIATION WITH EMPLOYEE.
 -BOARD CHAIR AND/OR VICE-CHAIR PRESENT CONTRACT TO PRESIDENT. PRESIDENT SHALL PRESENT CONTRACT FOR ALL OTHER EMPLOYEES.
 -EMPLOYEE ADVISED TO SEEK OUTSIDE LEGAL COUNSEL FOR REVIEW OF CONTRACT.
 -IF CONTRACT REVISIONS ARE NEEDED THEY ARE REVIEWED AND APPROVED BY UWGLV COUNSEL.
 -CONTRACT IS SIGNED BY EMPLOYEE AND BOARD CHAIR
 -COPY OF FULLY EXECUTED CONTRACT TO HR. DETAILS OF CONTRACT ARE CONFIDENTIAL AND WILL NOT BE SHARED OUTSIDE OF THE BOARD OF DIRECTORS.
 -ALL EMPLOYMENT CONTRACTS SHALL FOLLOW THIS PROCESS WITH INPUT FROM THE PRESIDENT FOR ANY OF HIS/HER DIRECT REPORTS.

FORM 990, PART VI, SECTION C, LINE 18:

THE ORGANIZATION MAKES ITS FORM 990 AVAILABLE TO THE PUBLIC THROUGH THE ORGANIZATION'S WEBSITE, GUIDESTAR, AND UPON REQUEST.

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

THE ANNUAL AUDIT IS POSTED ON THE ORGANIZATION'S WEBSITE. THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY AVAILABLE UPON REQUEST.

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

UNREALIZED GAIN ON BENEFICIAL INTEREST IN PERPETUAL TRUSTS	21,486.
CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS	4,460.
UNREALIZED GAIN ON INVESTMENT IN INSURANCE TRUST	11,473.
CHANGE IN DONOR DESIGNATIONS	-1,062,029.
TOTAL TO FORM 990, PART XI, LINE 9	-1,024,610.

FORM 990, PART XII, LINE 2C

THE AUDIT COMMITTEE ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT AND SELECTION OF THE INDEPENDENT ACCOUNTANT. THIS IS UNCHANGED FROM PRIOR YEARS.

OVERHEAD RATIO

THE OVERHEAD RATIO IS AS FOLLOWS:

NUMERATOR

PART IX, LINE 25, COLUMN C	2,588,640
PART IX, LINE 25, COLUMN D	2,076,022
TOTAL NUMERATOR	4,664,662

DENOMINATOR

PART VIII, LINE 12, COLUMN A	35,759,135
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OVERHEAD RATIO: 4,664,662 / 35,759,135 = 13.04%

**SCHEDULE R
(Form 990)**

(Rev. January 2025)

Department of the Treasury
Internal Revenue Service

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

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

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization **UNITED WAY OF THE GREATER LEHIGH VALLEY** Employer identification number **23-2657933**

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
UNITED WAY SERVICES, INC. - 23-3025771 1110 AMERICAN PARKWAY NE ALLENTOWN, PA 18109	SECURING RESOURCES TO DEVELOP HUMAN SERVICES INITIATIVES IN LEHIGH	PENNSYLVANIA	501(C)(3)	170(B)(1)(A)	N/A		X

SEE PART VII FOR CONTINUATIONS

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

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

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

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

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

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

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

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

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) UNITED WAY SERVICES, INC.	N	0.	
(2) UNITED WAY SERVICES, INC.	O	0.	
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME, ADDRESS, AND EIN OF RELATED ORGANIZATION:

UNITED WAY SERVICES, INC.

