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

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

Form **990** (Rev. January 2020)

Department of the Treasury

OMB No. 1545-0047

		2019 calendar year, or tax year beginning OCT 1, 2019 and e	ending S	EP 30, 2020			
<u>A F</u>	or the			D Employer identific	ation number		
B C ap	heck if oplicable	E Name of organization		D Employer identific			
	Addres	UNITED WAY OF GREATER NASHUA, INC.	UNITED WAY OF GREATER NASHUA, INC.				
	]Name ]chang			**-***564	2		
	]Initial Ireturn ]Final		Room/suite	E Telephone number (603) 882	2-4011		
L	termin ated			G Gross receipts \$	2,275,796.		
[	Amen			H(a) Is this a group ret	AR (3)		
	]return ]Applic			for subordinates	processing plantacing		
L	_ tion pendir	SAME AS C ABOVE		H(b) Are all subordinates inc			
	-	empt status: X 501(c)(3) 501(c) ( )◀ (insert no.) 4947(a)(1) c	or 527	(Charlen and Charlen and Charl	ist. (see instructions)		
		te: WWW.UNITEDWAYOFNASHUA.ORG		H(c) Group exemption			
		organization: X Corporation Trust Association Other	I Year		State of legal domicile: NH		
	irt I	Summary	LIUU				
	1	Briefly describe the organization's mission or most significant activities: SUPPO	ORT OF	COMMUNITY N	ONPROFIT		
e		ORGANIZATIONS .					
& Governance		Check this box	ed of more	than 25% of its net ass	ets.		
/err				3	23		
Go		Number of independent voting members of the governing body (Fart VI, fine Ta)			23		
ø		Total number of individuals employed in calendar year 2019 (Part V, line 2a)			7		
Activities		Total number of volunteers (estimate if necessary)			920		
tivi		Total unrelated business revenue from Part VIII, column (C), line 12			6,100.		
Ac	(	Net unrelated business taxable income from Form 990-T, line 39			5,100.		
	0	Net unrelated business taxable income non rom our , inte or		Prior Year	Current Year		
	8	Contributions and grants (Part VIII, line 1h)		1,350,873.	2,009,956.		
ani		Program service revenue (Part VIII, line 2g)	1	41,795.	67,891.		
Revenue		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,674.	7,521.			
Re	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		114,843.	79,164.		
		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,515,185.	2,164,532.		
	1	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		391,939.	458,069.		
	1	Benefits paid to or for members (Part IX, column (A), line 4)	1	0.			
		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		232,891.	251,383.		
Expenses		Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
pen	b	Total fundraising expenses (Part IX, column (D), line 25)	)2.				
Щ		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		942,347.	823,053.		
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,567,177.	1,532,505.		
		Revenue less expenses. Subtract line 18 from line 12		-51,992.	632,027.		
Assets or d Balances			Be	ginning of Current Year	End of Year		
sets	20	Total assets (Part X, line 16)		1,021,428.	1,734,954.		
t As	21	Total liabilities (Part X, line 26)		403,468.	475,285.		
Net	22	Net assets or fund balances. Subtract line 21 from line 20		617,960.	1,259,669.		
	irt II	Signature Block					
		Ities of perjury, I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is		
true,	correc	t, and complete. Declaration of preparer (other than officer) is based on all information of wh	ich preparer	has any knowledge.			
		All yelle					
Sigr	ר	Signature of difficer with the		Date	1		
Her	е	DANIEL MUNROE, TREASURER		21/21	1		
Reservation of		Type or print name and title	1 г				
Daid		Print/Type preparer's name Preparer's signature	1	Date Check	PTIN		

Preparer	Firm's name 🕒 OSTER & WHEELER, PC	Firm's EIN 🕨 **-**9197
Use Only	Firm's address 💊 86 WEST STREET, PO BOX 623	
	KEENE, NH 03431	Phone no. (603) 352-4500
May the IF	RS discuss this return with the preparer shown above? (see instructions)	X Yes No
932001 01-2		Form 990 (2019)

Form	<u>990 (2019)</u> UNITED WAY OF GREATER NASHUA, INC. 02-6015642 Page 2
Pa	t III Statement of Program Service Accomplishments
-	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	TO MAKE MEASURABLE IMPROVEMENTS IN PEOPLE'S LIVES BY MOBILIZING THE
	CARING POWER OF OUR COMMUNITIES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and
	revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$290,960. including grants of \$) (Revenue \$34,979. )
	IN 2020 UNITED WAY OF GREATER NASHUA CONTINUED TO EXPAND IT'S ROLE IN
	THE COMMUNITY AS A FISCAL AGENT SPONSOR. THROUGH THIS WORK, WE ARE
	SPONSORING ORGANIZATIONS SUCH AS SINFONIETTA STRINGS, THE NASHUA
	PREVENTION COALITION, THE ONE GREATER NASHUA COALITION, GROW NASHUA AND
	MEALS MATTER. AS THEIR FISCAL SPONSOR, UNITED WAY UNBURDENS THESE
	GROUPS OF THE RESPONSIBILITY TO FORM THEIR OWN 501C3 ORGANIZATIONS,
	FILE THEIR OWN 990'S, MANAGE PAYROLL, AND ATTAIN INSURANCE. THIS GIVES
	THE GROUPS A GREATLY ENHANCED ABILITY TO DO MORE WORK IN THE COMMUNITY
	WITHOUT THE NEED FOR OVERHEAD AND ADMINISTRATIVE EXPENSES. THE UWGN
	SEES THIS TYPE OF FISCAL AGENCY WORK AS A KEY INITIATIVE TO GET MORE
	MISSION-CENTRIC WORK DONE IN THE COMMUNITY ON A COST EFFECTIVE BASIS BY LEVERAGING THE SKILLS AND CAPACITY OF UNITED WAY.
46	
4b	(Code:) (Expenses \$114,651. including grants of \$) (Revenue \$) THE NASHUA PREVENTION COALITION IS SUPPORTED BY A GRANT FROM SAMHSA
	(FROM CDC EFFECTIVE 10/1/2020) CALLED DRUG FREE COMMUNITIES. THE
	PURPOSE OF THIS COALITION IS TO PREVENT SUBSTANCE ABUSE WITH A FOCUS ON
	EDUCATION AND PREVENTION, PRIMARILY AT THE YOUTH LEVEL. UNITED WAY
	MATCHES THIS GRANT FUNDING THROUGH IN-KIND CONTRIBUTIONS, INCLUDING
	SPACE, APPORTIONED WAGES, AND VOLUNTEER HOURS. WITH THE GROWING CRISIS
	IN SUBSTANCE MISUSE DISORDERS, WE FEEL STRONGLY ABOUT THIS INVESTMENT
	IN OUR COMMUNITY, EVEN THOUGH THE TRUE VALUE ISN'T REFLECTED IN OUR
	FINANCIAL STATEMENTS.
4c	(Code:) (Expenses \$925,928. including grants of \$458,069. ) (Revenue \$42,755. )
	UNITED WAY OF GREATER NASHUA UTILIZES A UNIQUE COMMUNITY ASSESSMENT AND
	INVESTMENT CYCLE IN ORDER TO MAXIMIZE THE IMPACT OF INVESTMENTS IN THE
	COMMUNITY. THIS PROCESS INCLUDES CONDUCTING A THOROUGH ASSESSMENT OF
	THE COMMUNITY'S GREATEST NEEDS IN THE AREAS OF HEALTH, EDUCATION, AND
	ECONOMIC MOBILITY / FINANCIAL STABILITY. THROUGH THIS PROCESS, CRITICAL
	NEEDS ARE BROUGHT TO LIGHT AND THEN PRESENTED TO THE NON-PROFIT PARTNER
	COMMUNITY FOR PROGRAMMATIC GRANT PROPOSALS. THUS, THE INVESTMENTS MADE
	BY UWGN IN THE COMMUNITY ARE GUARANTEED TO RESPONSIBLY STEWARD DONOR
	DOLLARS TOWARD THE GREATEST NEEDS AND IMPACT AREAS. DURING THIS FISCAL

YEAR, FROM MARCH THROUGH THE END OF THE FY, UWGN PROVIDED SUBSTANTIAL COMMUNITY SUPPORT RELATIVE TO THE CORONAVIRUS PANDEMIC. THIS INCLUDED MAKING EMERGENCY COMMUNITY GRANTS, ACQUIRING AND DISTRIBUTING CRITICAL

4d	Other program services (Describe on Scl	nedule O.)		
	(Expenses \$ 3,544.	including grants of \$	(Revenue \$	)
4e	Total program service expenses	1,335,083.		

_		
Form	990	(2019)

Form 990 (2019) UNITED WAY OF GREATER NASHUA, INC.
Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		_X_
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		_X_
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<u> </u>
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		_X_
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d	X	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			77
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			77
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			v
40	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I</i>	17		_X_
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
~~	complete Schedule G, Part III	19		X X
20a		20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or		v	
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	

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 Form 990 (2019)
 UNITED WAY OF GREATER NASHUA, INC.

 Part IV
 Checklist of Required Schedules (continued)

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

(gambling) winnings to prize winners?

1c

Х Form 990 (2019)

Form 990 (2019)				GREATER		
Part V Statements	Regarding C	Other I	RS F	ilings and Ta	ax Complian	ce (continued)

					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	7			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns? .		2b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to $e$ -file (see instructions	s)				
3a				3a	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoui	nt)?	4a		X
b	If "Yes," enter the name of the foreign country					
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac			_		v
5a				5a		X X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction for a second state of the second s			5b		
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			<u>5c</u>		
08	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the any contributions that were not tax deductible as charitable contributions?			60		x
h	any contributions that were not tax deductible as charitable contributions?			6a		- 23
U				6b		
7	were not tax deductible? Organizations that may receive deductible contributions under section 170(c).			00		
' a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices i	provided to the payor?	7a		x
b				7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it wa					
	to file Form 8282?			7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	t?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion fi	le a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	e			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b				9b		
10	Section 501(c)(7) organizations. Enter:		1			
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	11a	1			
a ⊾		11a				
a	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b				
12a	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		2	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041		-2a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12.5	I			
				13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the					
	organization is licensed to issue qualified health plans	13b				
с	Enter the amount of reserves on hand	13c				
				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul	le O		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner		or			
	excess parachute payment(s) during the year?			15		X
	If "Yes," see instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	inco	me?	16		X
	If "Yes," complete Form 4720, Schedule O.					

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Form	990	(2019)

UNITED WAY OF GREATER NASHUA, INC.

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
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 23			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b	Enter the number of voting members included on line 1a, above, who are independent 1b 23			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
	officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		x
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a		x
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		x
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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	9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b	Х	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		Х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed $\blacktriangleright \mathrm{NH}$			
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)	availa	ble
	for public inspection. Indicate how you made these available. Check all that apply.			
	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	financ	ial	
	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			
	KARA FONTAINE - 603-627-3838			
	43 CONSTITUTION DRIVE, SUITE 100, BEDFORD, NH 03110			

Form 990 (2019)	UNITED WAY OF GREATER NASHUA, INC.	02-6015642 Page 7							
Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated									
Employee	es, and Independent Contractors								
Check if Sche	hedule O contains a response or note to any line in this Part VII								
Section A. Officers, Di	Directors, Trustees, Key Employees, and Highest Compensated Employees								
1a Complete this table for	for all persons required to be listed. Report compensation for the calendar year endin	g with or within the organization's tax year.							
<ul> <li>List all of the organi</li> </ul>	nization's current officers, directors, trustees (whether individuals or organizations), r	egardless of amount of compensation.							
Enter -0- in columns (D), (I	(E), and (F) if no compensation was paid.								
<ul> <li>List all of the organi</li> </ul>	nization's current key employees, if any. See instructions for definition of "key emplo	yee."							
Ũ	on's five <b>current</b> highest compensated employees (other than an officer, director, trust < 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the or	· · · · · ·							

• 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 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)	(B)	(C)		(D)	(E)	(F)				
Name and title	Average	Position (do not check more than one		Reportable	Reportable	Estimated				
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week			uau	reciu	i/irus	lee)	from	from related	other
	(list any hours for	Individual trustee or director				_		the organization	organizations (W-2/1099-MISC)	compensation from the
	related	e or o	stee			nsated		(W-2/1099-MISC)	(112/1000 11100)	organization
	organizations	truste	al tru		yee	in pe		(		and related
	below	/idual	Institutional trustee	er	emplo	Highest compensated employee	ner			organizations
	line)	Indiv	Insti	Officer	Key	High emp	Former			
(1) DR. AMIR TOOSI	2.00									
AT LARGE EXECUTIVE		Х						0.	0.	0.
(2) BERNARD ROUSSEAU	5.00									
SECRETARY/RD COMMITTEE CO-CHAIR		Х		Х				0.	0.	0.
(3) DANIEL MUNROE	5.00									
TREASURER		Х		Х				0.	0.	0.
(4) DEB HOWES	2.00									
DIRECTOR		Х						0.	0.	0.
(5) GALINA SZAKACS	5.00									
COMMUNITY ASSESSMENT CHAIR		Х		Х				0.	0.	0.
(6) HEATHER TEBBETTS	2.00									
DIRECTOR		Х						0.	0.	0.
(7) JAY DINKEL, JR	5.00									
COMMUNITY INVESTMENT CHAIR		Х		Х				0.	0.	0.
(8) JIM DONCHESS	2.00									
DIRECTOR		Х						0.	0.	0.
(9) LUCILLE JORDAN	2.00									
DIRECTOR		Х						0.	0.	0.
(10) PETER CHALONER	5.00									
FINANCE COMMITTEE CHAIR		Х		Х				0.	0.	0.
(11) ROBERT MACK	5.00									
BOARD CHAIR		Х		Х				0.	0.	0.
(12) ROBERT S. LARMOUTH	2.00									
AT LARGE EXECUTIVE		Х						0.	0.	0.
(13) ROLF GOODWIN	2.00									
AT LARGE EXECUTIVE		Х						0.	0.	0.
(14) MICHAEL REID	5.00									
COMMUNITY ADVISORY COUNCIL CHAIR		Х		Х				0.	0.	0.
(15) REV. DR. ANDREW ARMSTRONG	2.00									
DIRECTOR		Х						0.	0.	0.
(16) PAULA MORAN	5.00									
RD COMMITTEE CO-CHAIR		Х		Х				0.	0.	0.
(17) JAY MINKARAH	2.00									
DIRECTOR		Х						0.	0.	0.

932007 01-20-20

Form 990 (2019) UNITED WA	AY OF GF	REA	TE	R	NA	SH	UA	A, INC.	02-60	)15(	542	Pa	age <b>8</b>
Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)				
(A) (B) Name and title Avera		(C) Position				<b>(D)</b> Reportable	<b>(E)</b> Reportable			(F) imate	d		
Name and the	hours per	(do not						compensation	compensatio	n		ount c	
	week		officer and a director/t					from	from related			other	
	(list any	ector						the	organizations		comp	ensat	tion
	hours for related	or dir	ee			ated		organization	(W-2/1099-MIS	(C)		m the	
	organizations	rustee	trust		ee	u pens		(W-2/1099-MISC)			•	nizatio relate	
	below	Individual trustee or director	nstitutional trustee	-	ƙey employee	st cor	er					nizatio	
	line)	Indivi	Instit	Officer	Key ei	Highest compensated employee	Former				0		
(18) MOHAMMAD MUSTAK ARIF	2.00												
DIRECTOR		х						0.		0.			0.
(19) DOUG HOWARD, M. ED.	2.00												0
DIRECTOR	2 00	Х						0.		0.			0.
(20) JOHN JURCZYK, FACHE DIRECTOR	2.00	x						0.		0.			0.
(21) JOSEPH LEAHY	2.00	^						0.		<u> </u>			0.
DIRECTOR	2.00	x						0.		0.			0.
(22) LEUSON VELOZ	2.00												
DIRECTOR		x						0.		0.			Ο.
(23) KAYLEE ENO	2.00												
DIRECTOR		Х						0.		0.			0.
(24) MICHAEL APFELBERG	37.50							100 010					~
PRESIDENT				Х				100,212.		0.			0.
		-											
		1											
1b Subtotal								100,212.		0.			0.
c Total from continuation sheets to Part VI	, Section A							0.		0.			0.
d Total (add lines 1b and 1c)								100,212.		0.			0.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100	000 of reportable				
compensation from the organization													<u>1</u>
										1		Yes	No
<b>3</b> Did the organization list any <b>former</b> officer,				•			Ŭ				•		х
<ul><li>line 1a? If "Yes," complete Schedule J for s</li><li>For any individual listed on line 1a, is the su</li></ul>										····	3		<u></u>
and related organizations greater than \$150											4		Х
<ul><li>5 Did any person listed on line 1a receive or a</li></ul>													
rendered to the organization? If "Yes." com											5		Х
Section B. Independent Contractors	-												
1 Complete this table for your five highest co										ensat	ion fror	n	
the organization. Report compensation for	he calendar ye	ear e	endin	ig w	ith c	or wi	thin		ear.		(		
(A) Name and business	address	NC	ONE	7				(B) Description of s	services	С	(C) ompen:		า
		140		_									
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	to t	thos	se lis	ted	above) who received m	ore than				
\$100,000 of compensation from the organiz	ation 🕨				0	)							

\$100,000 of compensation from the organization

	<u>1 990</u>					OF	GREATER	NASHUA,	IN	Ċ.	02-6015	642 Page 9
Pa	rt VI		Statement of Re	ven	ue							
			Check if Schedule O	conta	ains a respon	ise d	or note to any lin				(2)	
								(A)		(B) Related or exempt	<b>(C)</b> Unrelated	<b>(D)</b> Revenue excluded
								Total revenue		•	business revenue	from tax under
												sections 512 - 514
ts	1 a	а	Federated campaigns		1a							
Contributions, Gifts, Grants and Other Similar Amounts	I		Membership dues					1				
D B			Fundraising events									
fts,			Related organizations									
ila ila							571,492.					
ns, Sim	•		Government grants (contr		· · · – –		J/1,492.	-				
er (	1		All other contributions, gifts,			1	120 161					
ibu			similar amounts not included	abov		<b>⊥</b> ,	438,464.	-				
d C	9	g	Noncash contributions included in	lines 1	a-1f <b>1g</b> \$							
an	ł	h	Total. Add lines 1a-1f				🕨	2,009,956				
							<b>Business Code</b>					
e	2 8	а	FISCAL AGENCI	ES	PROGRA	ł	900099	34,979	).	34,979.		
vic	-		COVID PROGRAM			_	900099	32,912		32,912.		
Ser		c				_						
/en	, i					-			-			
Program Service Revenue		d				_			-			
roç	•	е				_			_			
۵.			All other program service					67.004	-			
	9		Total. Add lines 2a-2f					67,891	•			
	3		Investment income (includ	ding	dividends, int	tere	st, and					
			other similar amounts)				►	7,521	. •			7,521.
	4		Income from investment of									
	5		Royalties									
			,		(i) Real		(ii) Personal					
	6 8	~	Gross rents	6a		<u>n.</u>						
								-				
			Less: rental expenses	6b				-				
			Rental income or (loss)	6c	12,420	• •		10 400			C 100	6 226
			Net rental income or (loss)	)				12,426	••		6,100.	6,326.
	7 a	а	Gross amount from sales of		(i) Securitie	es	(ii) Other					
			assets other than inventory	7a								
	ŀ	b	Less: cost or other basis									
е			and sales expenses	7b								
enue			Gain or (loss)	7c				]				
Rev			Net gain or (loss)	-								
erF			Gross income from fundraisi									
Other	0.		including \$									
0												
			contributions reported on				117 725					
			Part IV, line 18				117,735.	-				
			Less: direct expenses		•		60,840.		_			
			Net income or (loss) from		r	S	<u></u>	56,895	••			56,895.
	9 a	а	Gross income from gamin	g ac	tivities. See							
			Part IV, line 19			9a						
	ł		Less: direct expenses			9b						
			Net income or (loss) from				►					
			Gross sales of inventory, I	•	) Č							
						10-						
			and allowances			<u>10a</u> 10b						
			Less: cost of goods sold						-			
	(	C	Net income or (loss) from	sales	s of inventory	·						
<u>s</u>							Business Code	0.042	-	0.042		
∋ou	11 a	а	OTHER INCOME			_	900099	9,843	••	9,843.		
ane	ŀ	b				_			$\square$			
Miscellaneous Revenue		С				_						
1isc B		d	All other revenue									
2			Total. Add lines 11a-11d					9,843				
	12		Total revenue. See instruction	ons				2,164,532		77,734.	6,100.	70,742.