EIN: 23-3025771

1110 AMERICAN PARKWAY NE

ALLENTOWN, PA 18109

PRIMARY ACTIVITY: SECURING RESOURCES TO DEVELOP HUMAN SERVICES INITIATIVES
IN LEHIGH VALLEY

DIRECT CONTROLLING ENTITY: N/A

**Application for Extension of Time To File an Exempt Organization
Return or Excise Taxes Related to Employee Benefit Plans**

Department of the Treasury
Internal Revenue Service

File a separate application for each return.
Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request up to a 6-month extension of time to file any of the forms listed below except for Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts. An extension request for Form 8870 must be sent to the IRS in a paper format (see instructions). For more details on the electronic filing of Form 8868, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Part I - Identification

Type or Print	Name of exempt organization, employer, or other filer, see instructions. UNITED WAY OF THE GREATER LEHIGH VALLEY	Taxpayer identification number (TIN) 23-2657933
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1110 AMERICAN PARKWAY NE, F-120	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. ALLENTOWN, PA 18109	

Enter the Return Code for the return that this application is for (file a separate application for each return) 01

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 4720 (other than individual)	09
Form 4720 (individual)	03	Form 5227	10
Form 990-PF	04	Form 6069	11
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 8870	12
Form 990-T (trust other than above)	06	Form 5330 (individual)	13
Form 990-T (corporation)	07	Form 5330 (other than individual)	14
Form 1041-A	08	Form 990-T (governmental entities)	15

• After you enter your Return Code, complete either Part II or Part III. Part III, including signature, is applicable only for an extension of time to file Form 5330.

• If this application is for an extension of time to file Form 5330, you must enter the following information.

Plan Name _____
 Plan Number _____
 Plan Year Ending (MM/DD/YYYY) _____

Part II - Automatic Extension of Time To File for Exempt Organizations (see instructions)

The books are in the care of **THE ORGANIZATION**
1110 AMERICAN PARKWAY NE, F-120 - ALLENTOWN, PA 18109

Telephone No. **610-807-5732** Fax No. _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four-digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **MAY 15**, 20 **26**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

calendar year 20 _____ or

tax year beginning **JUL 1**, 20 **24**, and ending **JUN 30**, 20 **25**

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Mail to:

Pennsylvania Department of State
Bureau of Corporations and Charitable Organizations
401 North St Rm 207
Harrisburg, PA 17120

See www.dos.pa.gov/charities for more information

Charitable Organization Registration Statement

BCO-10 (rev. 11/2023)

Fee: See instructions

Certificate number: 09001
(N/A if initial registration)

Fiscal year ended: 06/30/2025
MM DD YYYY

FEIN: 23-2657933

If this is a voluntary registration, check and complete the applicable box(es). For a registration to be voluntary, at least one of the following must apply:

Organization is exempt from registration because

Organization does not solicit contributions in Pennsylvania

1. Legal name of organization: UNITED WAY OF THE GREATER LEHIGH VALLEY

Check if name change and give previous name _____

2. All other names used to solicit contributions: _____

N/A

3. Contact person: KARA MOHSINGER Contact's e-mail: KARAM@UNITEDWAYGLV.ORG

4. Principal address of organization: _____ Mailing address (if different than principal address): _____

1110 AMERICAN PARKWAY NE, NO.

F-120

ALLENTOWN

PA 18109

County: LEHIGH

800 number: _____

Phone number: 610-807-5755

Fax number: 610-867-7255

Email (if different than Contact's email): _____

Website: WWW.UNITEDWAYGLV.ORG

Item 5 to be completed by initial registrants only

5. Type of organization (e.g. non-profit corporation, unincorporated association, etc.):
NON-PROFIT CORPORATION

Where established: PENNSYLVANIA

Date established:* 05/14/1991

*Initial registrants must submit copies of organizational documents such as charter, articles of incorporation, constitution or other organizational instrument and by-laws.

UNITED WAY OF THE GREATER LEHIGH VALLEY

6. Name and addresses of all offices, chapters, branches, auxiliaries, affiliates or other subordinate units located in Pennsylvania, which share in the contributions or other revenue raised in the Commonwealth: (Attach a separate sheet if necessary)

Not Applicable

N/A

7. Short form registration applicability - Specified types of charitable organizations described in §162.7(a) of the Act may file a short form registration, which permits the organization to register without filing a financial report. Check the section that describes the organization. If the organization does not meet any of the criteria below for short form registration, check "Not Applicable":

§162.7(a)(1) - Persons or organizations which solicit contributions for the relief of a specific individual, when all of the contributions collected are turned over to the named beneficiary for his/her use without any deductions and provided that all contributions collected shall be held in trust

§162.7(a)(2) - Organizations which only solicit within the membership of the organization by other members of the organization. The term "membership" shall not include those persons who are granted a membership solely upon making a contribution as the result of solicitation. "Member" means a person having membership in a nonprofit corporation, or other organization, in accordance with the provisions of its articles of incorporation, bylaws or other instruments creating its form and organization and having bona fide rights and privileges in the organization such as the right to vote, to elect officers and directors, to hold office or position as ordinarily conferred on members of such organizations.

§162.7(a)(3) - Organizations which receive gross contributions of no more than \$25,000 per fiscal year whose fundraising activities are carried on only by volunteers, members, officers or permanent employees and only permanent employees are compensated for those fundraising activities

§162.7(a)(4) - Veterans organizations chartered under Federal law, organizations of volunteer firemen, ambulance associations, rescue squad associations and their auxiliaries or affiliates, which are not exempt from registration, did not receive gross contributions in excess of \$100,000 and did not use a professional solicitor.

Not Applicable

Charitable organizations which check boxes §162.7(a)(1) - §162.7(a)(4) are not required to file a financial report with this registration. If "Not Applicable" is checked, the charitable organization must submit financial reports which are audited, reviewed, compiled or internally prepared. See Instructions.

Items 8 and 9 are required to be completed by initial registrants only

8. Date organization first solicited contributions from Pennsylvania residents: _____
MM DD YYYY

Other _____

9. If organization solicited Pennsylvania residents and received gross* contributions totaling more than \$25,000 in any given fiscal year, provide the date the organization first received contributions totaling more than \$25,000.

_____ MM DD YYYY

Other _____

*Includes contributions received both within and outside Pennsylvania before any deductions or expenses.

UNITED WAY OF THE GREATER LEHIGH VALLEY

10. Has the organization been granted IRS tax-exempt status? Yes No

A. If "Yes," under which IRS code section: 501(C)(3) and attach a copy of the IRS exemption letter if not previously submitted.

B. Has the organization's tax-exempt status ever been denied, revoked or modified? Yes No (If "Yes," attach a copy of the denial, revocation or modification and subsequent reinstatement, if any, and if not previously submitted.)

11. Was the organization required to file any type of IRS 990 return, including 990, 990EZ, 990PF or 990N and applicable schedules, for its most recently completed fiscal year? Yes No

(If "Yes," attach a copy of the most recently filed 990, 990EZ, 990PF or 990N and include all schedules. If "No," attach an explanation of why the organization is exempt from filing an IRS 990 return. An organization that is not required to file an IRS 990 return or an organization that files a 990N, 990EZ or 990PF, must file a Pennsylvania public disclosure form (BCO-23).)

12. Manner in which contributions are solicited (e.g. direct mail, telephone, internet, social media, etc.):

Does not solicit contributions
WORKPLACE CAMPAIGN PRESENTATIONS, DIRECT MAIL, TELEPHONE, SOCIAL MEDIA, EVENTS, INDIVIDUAL MEETINGS

13. A clear description of the specific programs for which contributions are used or will be used, and a statement describing whether such programs are planned or in existence.

TO ADVANCE THE COMMON GOOD BY FOCUSING ON INCREASING THE NUMBER OF THIRD GRADE STUDENTS READING AT GRADE LEVEL BY 50%; REDUCE THE NUMBER OF PEOPLE IN THE LEHIGH VALLEY WHO ARE FOOD INSECURE BY 50%; INCREASE THE NUMBER OF OLDER ADULTS WHO HAVE THEIR BASIC NEEDS MET AT HOME BY 50%; AND THAT LEHIGH VALLEY RESIDENTS RECEIVE SUPPORT FOR EMERGENCIES AND BASIC NEEDS.

14. Is the organization registered to solicit contributions in any other state or municipality?

Yes No (If "Yes," list all states and municipalities. Attach a separate sheet if necessary.)