#### UNITED WAY OF GREATER NASHUA, INC. Form 990 (2019) Part IX Statement of Functional Expenses

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Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A). ling in this Part IV

0000	ion 501(c)(3) and 501(c)(4) organizations must comp Check if Schedule O contains a respons		-		
Do	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	<b>(D)</b> Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations	450.000	450.000		
	and domestic governments. See Part IV, line 21	458,069.	458,069.		
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				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	00.040		10 700	10 70
_	trustees, and key employees	98,842.	59,305.	19,768.	19,769.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	110 110	70.000	10.000	0.0.0.71
7	Other salaries and wages	117,119.	78,209.	12,839.	26,071.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	1 7 4 4 4	10 400	2 400	2 400
9	Other employee benefits	17,444.	10,466.	3,489.	<u>3,489</u> . 3,595.
10	Payroll taxes	17,978.	10,787.	3,596.	3,595.
11	Fees for services (nonemployees):				
	Management				
	Legal	10 050	F 10F	2 075	2 0 5 0
	Accounting	10,250.	5,125.	3,075.	2,050.
	Lobbying				
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,	104 560	E 4 770	27 000	21 000
	column (A) amount, list line 11g expenses on Sch 0.)	104,569.	54,772. 519.	27,888.	<u>21,909</u> . 1,039.
12	Advertising and promotion	2,077.	519.	519.	1,039.
13	Office expenses				
14	Information technology				
15	Royalties	12,085.	6 467	1 726	2 002
16		27.	6,467. 7.	1,736.	<u>3,882</u> 13.
17	Travel	۷/۰	/•	<i>I</i> •	13.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	1 465	266	366.	722
19	Conferences, conventions, and meetings	1,465.	366. 2,383.		733.
20	Interest	<u>4,837.</u> 18,629.		1,025.	1,429.
21	Payments to affiliates	10,339.	<u>14,903.</u> 7,129.	155.	<u>932</u> . 3,055.
22	Depreciation, depletion, and amortization	9,001.	3,150.	4,501.	
23		9,001.	5,150.	4,301.	1,350.
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 0.)	290,960.	290,960.		
a	FISCAL AGENCIES DRUG FREE COMMUNITIES E	114,651.	114,651.		
b			113,014.		
C J	COVID EXPENSES AND GRAN DESIGNATIONS FOR OTHER	113,014.	79,801.		
d		79,801. 51,348.	25,000.	12 162	12 224
-	All other expenses		1,335,083.	<u>12,462.</u> 94,220.	13,886.
<u>25</u>	Total functional expenses. Add lines 1 through 24e	1,532,505.	т, 555,065.	74,440.	103,202.
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 if following SOP 98-2 (ASC 958-720)				<b>– 000</b> (aada

UNITED	WAY	OF	GREATER	NASHUA
-				

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		Check if Schedule O contains a response or no	te to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			85,282.	1	511,116.
	2	Savings and temporary cash investments		265,932.	2	537,791.	
	3	Pledges and grants receivable, net			92,908.	3	56,427.
	4	Accounts receivable, net			4,850.	4	40,233.
	5	Loans and other receivables from any current of					
		trustee, key employee, creator or founder, subs					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqual					
		under section 4958(f)(1)), and persons describe				6	
s	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9				17,261.	9	44,703.
	10a	Land, buildings, and equipment: cost or other		Γ			
		basis. Complete Part VI of Schedule D	10a	803,188.			
	b	Less: accumulated depreciation			367,507.	10c	352,671.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		187,688.	15	192,013.	
	16	Total assets. Add lines 1 through 15 (must equ			1,021,428.	16	1,734,954.
	17	Accounts payable and accrued expenses		57,697.	17	81,121.	
	18	Grants payable			41,971.	18	29,107.
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
s	22	Loans and other payables to any current or forr					
Liabilities		trustee, key employee, creator or founder, subs	tantial c	ontributor, or 35%			
lide		controlled entity or family member of any of the	se perso	ons		22	
Ë	23	Secured mortgages and notes payable to unrel	ated thi	d parties	197,901.	23	193,266.
	24	Unsecured notes and loans payable to unrelate	d third p	parties		24	
	25	Other liabilities (including federal income tax, pa	ayables	to related third			
		parties, and other liabilities not included on line	s 17-24)	. Complete Part X			
		of Schedule D			105,899.	25	171,791.
	26	Total liabilities. Add lines 17 through 25			403,468.	26	475,285.
		Organizations that follow FASB ASC 958, cho	eck her	e ▶ 🔀			
Ses		and complete lines 27, 28, 32, and 33.					
and	27	Net assets without donor restrictions			168,546.	27	615,635.
Bal	28	Net assets with donor restrictions			449,414.	28	644,034.
pu		Organizations that do not follow FASB ASC 9	958, che	eck here 🕨 🗌			
Ľ.		and complete lines 29 through 33.					
s or	29	Capital stock or trust principal, or current funds				29	
set	30	Paid-in or capital surplus, or land, building, or e	quipmer	nt fund		30	
As	31	Retained earnings, endowment, accumulated ir				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			617,960.	32	1,259,669.
_	33	Total liabilities and net assets/fund balances			1,021,428.	33	1,734,954.

Form **990** (2019)

Form 990 (2019)
Part X Balance Sheet

Part XI       Reconciliation of Net Assets         Check If Schedule O contains a response or note to any line in this Part XI       1         1       Total revenue (must equal Part VIII, column (A), line 12)       1         2       Total expenses (must equal Part X, column (A), line 25)       2         2       Total expenses (must equal Part X, column (A), line 25)       2         2       Total expenses (must equal Part X, column (A), line 25)       2         3       G32, 027.         4       Hatasets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4         5       5, 622.         0       Donated services and use of facilities       6         7       Investment expenses       7         8       0       Other changes in net assets or fund balances (explain on Schedule 0)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       1       1, 259, 669.         Part XII       Financial Statements and Reporting       1       1, 259, 669.         Check if Schedule O contains a response or note to any line in this Part XII       1       2a         1       Accounting method used to prepare the Form 990:       Cash       Acrual       Other         1		990 (2019) UNITED WAY OF GREATER NASHUA, INC.	02-60	15642	Pag	<sub>ge</sub> 12
1       Total revenue (must equal Part VII, column (A), line 12)       1       2,164,532.         2       Total expenses (must equal Part IX, column (A), line 25)       2       1,532,505.         3       Revenue less expenses. Subtract line 2 from line 1       3       632,027.         4       Met assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       617,960.         5       5.622.       5       5.622.       6       4,060.         7       6       4,060.       7       7         8       9       0.       9       0.         9       0.ter changes in net assets or fund balances (explain on Schedule 0)       9       0.         10       Net assets or fund balances (explain on Schedule 0)       9       0.         10       Net assets or fund balances (explain on Schedule 0)       9       0.         10       Net assets or fund balances (explain on Schedule 0)       9       0.         11       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         11       H the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule 0.       2a       X         12       Vere the organization changed its method of accountins for the year were compiled	Pa	rt XI Reconciliation of Net Assets				
2       Total expenses (must equal Part IX, column (A), line 25)       2       1,532,505.         3       Revenue less expenses. Subtract line 2 from line 1       3       632,027.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       617,960.         5       Net unrealized gains (losses) on investments       5       5,622.       6         6       Donated services and use of facilities       7       6         7       Investment expenses       7       7         8       Prior period adjustments       8       9       0.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       1, 259, 669.          Check if Schedule 0 contains a response or note to any line in this Part XI       1       2a       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis       Both consolidated and separate basis, consolidated basis       Both consolidated and separate basis <th></th> <th>Check if Schedule O contains a response or note to any line in this Part XI</th> <th></th> <th></th> <th></th> <th></th>		Check if Schedule O contains a response or note to any line in this Part XI				
2       Total expenses (must equal Part IX, column (A), line 25)       2       1,532,505.         3       Revenue less expenses. Subtract line 2 from line 1       3       632,027.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       617,960.         5       Net unrealized gains (losses) on investments       5       5,622.       6         6       Donated services and use of facilities       7       6         7       Investment expenses       7       7         8       Prior period adjustments       8       9       0.         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       1, 259, 669.          Check if Schedule 0 contains a response or note to any line in this Part XI       1       2a       X         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis       Both consolidated and separate basis, consolidated basis       Both consolidated and separate basis <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>						
3       Revenue less expenses. Subtract line 2 from line 1       3       632,027.         4       Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))       4       6117,960.         5       5,622.       6       4,060.       7         7       8       7       8       7         8       9       9       0.       9       0.         10       Net assets or fund balances (explain on Schedule O)       9       0.       1       ,259,669.         Part XIII       Financial Statements and Reporting       7       1       1,259,669.       1,259,669.         Part XIII       Financial Statements and Reporting       9       0.       1       ,259,669.         Check if Schedule O contains a response or note to any line in this Part XII       9       0.       1       ,259,669.         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other       1         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis.       Consolidated basis       Both consolidated and separate basis       <	1	Total revenue (must equal Part VIII, column (A), line 12)	1			
4       617,960.         5       Net unrealized gains (losses) on investments       5         6       0onated services and use of facilities       6         7       4       617,960.         8       9       0.         9       0.       6         9       0.       9         10       Net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances (explain on Schedule O)       9         10       Net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances (explain on Schedule O)       9       0.         10       1, 259, 669.       10       1, 259, 669.         Part XII       Financial Statements and Reporting       Yes       No         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         16       Yes       No       Yes       No	2	Total expenses (must equal Part IX, column (A), line 25)	2			
5       Net unrealized gains (losses) on investments       5       5, 622.         6       0onated services and use of facilities       7         7       Investment expenses       7         8       Prior period adjustments       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       1, 259, 669.         Part XII       Financial Statements and Reporting       10       1, 259, 669.         Check if Schedule O contains a response or note to any line in this Part XII       1       Yes         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         1       Accounting method used to prepare the Form 990:       Cash       X hccrual       Other       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       X       X       X       X       X       X       X       X       X       X       X       X       X	3	Revenue less expenses. Subtract line 2 from line 1	3			
6       Donated services and use of facilities       6       4,060.         7       Investment expenses       7         8       Prior period adjustments       8       9         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B)       10       1,259,669.         Part XIII       Financial Statements and Reporting       10       1,259,669.         Check if Schedule O contains a response or note to any line in this Part XII       10       1,259,669.         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         If the organization sinancial statements compiled or reviewed by an independent accountant?       Yes       No         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       Separate basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," the ine 2a or 2b, does the organiz	4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			
7       Investment expenses       7         8       Prior period adjustments       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (E))       10       1, 259, 669.         Part XII       Financial Statements and Reporting       10       1, 259, 669.         Check if Schedule O contains a response or note to any line in this Part XII       10       1, 259, 669.         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis. consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis.       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis.       2b       X         If "Yes," to line 2a or 2b,	5	Net unrealized gains (losses) on investments	5		<u> </u>	
8       Prior period adjustments       8         9       Other changes in net assets or fund balances (explain on Schedule O)       9       0.         10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       10       1, 259, 669.         Part XII       Financial Statements and Reporting       10       1, 259, 669.         Check if Schedule O contains a response or note to any line in this Part XII       1       1         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         If the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         b       Were the organization's financial statements audited by an independent accountant?       2b       X       I         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:       2b       X       I         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c <th>6</th> <th>Donated services and use of facilities</th> <th>6</th> <th>4</th> <th>1,0</th> <th><u>50.</u></th>	6	Donated services and use of facilities	6	4	1,0	<u>50.</u>
9 Other changes in net assets or fund balances (explain on Schedule O) 9 0.   10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (E)) 10 1, 259, 669.   Part XII Financial Statements and Reporting 1 1, 259, 669.   Check if Schedule O contains a response or note to any line in this Part XII Image: Consolidated basis or both: Image: Consolidated basis or both:   1 Accounting method used to prepare the Form 990: Cash X Accrual Other," explain in Schedule O.   2a X Image: Consolidated basis, or both: Image: Consolidated basis, or both: Image: Consolidated basis, or both:   2 Separate basis Consolidated basis Both consolidated and separate basis, consolidated basis, or both: Image: Consolidated basis   3 Separate basis Consolidated basis Both consolidated and separate basis, or both: Image: Consolidated basis   4 Image: Consolidated basis Consolidated basis Both consolidated and separate basis, or both:   3 Separate basis Consolidated basis Both consolidated and separate basis, or both:   3 Separate basis Consolidated basis Both consolidated and separate basis, or both:   4 Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, or both:   5 Separate basis Consolidated basis   6 If "Yes," to line 2 or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, o	7	Investment expenses	7			
10       Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))       1, 259, 669.         Part XII       Financial Statements and Reporting	8	Prior period adjustments	8			
column (B)       10       1,259,669.         Part XII       Financial Statements and Reporting       Image: Check if Schedule O contains a response or note to any line in this Part XII       Image: Check if Schedule O contains a response or note to any line in this Part XII         1       Accounting method used to prepare the Form 990:       Cash       X Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis.       Consolidated basis       Both consolidated and separate basis         b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis       2b       X         b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If	9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.
Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII       Image: Check if Schedule O contains a response or note to any line in this Part XII         1       Accounting method used to prepare the Form 990:       Cash X Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       3a       As a result of a federal award, was the organization required to unde	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
Part XII       Financial Statements and Reporting         Check if Schedule O contains a response or note to any line in this Part XII       Image: Check if Schedule O contains a response or note to any line in this Part XII         1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other         If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         2a       X       Image: X       Image: X       Image: X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2c       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audi		column (B))	10	1,259	9,6	<u>59.</u>
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other	Pa	rt XII Financial Statements and Reporting				
1       Accounting method used to prepare the Form 990:       Cash       X       Accrual       Other		Check if Schedule O contains a response or note to any line in this Part XII				
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2a       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       3a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit       3a       X <tr< th=""><th></th><th></th><th></th><th></th><th>Yes</th><th>No</th></tr<>					Yes	No
2a       Were the organization's financial statements compiled or reviewed by an independent accountant?       2a       X         If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:       2b       X         Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       2b       X         If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       3a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit       3a       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	1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
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:       Image: Consolidated basis		If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	О.			
separate basis, consolidated basis, or both:       Separate basis       Consolidated basis       Both consolidated and separate basis         b       Were the organization's financial statements audited by an independent accountant?       2b       X         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:       2b       X         X       Separate basis       Consolidated basis       Both consolidated and separate basis       2b       X         c       If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       X       X       X         X       Separate basis       Consolidated basis       Both consolidated and separate basis       X       X         If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       X       X         3a       X       X       X       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 audit	2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		<b>2</b> a		<u> </u>
<ul> <li>Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>Were the organization's financial statements audited by an independent accountant?</li> <li>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:</li> <li>X Separate basis</li> <li>Consolidated basis</li> <li>Both consolidated and separate basis</li> <li>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?</li> <li>If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.</li> <li>As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</li> <li>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</li> </ul>		If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a			
b       Were the organization's financial statements audited by an independent accountant?       2b       X         If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:       Image: Consolidated basis       I		separate basis, consolidated basis, or both:				
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:       Image: Consolidated basis       Image:		Separate basis Consolidated basis Both consolidated and separate basis				
consolidated basis, or both:   X   Separate basis   Consolidated basis   Both consolidated and separate basis   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.   3a   As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?   b   If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	b	Were the organization's financial statements audited by an independent accountant?		<b>2</b> b	X	
X       Separate basis       Consolidated basis       Both consolidated and separate basis       Image: Consolidated basis       Image: Consolidated basis       Consolidated basis       Consolidated and separate basis       Consolidated basis<		If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,			
c       If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?       2c       X         If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.       2c       X         3a       As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?       3a       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       3b						
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.       Image: Comparison of the second s		X Separate basis Consolidated basis Both consolidated and separate basis				
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit       3a       X         Act and OMB Circular A-133?       3a       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       3b		review, or compilation of its financial statements and selection of an independent accountant?		<b>2</b> c	X	
Act and OMB Circular A-133?       3a       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       3b						
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       3b	3a		gle Audit			
or audits, explain why on Schedule O and describe any steps taken to undergo such audits				. <b>3</b> a		<u> </u>
	b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi	red audit			
		or audits, explain why on Schedule O and describe any steps taken to undergo such audits				L

Form **990** (2019)

SCHEDULE A
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(Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047
2019
Open to Public Inspection

Department o Internal Reve	of the Treasury enue Service			Attach to Form 990 or F //Form990 for instructio			formation		Inspection		
Name of	the organizati					e latest li		Employer	identification numbe		
	the organizati			GREATER NASHU	т <b>л</b> т л	IC			2-6015642		
Part I	Beason		CD WAI OF (	All organizations must co	JA, II			0	2-0013042		
							e instructions				
The orgar				For lines 1 through 12, cl							
1	A church, co	nvention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).				
2	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E (Form 990 or 990-EZ).)										
3	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).										
4	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name,										
	city, and stat	e:									
5	An organizati	on operated fo	or the benefit of a col	llege or university owned	or operate	ed by a go	vernmental ur	nit describe	ed in		
	section 170	(b)(1)(A)(iv). (C	Complete Part II.)								
6	A federal, sta	te, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).				
7 X			-	ntial part of its support fr				e general r	public described in		
	-		omplete Part II.)		5			5			
8	-			(1)(A)(vi). (Complete Part	· II )						
9	-			in section 170(b)(1)(A)(i		ed in coniu	inction with a	land-orant	college		
•	•			ulture (see instructions).				°,	•		
			grant conege of agrici			lame, ony	, and state of	the college			
10	university:	on that norma		than 22 1/20/ of its our	ort from a	ontributio	na mambarah	in food on	d grace receipte from		
				than 33 1/3% of its supp							
				ct to certain exceptions, a					-		
				(less section 511 tax) fro	m busines	ses acqui	rea by the org	anization a	iπer June 30, 1975.		
			mplete Part III.)								
11	-	•	-	vely to test for public saf	•						
12	An organizati	on organized a	and operated exclusi	vely for the benefit of, to	perform tl	ne functio	ns of, or to car	rry out the	purposes of one or		
	more publicly	supported or	ganizations describe	d in section 509(a)(1) o	r section !	509(a)(2).	See section 5	509(a)(3). (	Check the box in		
_	_lines 12a thro	ough 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and	12g.			
a	_ Type I. A s	upporting orga	anization operated, s	upervised, or controlled l	by its supp	ported org	anization(s), ty	pically by	giving		
	the suppor	ted organizatio	on(s) the power to req	gularly appoint or elect a	majority o	f the direc	tors or trustee	es of the su	Ipporting		
	organizatio	n. <b>You must c</b>	complete Part IV, Se	ections A and B.							
b	<b>Type II.</b> A s	supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organizatior	n(s), by hav	ving		
	control or r	nanagement o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	ported		
	organizatio	n(s). <b>You mus</b>	t complete Part IV,	Sections A and C.							
с 🗌	Type III fur	nctionally inte	grated. A supporting	g organization operated i	in connect	ion with, a	and functional	ly integrate	ed with,		
	its support	ed organizatio	n(s) (see instructions)	). You must complete F	Part IV, Se	ctions A,	D, and E.				
d	Type III no	n-functionally	integrated. A supp	oorting organization operation	ated in cor	nnection w	vith its suppor	ted oraaniz	zation(s)		
		-		ation generally must sati				-			
		-		nplete Part IV, Sections	•		-				
e	_			written determination from				I Type III			
•		•		nally integrated supportir			1 ype 1, 1 ype 1	i, iype iii			
f Ent	er the number										
		••	about the supporte	d organization(c)							
	(i) Name of supp		(ii) EIN	(iii) Type of organization	(iv) Is the orga	inization listed	(v) Amount of	monetary	(vi) Amount of other		
	organization	ı		(described on lines 1-10	in your governi Yes	ng document?	support (see in	-	support (see instructions		
				above (see instructions))	100						
									1		

#### Schedule A (Form 990 or 990 EZ) 2019 UNITED WAY OF GREATER NASHUA, INC. Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and

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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 gualify under the total listed below, placed complete Part III.)

fails to qualify under the tests listed below, please complete Part III.)

Sec	Section A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	<b>(f)</b> Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	708,612.	1077245.	1229322.	1350873.	2009956.	6376008.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	708,612.	1077245.	1229322.	1350873.	2009956.	6376008.
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)						
6	Public support. Subtract line 5 from line 4.						6376008.
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	<b>(e)</b> 2019	(f) Total
	Amounts from line 4	708,612.	1077245.	1229322.	1350873.	2009956.	6376008.
	Gross income from interest,	/00/0120	10//2150	1009000	10000701	20099301	0070000
0	dividends, payments received on						
	securities loans, rents, royalties,						
		42,244.	27,660.	15,613.	14,889.	13,847.	114,253.
•	and income from similar sources Net income from unrelated business		27,000.	13,013.	14,005.	13,047.	114,200.
9							
	activities, whether or not the		6 1 1 1	8,424.	7 202	6 1 0 0	27 020
	business is regularly carried on		6,111.	0,424.	7,293.	6,100.	27,928.
10	Other income. Do not include gain						
	or loss from the sale of capital		4 400	F 20F		0 040	1 - 1 1 1
	assets (Explain in Part VI.)	5,475.	4,483.	5,385.	20,925.	9,843.	46,111.
11	Total support. Add lines 7 through 10						6564300.
12	Gross receipts from related activities,	-				12	
13	First five years. If the Form 990 is for	r the organization's	s first, second, thir	d, fourth, or fifth ta	x year as a sectior	n 501(c)(3)	
0	organization, check this box and stor	bhere					
Sec	ction C. Computation of Publi	c Support Per	centage				0 - 1 0
14	Public support percentage for 2019 (I		•			14	97.13 %
15	Public support percentage from 2018					15	96.15 %
16a	16a 33 1/3% support test - 2019. 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 $\blacktriangleright X$							
b	b 33 1/3% support test - 2018. 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	17a 10% -facts-and-circumstances test - 2019. 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	b 10% -facts-and-circumstances test - 2018. 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 th	ne "facts-and-circu	mstances" test, ch	eck this box and	stop here. Explair	n in Part VI how the	9
	organization meets the "facts-and-circ	cumstances" test.	The organization q	ualifies as a public	ly supported organ	nization	
18	Private foundation. If the organization		-	-	• • • •		