15. Is any person compensated, or does the organization intend to compensate any person, who solicits contributions in Pennsylvania, including, but not limited to, employees of the organization and professional solicitors? (Do not check "Yes" if the organizations only uses or intend to only use a professional fundraising counsel.) Yes No

If "Yes," give the date the person or entity started or will start soliciting contributions from Pennsylvania residents: 05/14/1991
Month Day Year

16. Names, addresses, and telephone numbers of all professional solicitors the organization uses or intends to use to solicit contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates Pennsylvania residents were first solicited, or will be solicited: (Attach a separate sheet if necessary)

Not Applicable

SEE STATEMENT 1

UNITED WAY OF THE GREATER LEHIGH VALLEY

17. Names, addresses, and telephone numbers of all professional fundraising counsel the organizations uses or intends to use to provide services with respect to the solicitation of contributions from Pennsylvania residents. For each entry, include the beginning and ending dates of all contracts and dates services began, or will begin, with respect to soliciting contributions from Pennsylvania residents: (Attach a separate sheet if necessary)

Not Applicable

SEE STATEMENT 2

18. Names, addresses, and telephone numbers of any commercial coventurers under contract with the organization: (Attach a separate sheet if necessary)

Not Applicable

NONE

19. If the registering charity is a parent organization located in Pennsylvania, does the organization elect to file a combined registration covering all of its Pennsylvania affiliates?

(See note "Affiliate and Parent Organization") Yes No Not Applicable

If "Yes," give all names and certificate numbers of the affiliate organizations:
(Each affiliate whose parent organization files an IRS 990 group return must submit a copy of the parent organization's 990 group return and file a public disclosure form (BCO-23) for each affiliate.)

20. Is the registering charity a Pennsylvania affiliate of a parent organization, which elected to file a combined registration on the registering charity's behalf? (See note "Affiliate and Parent Organization")

Yes No Not Applicable

If "Yes," provide the name and, if available, certificate number of the parent organization.
(Each affiliate whose parent organization files an IRS 990 group return must submit a copy of the parent organization's 990 group return and file a public disclosure form (BCO-23) for each affiliate.)

Legal name of parent organization

Pennsylvania certificate number

21. Provide the names and addresses of all officers, directors, trustees and principal salaried executive staff officers. (Attach separate sheet if necessary. A reference to the 990 or the BCO-23 is not sufficient.)

SEE STATEMENT 3

UNITED WAY OF THE GREATER LEHIGH VALLEY

22. Names of the individuals or officers of the organization who: (Attach a separate sheet if necessary)

A. Are in charge of solicitation activities:

BOARD OF DIRECTORS

1110 AMERICAN PARKWAY NE F-120 ALLENTOWN, PA 18109

B. Have final responsibility for the custody of contributions:

BOARD OF DIRECTORS

1110 AMERICAN PARKWAY NE F-120 ALLENTOWN, PA 18109

C. Have final responsibility for final distribution of contributions:

BOARD OF DIRECTORS

1110 AMERICAN PARKWAY NE F-120 ALLENTOWN, PA 18109

D. Are responsible for custody of financial records:

SEE STATEMENT 4

23. Are any officers, directors, trustees, or employees related by blood, marriage, or adoption to:

A. Any other officer, director, trustee, or employee? Yes No

B. Any officer, agent, or employee of any professional fundraising counsel or solicitor under contract with organization? ** Yes No

C. Any officers, agents or employees of any supplier or vendor providing goods or services? ** Yes No

** (this includes any officer, director, trustee, or employee of the charitable organization who is also an officer, director, trustee, employee or owner of a professional fundraising counsel, professional solicitor, supplier or vendor)

If "Yes" is checked to any of the above, attach a list of related individuals including names, business, and residence addresses of related parties.

24. Has the organization or any of its present officers, directors, executive personnel or trustees ever:

A. Been found to have engaged in unlawful practices in the solicitation of contributions or administration of charitable assets or been enjoined from soliciting contributions or currently has such proceedings pending in this or any other jurisdiction? Yes No

B. Had its registration or license to solicit contributions denied, suspended, or revoked by any governmental agency? Yes No

C. Entered into any legally enforceable agreement (such as a consent agreement, an assurance of voluntary compliance or discontinuance or any similar agreement) with any district attorney, Office of Attorney General, or other local or state governmental agency? Yes No

(If "Yes" is checked in response to any of the above, attach a written explanation, including the reasons for actions, and copies of all relevant documents.)