# Schedule A (Form 990 or 990-EZ) 2019 UNITED WAY OF GREATER NASHUA, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

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

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) 2019	) (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to						
_	or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disgualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support						
	ndar year (or fiscal year beginning in) 🕨	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	) (f) Total
	Amounts from line 6	(=) =0.0		(0) _0			
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
с	Add lines 10a and 10b						
	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.) First five years. If the Form 990 is for	the organization?	first second their	d fourth or fifth t		L 501(a)(2) arr	
14	-	•					
Sec	check this box and stop here						
	Public support percentage for 2019 (li					15	0/
						16	<u> </u>
	Public support percentage from 2018 ction D. Computation of Inves					10	%
	•					47	0/
	Investment income percentage for 20					17	<u> </u>
	1 5					<b>18</b>	%
19a	<b>33 1/3% support tests - 2019.</b> If the						ine 17 is not
b	more than 33 1/3%, check this box ar 33 1/3% support tests - 2018. If the						▶∟_ 3%, and
	line 18 is not more than 33 1/3%, che	ck this box and <b>st</b>	op here. The orga	nization qualifies	as a publicly suppo	orted organiza	tion ►
20	Private foundation. If the organizatio	n did not check a	box on line 14, 19	a, or 19b, check tl	his box and see ins	structions	

# Schedule A (Form 990 or 990-EZ) 2019 UNITED WAY OF GREATER NASHUA, INC.

# Part IV Supporting Organizations

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

### Section A. All Supporting Organizations

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

3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

10b

1

2

Yes

No

# Schedule A (Form 990 or 990-EZ) 2019 UNITED WAY OF GREATER NASHUA, INC. Part IV Supporting Organizations (continued)

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
с	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a. b. or c. provide detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	tion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Sec	tion D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions)	•		
а	The organization satisfied the Activities Test. <i>Complete</i> <b>line 2</b> <i>below.</i>			
b	The organization is the parent of each of its supported organizations. <i>Complete</i> <b>line 3</b> <i>below</i> .			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see inst	ructions,		
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
_	that these activities constituted substantially all of its activities.	2a		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these	~		
~	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <b>Answer (a) and (b) below.</b>			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	0-		
L	trustees of each of the supported organizations? <i>Provide details in</i> <b>Part VI.</b>	3a		
α	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	<b>0</b> ⊾		
	of its supported organizations? If "Yes," describe in <b>Part VI</b> the role played by the organization in this regard.	3b		

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyi	ng trust on N	ov. 20, 1970 (explain in F	Part VI). See instructions. A
	other Type III non-functionally integrated supporting organizations must c	omplete Sec	tions A through E.	<b>.</b>
Sect	ion 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		
Sect	ion 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):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other			
	factors (explain in detail in <b>Part VI</b> ):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrated	d Type III supporting orga	anization (see

Schedule A (Form 990 or 990-EZ) 2019 UNITED WAY OF GREATER NASHUA, INC. 02-6015642 Page 6

# Schedule A (Form 990 or 990-EZ) 2019 UNITED WAY OF GREATER NASHUA, INC.

ı aı	Type in Non-Functionally integrated 509	a)(5) Supporting Orga	(continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	S	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive	l de la construcción de la constru	
	(provide details in <b>Part VI</b> ). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	1	1	
Secti	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
_1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reason-			
	able cause required- explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
C	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j_	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D,			
	line 7: \$			
<u>a</u>	Applied to underdistributions of prior years			
	Applied to 2019 distributable amount			
C	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if			
	any. Subtract lines 3g and 4a from line 2. For result greater			
	than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	Excess from 2018			
	Excess from 2019			

Schedule A	(Form 990 or 990-EZ) 2019	UNITED	WAY OF	GREATE	R NASHUA	, INC.	02-6015642 Page 8
Part VI	Supplemental Inform Part IV, Section A, lines 1,	<b>nation.</b> Prov 2, 3b, 3c, 4b, 4 lines 2 and 3; P	ide the expl 4c, 5a, 6, 9a art IV, Secti	anations requi , 9b, 9c, 11a, on E, lines 1c,	red by Part II, line 11b, and 11c; Pa 2a, 2b, 3a, and 3	e 10; Part II, line 1 rt IV, Section B, I 8b; Part V, line 1;	17a or 17b; Part III, line 12; ines 1 and 2; Part IV, Section C, Part V, Section B, line 1e; Part V,

# Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

# Schedule of Contributors

Attach to Form 990. Form 990-EZ, or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2019

Name of the organization	Employer identification number				
	UNITED WAY OF GREATER NASHUA, INC.	02-6015642			
Organization type (che	eck one):				
Filers of:	Section:				
Form 990 or 990-EZ					
	4947(a)(1) nonexempt charitable trust <b>not</b> 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 organizat	ion is covered by the General Rule or a Special Rule.				
Note: Only a section 50	01(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule. See instructions.			
General Rule					
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions tota any one contributor. Complete Parts I and II. See instructions for determining a contribut	<b>e</b> , , , , , , , , , , , , , , , , , , ,			
Special Rules					

X 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 or 990-EZ), 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, 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, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

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

#### Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

Employer identification number

02-6015642

UNITED WAY OF GREATER NASHUA, INC.

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	EVERSOURCE ENERGY 780 NORTH COMMERCIAL STREET MANCHESTER, NH 03101	\$43,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BOSTON BILLIARDS CLUB 55 NORTHEASTERN BLVD NASHUA, NH 03062	\$64,951.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ENDOWMENT FOR HEALTH PILLSBURY STREET, #301 CONCORD, NH 03301	\$50,000.	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	SUBSTANCE ABUSE AND MENTAL HEALTH         SERVICES ADMINISTRATION         5600 FISHERS LANE         ROCKVILLE, MD 20857	\$114,651.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	UNIVERSITY OF NEW HAMPSHIRE 51 COLLEGE ROAD DURHAM, NH 03824	\$122,250.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	GOVERNOR'S OFFICE FOR EMERGENCY RELIEF AND RECOVERY <u>1 EAGLE SQUARE</u> CONCORD, NH 03301	\$ <u>294,591.</u>	Person X Payroll (Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Employer identification number

UNITED WAY OF GREATER NASHUA, INC.

## 02 - 6015642

Part II	Noncash Property (see instructions). Use duplicate copies of Par		1
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	

Schedule I	B (Form 990, 990-EZ, or 990-PF) (2019)		Page <b>4</b>				
Name of o	organization		Employer identification number				
UNITE	D WAY OF GREATER NASHUA	, INC.	02-6015642				
Part III	Exclusively religious, charitable, etc., contribu from any one contributor. Complete columns ( completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additiona	tions to organizations described in se a) through (e) and the following line ent charitable, etc., contributions of \$1,000 or	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
·		(e) Transfer of gift	t				
	Transferee's name, address, a 	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, a		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, a	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, a		Relationship of transferor to transferee				

SCHEDULE D	)
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(Form	990)
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932051 10-02-19

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.



Employer identification number

Department of the Treasury Internal Revenue Service

Name of the organization

	UNITED WAY OF GREATER NASHUA, INC.	02-6015642
Par	t I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Ac	counts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line 6.	
		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 func	
5	are the organization's property, subject to the organization's exclusive legal control?	
6		
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used on	
	for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferri	
Par	impermissible private benefit?	
		line 7.
1	Purpose(s) of conservation easements held by the organization (check all that apply).	
		prically important land area
	Protection of natural habitat	fied 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 con	
	day of the tax year.	Held at the End of the Tax Year
а	Total number of conservation easements	2a
b	Total acreage restricted by conservation easements	2b
С	Number of conservation easements on a certified historic structure included in (a)	2c
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure	
	listed in the National Register	2d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organized	zation during the tax
	year 🕨	
4	Number of states where property subject to conservation easement is located	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservatio	
		5 ,
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation eas	sements during the year
-	▶\$	
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)	(I)
•	and section 170(h)(4)(B)(ii)?	
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense statem	
5	balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that	
Par	organization's accounting for conservation easements. <b>t III Organizations Maintaining Collections of Art, Historical Treasures, or Other S</b>	imilar Assets.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 8.	
10		and about works
Ia	If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and bala	
	of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtheran	ice 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	
	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, p	provide
	the following amounts required to be reported under FASB ASC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1	▶ \$
b	Assets included in Form 990, Part X	▶ \$
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2019

		WAY OF GRE							15642	
Par	t III   Organizations Maintaining C	ollections of Ar	t, Historic	cal Trea	sures, o	r Other S	Similar	Assets	(continu	ed)
3	Using the organization's acquisition, accessi	on, and other record	s, check any	/ of the fol	llowing that	make sigr	nificant u	ise of its		
	collection items (check all that apply):									
а	Public exhibition	c	1 📃 Loa	n or excha	ange progra	am				
b	Scholarly research	e	e 🔄 Oth	er						
С	Preservation for future generations									
4	Provide a description of the organization's co		-		-	-		se in Part	XIII.	
5	During the year, did the organization solicit of								_	
	to be sold to raise funds rather than to be ma								Yes	No
Par	t IV Escrow and Custodial Arran		ete if the org	anization	answered '	'Yes" on Fe	orm 990	, Part IV, I	ine 9, or	
	reported an amount on Form 990, Pa									
1a	Is the organization an agent, trustee, custod								٦	<u> </u>
	on Form 990, Part X?							L	Yes	No
b	If "Yes," explain the arrangement in Part XIII	and complete the fo	llowing table	):						
									Amount	
	Beginning balance						1c			
	Additions during the year						1d			
e	Distributions during the year						1e			
T 00	Ending balance						1f		Yes	No
	Did the organization include an amount on F If "Yes," explain the arrangement in Part XIII.					-	۰	L		
Par										
	Complete	(a) Current year	(b) Prior		(c) Two year			ears hack	(e) Four y	ears hack
1a	Beginning of year balance			your	<b>(6)</b> 1 100 your		<b>y</b> 11100 y	ouro buon		burb buok
b	Contributions									
c	Net investment earnings, gains, and losses									
d	Grants or scholarships									
	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance									
2	Provide the estimated percentage of the cur		e (line 1g, co	olumn (a)) I	held as:					
а	Board designated or quasi-endowment		%							
b	Permanent endowment	%								
с	Term endowment	_%								
	The percentages on lines 2a, 2b, and 2c sho	ould equal 100%.								
3a	Are there endowment funds not in the posse	ession of the organiza	ation that are	e held and	administer	ed for the	organiza	tion	_	
	by:								Y	'es No
	(i) Unrelated organizations								3a(i)	_
	(ii) Related organizations								3a(ii)	
b	If "Yes" on line 3a(ii), are the related organization								3b	
4	Describe in Part XIII the intended uses of the	<u>u</u>	wment funds	s.						
Par	t VI Land, Buildings, and Equipm									
	Complete if the organization answere							.	( ) = .	
	Description of property	(a) Cost or c basis (investr		(b) Cost o basis (o		• •	umulate eciation	a	(d) Book	/alue
	Level				,788.	uepro	CUALION		100	,788.
	Land				,788.	0.5	30,30	15		<u>, 788.</u> , 407.
	Buildings				,865.		50,50 56,13			<u>,407.</u> ,729.
	Leasehold improvements				,763.		53,80			,958.
	Equipment				,060.	•		71.		,789.
	Other		V ookimer //							,671.
1010		quai runn 990, Parl	<u>, coulini (E</u>	<u>יוווו און און און און און און און און א</u> ון און און און און און און און און און א	<u>,,                                   </u>				224	,

Schedule D (Form 990) 2019

(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ► Part VIII Investments - Program Related.	<u> </u>		
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	a-or-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line	11d. See Form 990. Part X. line 15.	
	Description		(b) Book value
(1) BENEFICIAL INTEREST	· ·		192,013.
			19270131
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line           Part X         Other Liabilities.	<u>ə 15.)</u>	▶	192,013.
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) SECURITY DEPOSITS			5,150.
(3) FUNDS HELD FOR OTHERS			4,474.
(4) COMMUNITY IMPACT GRANTS PA	AYABLE		93,001.
			69,166.
			0,100.
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			171,791.
2. Liability for uncertain tax positions. In Part XIII, provide	the text of the footnote to	the organization's financial statements the	
organization's liability for uncertain tax positions under	FASB ASC 740. Check h	ere if the text of the footnote has been pro	ovided in Part XIII X

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

#### Schedule D (Form 990) 2019 UNITED WAY OF GREATER NASHUA, INC.

## Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total (Col (b) must aqual Form 000 Part V col (P) line 12 )		

	dule D (Form 990) 2019 UNITED WAY OF GREATER NASHU				6015642	Page <b>4</b>
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts With	Revenue per Re	turn.		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					660
1				1	2,304,	,660.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	5,622.			
b	Donated services and use of facilities	2b	23,242.			
С	Recoveries of prior year grants	2c				
d	Other (Describe in Part XIII.)	2d	111,264.			
е	Add lines <b>2a</b> through <b>2d</b>			2e		128.
3	Subtract line 2e from line 1			3	2,164,	,532.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
С	Add lines <b>4a</b> and <b>4b</b>			4c		0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		<u> </u>	5	2,164,	,532.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme	nts With	Expenses per F	Returi	า.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total expenses and losses per audited financial statements			1	1,662,	<u>,951.</u>
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:					
а	Donated services and use of facilities	2a	19,182.			
b	Prior year adjustments	2b				
С	Other losses	2c				
d	Other (Describe in Part XIII.)	2d	111,264.			
е	Add lines 2a through 2d			2e		446.
3	Subtract line 2e from line 1			3	1,532,	<u>,505.</u>
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a				
b	Other (Describe in Part XIII.)	4b				
с	Add lines 4a and 4b			4c		0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	1,532,	505.
Pa	t 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 X, LINE 2:

THE ORGANIZATION IS EXEMPT FROM FEDERAL AND STATE INCOME TAX UNDER SECTION
501(C)(3) OF THE INTERNAL REVENUE CODE. IN ADDITION, THE ORGANIZATION
QUALIFIES FOR THE CHARITABLE CONTRIBUTION DEDUCTION UNDER SECTION
170(B)(1)(A) AND HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A
PRIVATE FOUNDATION UNDER SECTION 509(A)(2). THOUGH THE ORGANIZATION IS
EXEMPT FROM INCOME TAX, IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS
EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE INTERNAL
REVENUE CODE. THE ORGANIZATION HAS CALCULATED AN INCOME TAX PROVISION
THAT IS IMMATERIAL FOR FINANCIAL STATEMENT PURPOSES, AND HAS EVALUATED ITS
SIGNIFICANT TAX POSITIONS, INCLUDING THEIR TAX-EXEMPT STATUS, AND
DETERMINED THAT THEY DO NOT NEED TO RECOGNIZE A LIABILITY FOR ANY

Schedule D (Form 990) 2019 UNITED WAY OF GREATER NASHUA, INC. Part XIII Supplemental Information (continued)	02-6015642 Page 5
UNCERTAIN TAX POSITIONS FOR INTEREST, PENALTIES OR POTENTIA	AL TAXES. THE
ORGANIZATION HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE	E MAINTENANCE OF
ITS TAX-EXEMPT STATUS, IDENTIFY AND REPORT UNRELATED INCOME	C, DETERMINE ITS
FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HA	AS NEXUS, AND
IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED	TAX POSITIONS.
THE ORGANIZATION HAS DETERMINED THAT THERE ARE NO MATERIAL	UNCERTAIN TAX
POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE CON	ISOLIDATED
FINANCIAL STATEMENTS.	
PART XI, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	50,424.
FUNDRAISING EXPENSES	60,840.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	111,264.
PART XII, LINE 2D - OTHER ADJUSTMENTS:	
RENTAL EXPENSES	50,424.
FUNDRAISING EXPENSES	60,840.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	111,264.

SCHEDULE G	Suppleme	ntal Information Re	garding	Fund	Iraisi	ng or Gaming A	ctiv	ities	OMB No. 1545-0047		
(Form 990 or 990-EZ)		e organization answered organization entered mo					r 19,	or if the	2019		
Department of the Treasury Internal Revenue Service	Ν.	Attach to							Open to Public Inspection		
Name of the organization		to www.irs.gov/Form99	0 for instri	uction	s and	the latest informati	on.	Employer ide	entification number		
Nume of the organization		WAY OF GREATE	R NASI	АША	. т <b>і</b>	JC .		02-6015			
Part I Fundrais		Complete if the organiza					ine 1				
	complete this part										
	•	ed funds through any of t		•		,					
<b>b</b> Internet and <b>c</b> Phone solicit	email solicitations	g _	Solicital			nment grants events					
d In-person sol		5 🗆		lanare	long						
2 a Did the organizatio	n have a written o	r oral agreement with any	individual	(incluc	ling of	ficers, directors, trus	tees,	or			
		art VII) or entity in connec	•			U U		Yes			
<b>b</b> If "Yes," list the 10 compensated at least	•	viduals or entities (fundrais	sers) pursua	ant to	agreer	ments under which th	ne fui	ndraiser is to be	9		
				1		Γ					
(i) Name and address	s of individual	(ii) Activity		(iii) fundr	Did aiser	(iv) Gross receipts		Amount paid or retained by)	(vi) Amount paid		
or entity (fund	raiser)	(II) ACTIVITY		have c or cor contrib	trol of	from activity		fundraiser ted in col. (i)	to (or retained by) organization		
				Yes	No						
				103							
					•						
Total 3 List all states in whi	ch the organizatio	n is registered or licensed	to solicit c	ontrib		or has been notified	it is .	exempt from ro			
or licensing.	on the organizatio	The registered of licensed			010115	or has been notilled	11 15		gistiation		

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

Schedule G	(Form 990 or 990-EZ) 2019	UNITED	WAY	OF	GREATER	NASHUA,	INC.	02-6015642	Page <b>2</b>
Part II	Fundraising Events	Complete if t	he oraar	nizatio	n answered "Ve	s" on Form 990	Part IV line 18	or reported more than \$15	000

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

		of fundraising event contributions and gro		EZ, III IES T AITU OD. LIST E	events with gross receipt	is greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			EVENTS AND		NONE	
			SPONSORSHIPS			(add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
anı						
Revenue	1	Gross receipts	117,735.			117,735.
Re	•					
	2	Less: Contributions				
	2					
	3	Gross income (line 1 minus line 2)	117,735.			117,735.
	3		117,755.			117,755.
	4	Cash prizes				
	-					
	5	Noncash prizos				
s	Э	Noncash prizes				
JSe	~	Dept/facility/acata				
per	6	Rent/facility costs				
Direct Expenses	_					
rect	7	Food and beverages				
ā	_					
	8	Entertainment				60.040
	9	Other direct expenses				60,840.
		Direct expense summary. Add lines 4 through			🕨	60,840.
De		Net income summary. Subtract line 10 from li				56,895.
Pa	π		answered "Yes" on Form	990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.				
ē			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col. (a) through col. (c))
Sev						
_	1	Gross revenue				
S	2	Cash prizes				
Direct Expenses						
ъре	3	Noncash prizes				
ц						
irec	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	<b>Yes</b> %	
	6	Volunteer labor	No	No	No	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)		►	
9	En	ter the state(s) in which the organization condu	cts gaming activities:			
а	ls t	he organization licensed to conduct gaming a	ctivities in each of these s	tates?		Yes No
b	lf "	No," explain:				
	_					
	_					
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax y	/ear?	Yes No
		Yes," explain:				
	_	· · · ·				

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Sch	iedule G (Form 990 or 990-EZ) 2019 UNITED WAY OF GREATER NASHUA, INC. 02-6	0156	42	Page <b>3</b>
11	Does the organization conduct gaming activities with nonmembers?	Υ [	'es	No No
	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed	ΠY		
40	to administer charitable gaming?		es	No
	Indicate the percentage of gaming activity conducted in:			0/
	a The organization's facility	13a		<u>%</u>
	a An outside facility	13b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:			
	Address			
15a	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	. [] Y	'es	No
k	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party $\blacktriangleright$ \$			
c	If "Yes," enter name and address of the third party:			
	Name			
	Address 🕨			
16	Gaming manager information:			
	Name			
	Gaming manager compensation <a> \$</a>			
	Description of services provided 🕨			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
a	a Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	<b>Y</b>	'es	No
k	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year 🕨 💲			
Pa	<b>Supplemental Information.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Par 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	t III, lines	s 9, 9	b, 10b,

Schedule G	(Form 990 or 990-EZ) Supplemental I	UNIT	ED WAY	OF	GREATER	NASHUA,	INC.	02-6015642	Page 4
Part IV	Supplemental I	nformation	(continued)						

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service Name of the organization Supplemental Information to Form 990 or 990-EZ

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

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

INC.



02-6015642

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

UNITED WAY OF GREATER NASHUA,

PPE, SUPPORTING COMMUNITY FOOD SUPPORTS, AND HELPING STUDENTS GET

ACCESS TO INTERNET AND TECHNOLOGY FOR REMOTE LEARNING.