UNITED WAY OF THE GREATER LEHIGH VALLEY

Certification - This registration statement must be signed by two different officers of the organization, one of whom shall be the chief fiscal officer or the equivalent.

I certify that the information provided in this registration, including all statements and attached documentation, is true and correct to the best of my knowledge, information and belief. I understand that the falsification of any statement or documentation made is subject to the penalties of 18 Pa.C.S. §4904 (relating to unsworn falsification to authorities) and 10 P.S. §162.17 (relating to administrative enforcement and penalties).

Signature of Chief Fiscal Officer

Date

Type or print name and title of Chief Fiscal Officer

Signature of Other Authorized Officer

Date

Type or print name and title of Other Authorized Officer

Checklist for registration:

- Completed registration statement properly signed and dated.
- A copy of the IRS 990/990EZ/990PF/990N Return and required schedules, signed and dated by an authorized officer
- Public Disclosure Form BCO-23 (if required)
- Applicable Financial Statements (audited, reviewed, compiled or internally prepared)
- Registration fee and any late filing fees
- Initial Registrants Only: IRS determination letter, articles of incorporation or charter and by-laws.

See Instructions for more information on completing this form and attachments.

FORM BCO-10

ALL PROFESSIONAL SOLICITORS

STATEMENT 1

NAME AND ADDRESS

PHONE NUMBER

NONE

CONTRACT BEGIN DATE

CONTRACT END DATE

SOLICIT DATE

FORM BCO-10

PROFESSIONAL FUNDRAISING COUNSELS

STATEMENT 2

NAME AND ADDRESS

PHONE NUMBER

NONE

CONTRACT BEGIN DATE

CONTRACT END DATE

SERVICE DATE

FORM BCO-10

OFFICERS, DIRECTORS, TRUSTEES AND EXECUTIVES

STATEMENT 3

NAME AND ADDRESS

TITLE

MARCI LESKO
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

CHIEF EXECUTIVE OFFICER

NAME AND ADDRESS

TITLE

DAVID LEWIS
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

IMMEDIATE PAST PRESIDENT

NAME AND ADDRESS

TITLE

KARA MOHSINGER
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

CFO AND TREASURER

NAME AND ADDRESS

TITLE

JOE SAVAGE
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD CHAIR

NAME AND ADDRESS

TITLE

DOROTA GASNIENICA-KOZAK, ESQ.
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

IMMEDIATE PAST BOARD CHAIR

NAME AND ADDRESS

TITLE

ANNE BAUM
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

CAROL BIRKS, EDD
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

SCOTT BLAIR
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

MIKE BUTZ
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

VICKI DOULE
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

VERONICA GONZALEZ
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

LAURIE GOSTLEY HACKETT
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

MATT GREEN
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

TRISHA HIGGINS, CPA
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

JOANE HOCKENBURY
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

JAMES IRWIN
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

DWAYNE JONES
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

ERICA MELENDEZ
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

DONALD OUTING, PHD
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

TRACY PIAZZA
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

THOMAS RIPSAM
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

PETE RUGGIERO
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

TYRONE RUSSELL
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

MELANIE SANCHEZ-JONES
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

JACK SILVA, ED.D
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

NAME AND ADDRESS

TITLE

JILL WHEELER
1110 AMERICAN PARKWAY NE, F-120
ALLENTOWN, PA 18109

BOARD MEMBER

FORM BCO-10

CUSTODY OF FINANCIAL RECORDS

STATEMENT 4

NAME AND ADDRESS

MARCI LESKO, CEO
1110 AMERICAN PARKWAY NE F-120 ALLENTOWN, PA 18109

NAME AND ADDRESS

KARA MOHSINGER, CFO, TREASURER
1110 AMERICAN PARKWAY NE F-120 ALLENTOWN, PA 18109