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

UNITED WAY OF GREATER NASHUA IS THE COMMUNITY CONVENER OF THE ONE

GREATER NASHUA COALITION. THE OBJECTIVE OF THIS COALITION IS TO FOCUS

ON HEALTH OUTCOMES, 40% OF WHICH ARE DETERMINED BY SOCIAL FACTORS. IN

OUR COMMUNITY, THERE IS GROWING DIVERSITY, AND SOCIAL INCLUSION IS A

MAJOR ISSUE WITH DIVERSE COMMUNITIES, ESPECIALLY IMMIGRANTS AND

REFUGEES. EACH YEAR, THE COALITION ENGAGES NUMEROUS VOLUNTEERS IN THIS

COMMUNITY WIDE EFFORT. THE RESULTS OF THESE EFFORTS ARE IMPROVED

HEALTHY OUTCOMES, WORKPLACE PRODUCTIVITY, ENTREPRENEURSHIP, AND SOCIAL

ENGAGEMENT. WHILE IT IS DIFFICULT TO SEE THIS VALUE REFLECTED DIRECTLY

IN OUR FINANCIAL STATEMENTS, THE VALUE IS NEVERTHELESS TANGIBLE AND

WORTHY OF MENTION.

EXPENSES \$ 3,544. INCLUDING GRANTS OF \$ 0. REVENUE \$ 0.

FORM 990, PART III

THE UNITED WAY OF GREATER NASHUA BENEFITS FROM THE EFFORTS OF OVER 800

VOLUNTEERS THAT DONATE APPROXIMATELY 5,000 HOURS ANNUALLY TO THE

ORGANIZATION, ALLOWING THEM TO PROVIDE IMPORTANT PROGRAMS TO THE

COMMUNITY.

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

THE GOVERNANCE COMMITTEE REVIEWS THE DRAFT FORM 990 PRIOR TO FINALIZING AND

Name of the organization	Employer identification number
UNITED WAY OF GREATER NASHUA, INC.	02-6015642
FILING WITH THE INTERNAL REVENUE SERVICE.	
FORM 990, PART VI, SECTION B, LINE 12C:	
BOARD OF DIRECTOR'S CHAIRPERSON REVIEWS CONFLICT OF INTERE	ST POLICY.
ANNUALLY EACH VOLUNTEER RECEIVES A COPY OF THE CURRENT POL	ICY AND SIGNS OFF
ON THE DOCUMENT CONFIRMING THAT IT WAS READ AND WILL BE AD	HERED TO. ALL

BOARD ACTIONS ARE QUALIFIED AS A CONFLICT OF INTEREST QUERY. THOSE

INDIVIDUALS WHO MAY HAVE POTENTIAL CONFLICT ABSTAIN FROM VOTING.

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

THE PERSONNEL COMMITTEE, COMPRISED OF GOVERNANCE BODY MEMBERS, COMPLETES AN ANNUAL REVIEW FOR THE PRESIDENT AND MEETS WITH THE PRESIDENT TO REVIEW THEIR PERFORMANCE AND SET GOALS FOR THE UPCOMING YEAR. AN ANNUAL MERIT INCREASE FOR THE PRESIDENT IS ALSO APPROVED BY THE PERSONNEL COMMITTEE. THE PRESIDENT IS RESPONSIBLE FOR REVIEWING STAFF MEMBERS AND HAS A BUDGETED POOL OF MERIT DOLLARS APPROVED BY THE FINANCE COMMITTEE DURING THE BUDGET PROCESS.

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

UPON REQUEST

# UNITED WAY OF GREATER NASHUA, INC.

# <u>FINANCIAL STATEMENTS</u> FOR THE YEAR ENDED SEPTEMBER 30, 2020

INDEPENDENT AUDITORS' REPORT



86 West Street, PO Box 623, Keene, NH 03431 Phone: (603) 352-4500 Fax: (603) 352-8558

# INDEPENDENT AUDITORS' REPORT

To the Board of Directors of United Way of Greater Nashua, Inc.:

We have audited the accompanying financial statements of United Way of Greater Nashua, Inc. (a not-for-profit New Hampshire corporation) which are comprised of the statement of financial position as of September 30, 2020 and the related statements of activities, functional expenses and cash flows for the year then ended, and the related notes to the financial statements.

# Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

# Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

# Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of United Way of Greater Nashua, Inc. as of September 30, 2020, and the results of its operations and its cash flows for the year then ended in accordance with accounting principles generally accepted in the United States of America.

## **Report on Summarized Comparative Information**

We have previously audited United Way of Greater Nashua, Inc.'s September 30, 2019 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated December 17, 2019. In our opinion, the summarized comparative information presented herein as of and for the year ended September 30, 2019, is consistent, in all material respects, with the audited financial statements from which it has been derived.

Oster & Wheeler, P.C.

Keene, New Hampshire January 25, 2021

# <u>UNITED WAY OF GREATER NASHUA, INC.</u> <u>STATEMENT OF FINANCIAL POSITION</u> <u>SEPTEMBER 30, 2020</u>

# (WITH COMPARATIVE TOTALS AS OF SEPTEMBER 30, 2019)

	 2020		2019
ASSETS			
CURRENT ASSETS:			
Cash	\$ 511,116	\$	85,282
Accounts receivable	40,233		4,850
Pledges receivable, net	56,427		71,020
Grant receivable	-		21,888
Prepaid expenses	44,703		17,261
Total current assets	652,479		200,301
OTHER ASSETS:			
Restricted cash	537,791		265,932
Beneficial interest - NHCF	192,013		187,688
Property and equipment, net	352,671		367,507
Total other assets	1,082,475		821,127
Total assets	\$ 1,734,954	\$	1,021,428
LIABILITIES AND NET ASSETS			
CURRENT LIABILITIES:			
Current portion of long-term debt	\$ 5,159	\$	4,870
Accounts payable	41,693		44,896
Community impact grants payable	93,001		96,225
Designations payable	29,107		41,971
Funds held for others	4,474		4,274
Security deposits and accrued expenses	44,578		18,201
Refundable advances	69,166		
Total current liabilities	287,178		210,437
LONG-TERM DEBT, net of current portion	188,107		193,031
Total liabilities	475,285		403,468
NET ASSETS:			
Without donor restrictions:			
Board designated	57,844		-
Undesignated	557,791		168,546
	615,635		168,546
With donor restrictions	644,034		449,414
Total net assets	1,259,669		617,960
Total liabilities and net assets	\$ 1,734,954	\$	1,021,428

The accompanying notes to financial statements are an integral part of these statements.

# UNITED WAY OF GREATER NASHUA, INC. STATEMENT OF ACTIVITIES FOR THE YEAR ENDED SEPTEMBER 30, 2020 (WITH COMPARATIVE TOTALS FOR THE YEAR ENDED SEPTEMBER 30, 2019)

\	2020						2019	
	W	ithout Donor	W	Vith Donor				
	I	Restriction	F	Restriction		Totals		Totals
<b>REVENUE AND SUPPORT:</b>								
Campaign	\$	484,644	\$	34,812	\$	519,456	\$	555,806
Less: provision for uncollectible pledges		(24,469)				(24,469)		(15,878)
Net campaign		460,175		34,812		494,987		539,928
COVID-19 fund		378,605				378,605	-	
Total campaign revenue		838,780		34,812		873,592		539,928
Grant income:								
Federal Drug Free Community		-		114,651		114,651		116,083
Economic relief grants		274,084		-		274,084		-
Preschool development grant		-		122,250		122,250		-
Early Childhood Initiative		-		-		-		57,860
Other		46,771		-		46,771		806
Special events:				1 6 50 6				<b>22</b> 0 (20)
Over the Edge		4,596		16,536		21,132		238,639
Sleepout		59,244		-		59,244		60,045
Blizzard Blast		49,110		-		49,110		48,052
Skydive United		32,490		-		32,490		-
Other		67,102		-		67,102		69,593
Corporate sponsorships		65,125		-		65,125		57,620
Community services Gifts in kind		24,857		28,453		53,310		44,983
Gain (loss) on beneficial interest		23,240		5,622		23,240 5,622		50,466 (8,274)
Investment income		7,521		5,022		5,622 7,521		(8,274) 7,674
Rental income		62,850		-		62,850		62,822
Other income		9,843		_		9,843		20,926
Fiscal agent revenue and support		-		416,723		416,723		335,357
Net assets released from restriction		544,427		(544,427)		-10,725		
Net assets released nom restriction		511,127		(311,127)				
Total revenue and support		2,110,040		194,620		2,304,660		1,702,580
EXPENSES:								
Program services		1,404,973		-		1,404,973		1,506,704
Management and general		151,744		-		151,744		150,712
Fundraising		106,234				106,234		105,430
Total expenses		1,662,951				1,662,951		1,762,846
CHANGES IN NET ASSETS		447,089		194,620		641,709		(60,266)
NET ASSETS - beginning of period		168,546		449,414		617,960		678,226
NET ASSETS - end of period	\$	615,635	\$	644,034	\$	1,259,669	\$	617,960

The accompanying notes to financial statements are an integral part of these statements.

# UNITED WAY OF GREATER NASHUA, INC. STATEMENT OF FUNCTIONAL EXPENSES FOR THE YEAR ENDED SEPTEMBER 30, 2020 (WITH COMPARATIVE TOTALS FOR THE YEAR ENDED SEPTEMBER 30, 2019)

		2019			
	Program Services	General and Administrative	Fundraising	Totals	Totals
Designations for other organizations	\$ 34,812	\$ -	\$ -	\$ 34,812	\$ 53,900
Community impact grants	369,504	-	-	369,504	384,900
Community services:					
Blizzard Blast	45,655	-	-	45,655	40,131
Over the Edge	20,036	-	-	20,036	204,636
Day of Caring	5,007	-	-	5,007	16,352
Sleepout	108	-	-	108	6,747
Federal Drug Free Community	114,651	-	-	114,651	116,083
Early Childhood Initiative	55,471	-	-	55,471	2,079
One Greater Nashua	3,544	-	-	3,544	17,734
Fiscal agencies	290,960	-	-	290,960	349,108
Santa Fund	28,453	-	-	28,453	41,089
Skydive United	1,785	-	-	1,785	-
COVID-19 expenditures and grants	s 148,875	-	-	148,875	-
Other	15,328	-	-	15,328	13,538
Salaries and wages	158,768	52,923	52,923	264,614	245,148
Professional services	63,509	38,105	25,404	127,018	133,455
Dues	14,903	2,794	932	18,629	14,687
Supplies and expenses	6,573	6,573	13,144	26,290	29,969
Insurance	3,150	4,501	1,350	9,001	7,531
Occupancy	13,105	31,452	7,863	52,420	53,044
Depreciation	7,129	10,185	3,055	20,369	20,556
Bank fees	3,647	5,211	1,563	10,421	12,159
Total expenses	\$ 1,404,973	\$ <u>151,744</u>	\$ 106,234	<u>\$ 1,662,951</u>	<u>    1,762,846</u>

# UNITED WAY OF GREATER NASHUA, INC. STATEMENT OF CASH FLOWS FOR THE YEAR ENDED SEPTEMBER 30, 2020 (WITH COMPARATIVE TOTALS FOR THE YEAR ENDED SEPTEMBER 30, 2019)

		2020		2019
CASH FLOWS FROM OPERATING ACTIVITIES:				
Change in net assets	\$	641,709	\$	(60,266)
Adjustments to reconcile change in net assets to				
net cash flows from operating activities				
Depreciation		20,369		20,556
Change in beneficial interest		(4,325)		9,576
Provision for uncollectible pledges		24,469		15,878
Decrease (increase) in:				
Pledges receivable		(9,876)		5,567
Accounts receivable		(35,383)		4,000
Grant receivable		21,888		(14,406)
Prepaid expenses		(27,442)		(3,672)
Increase (decrease) in:				
Accounts payable		(3,203)		(7,416)
Community impact grants payable		(3,224)		-
Designations payable		(12,864)		15,307
Funds held for others		200		2,330
Security deposits and accrued expenses		26,377		(5,079)
Refundable advances		69,166		
Net cash flows from operating activities		707,861		(17,625)
CASH FLOWS FROM INVESTING ACTIVITIES:				
Purchase of property and equipment		(5,533)		
Net cash flows from investing activities		(5,533)		
CASH FLOWS FROM FINANCING ACTIVITIES:				
Payment on principal of long-term debt		(4,635)		(4,515)
Net cash flows from financing activities		(4,635)		(4,515)
CHANGE IN CASH AND RESTRICTED CASH		697,693		(22,140)
CASH AND RESTRICTED CASH - beginning of year		351,214		373,354
CASH AND RESTRICTED CASH - end of year	\$	1,048,907	\$	351,214
RECONCILIATION OF CASH AND RESTRICTED CASH:				
Cash	\$	511,116	\$	85,282
Restricted cash		537,791		265,932
Total cash and restricted cash shown in the statement of cash flows	\$	1,048,907	\$	351,214
SUPPLEMENTAL DISCLOSURE OF CASH FLOW INFORMATION:				
Cash paid during the year for interest	\$	9,530	\$	9,649
In-kind donations received	\$	23,240	\$	50,466
חו-גווע עטוומווטווג ונגבועכע	φ	23,270	φ	

The accompanying notes to financial statements are an integral part of these statements.

# 1. Organization:

United Way of Greater Nashua, Inc. (the Organization) is a New Hampshire nonprofit organization managed through the efforts of both a professional and volunteer staff to provide financial support to local human services programs. The Organization relies on the financial support of the local population in order to meet its financial distributions to local member agencies. The Organization benefits from the efforts of over 800 volunteers that donate approximately 5,000 hours annually to the Organization, allowing them to provide important programs to the community. As per the terms of the respective agreements, some additional activities are performed by the Organization on behalf of other agencies.

# 2. <u>Summary of significant accounting policies</u>:

The following is a summary of significant accounting policies of the Organization used in preparing and presenting the accompanying financial statements.

Accounting for contributions and financial statement presentation - The Organization follows Accounting for Contributions Received and Contributions Made and Financial Statements of Not-for-Profit Organizations as required by the Financial Accounting Standards Board Accounting Standards Codification (FASB ASC). Under these guidelines, the Organization is required to distinguish between contributions that increase net assets without donor restrictions and net assets with donor restrictions. It also requires recognition of contributions, including contributed services meeting certain criteria, at fair values. These reporting standards establish standards for financial statements of not-for-profit organizations and require a Statement of Financial Position, a Statement of Activities, a Statement of Functional Expenses and a Statement of Cash Flows.

<u>Basis of accounting</u> - The Organization presents its financial statements in accordance with *Financial Accounting Standards Board* (FASB) *Accounting Standards Codification* (ASC) *Topic 958 Not-For-Profit Entities*. The accompanying financial statements have been prepared on the accrual basis of accounting. All contributions are considered to be available for unrestricted use unless specifically restricted by the donor. Non-cash contributions are recorded at fair market value on the date of donation. Income earned on net assets, including net realized appreciation on investments, is reflected as a change in net assets without donor restrictions or net assets with donor restrictions in accordance with donor stipulations.

Amounts related to the Organization's financial position and activities are reported in two classes of net assets: net assets without donor restrictions and net assets with donor restrictions.

Net assets without donor restrictions are available for use in general operations and not subject to donor or certain grantor restrictions.

Net assets with donor restrictions consist of assets whose use is limited by donor-imposed, time and/or purpose restrictions. Donor-imposed restrictions are released when a restriction expires, that is, when a stipulated time restriction ends, or purpose restriction is accomplished. When a donor restriction expires the net assets are reclassified as net assets without donor restrictions and reported in the Statement of Activities as net assets released from restrictions. Some net assets with donor restrictions include a stipulation that assets provided be maintained permanently (perpetual in nature) while permitting the Organization to expend the income generated by the assets in accordance with the provisions of additional donor-imposed stipulations or a board-approved spending policy. Restricted contributions that are received and utilized in accordance with donor stipulations in the same year are reported as contributions without donor restrictions. The Organization follows a similar policy for investment return on these funds.

<u>Cash and cash equivalents</u> - For the purpose of reporting cash flows, the Organization considers all unrestricted highly liquid investments with an initial maturity of six months or less to be cash equivalents.

<u>Restricted cash</u> – Amounts included in restricted cash represent funds held by the United Way of Greater Nashua in their capacity as the fiscal agent for several small not for profit organizations (Note 12). These restrictions will lapse when the organizations appropriate the funds for expenditure. Also included in restricted cash are security deposits for various tenants (Note 14), cash held for the employees helping employees fund (Note 12), cash restricted for the preschool development and federal drug free community grants, and board designated funds (Note 12).

Restricted cash balances as of September 30, 2020 and 2019 were comprised of the below:

2020

2010

	<u>2020</u>	<u>2019</u>
Fiscal agencies	\$ 307,808	\$ 129,745
Early childhood initiative	310	55,781
One Greater Nashua	20,690	20,345
Preschool development grant	122,250	-
Federal Drug Free Community grant	19,265	-
Board designated funds	57,844	-
Employees Helping Employees	-	50,404
Other	9,624	9,657
Total	\$ 537,791	\$ 265,932

<u>Allowance for doubtful accounts</u> - The Organization utilizes the allowance method to provide for uncollectible pledges. The adequacy of the allowance for doubtful accounts for pledges receivables is reviewed on an ongoing basis by the Organization's management and adjusted as required through the provision for uncollectible pledges (bad debt expense). Management estimates the allowance based on experience with prior year campaign collections.

<u>Property and equipment</u> - Property and equipment is recorded at cost or, if donated, at estimated fair market value at the date of donation. Major additions and improvements are capitalized, while ordinary maintenance and repairs are charged to expense. Depreciation is provided using the straight-line method over the estimated useful lives of the related assets. Assets not in service are not depreciated. No depreciation is charged on land owned.

Conditions which might impact the fair market value of the assets are reviewed from time to time to assess the need to record any impairment to the value of the assets. No impairment allowance has been recognized during the current or prior year.

<u>Functional expenses</u> - The costs of providing the various program and supporting services have been summarized on a functional basis in the Statements of Activities. The Statements of Functional Expenses present the natural classification detail of expenses by function. Expenses are charged to programs and supporting services on the basis of periodic expense reviews and management estimates. Expenses directly attributable to a specific functional area of the Organization are reported as expenses of those functional areas. Management and general expenses include those expenses that are not directly identifiable with any other specific function but provide for the overall support and direction of the Organization.

<u>Donated services</u> - The Organization receives donated services from a variety of unpaid volunteers assisting the Organization in its programs. Donated services recognized in the Statement of Activities were \$23,240 and \$50,466 for the years ended September 30, 2020 and 2019, respectively.

Contributions of donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation, are recorded at their fair values in the period received.

<u>Use of estimates</u> - The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect reported amounts of assets and liabilities, disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

<u>Contributions and grant revenues</u> – Contributions, including promises to give, are considered conditional or unconditional, depending on the nature and existence of any donor or grantor conditions. A contribution or promise to give contains a donor or grantor condition when both of the following are present: (1) An explicit identification of a barrier, that is more than trivial, that must be overcome before the revenue can be earned and recognized (2) An implicit right of return of assets transferred or a right of release of a donor or grantor's obligation to transfer assets promised, if the condition is not met. Conditional contributions are recognized when the barrier(s) to entitlement are overcome. Unconditional contributions are recognized as revenue when received.

Grants are either recorded as contributions or exchange transactions based on criteria contained in the grant award. Grant awards that are contributions are evaluated for conditions and recognized as revenue when conditions in the award are satisfied. Unconditional awards are recognized as revenue when the award is received. Amounts received in which conditions have not been met are reported as a refundable advance liability. Grant awards that are exchange transactions are those in which the resource provider or grantor receives a commensurate value in exchange for goods or services transferred. There were no grants or awards that were considered exchange transactions during the years ended September 30, 2020 and 2019.

<u>Operating leases</u> – Leases in which a significant portion of the risks and rewards of ownership are retained by the lessor are classified as operating leases. Payments made or received under the operating leases are charged or recognized in the Statement of Activities on a straight-line basis over the period of the lease.

Income tax status – The Organization is exempt from Federal and State income tax under Section 501(c)(3) of the Internal Revenue Code. In addition, the Organization qualifies for the charitable contribution deduction under Section 170(b)(1)(A) and has been classified as an organization that is not a private foundation under Section 509(a)(2). Though the Organization is exempt from income tax, it is subject to tax on income unrelated to its exempt purpose, unless that income is otherwise excluded by the Internal Revenue Code. The Organization has calculated an income tax provision that is immaterial for financial statement purposes, and has evaluated its significant tax positions, including their tax-exempt status, and determined that they do not need to recognize a liability for any uncertain tax positions for interest, penalties or potential taxes. The Organization has processes presently in place to ensure the maintenance of its tax-exempt status, identify and report unrelated income, determine its filing and tax obligations in jurisdictions for which it has nexus, and identify and evaluate other matters that may be considered tax positions. The Organization has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements.

<u>Accounting pronouncements adopted</u> – In June 2018, the FASB issued ASU 2018-08, Clarifying the Scope and the Accounting Guidance for Contributions Received and Contributions Made (Topic 958). The amendments in this update assist entities in evaluating whether transactions should be accounted for as contributions (nonreciprocal transactions) or as exchange (reciprocal) transactions and determining whether a transaction is conditional. The contribution guidance requires an entity to determine whether a transaction is conditional, which affects the timing of the revenue recognized. The amendments in this ASU apply to both resources received by a recipient and resources given by a resource provider. The accounting guidance is effective for fiscal years beginning after December 15, 2018. The Organization adopted this guidance as of October 1, 2019, as required by the standard. The Organization applied Topic 958 on a retrospective basis. There was no change to opening balances of net assets and no prior period results were restated.

During 2016, the FASB issued ASU 2016-18, Statement of Cash Flows, to provide guidance on the presentation of restricted cash or restricted cash equivalents in the Statement of Cash Flows. The accounting guidance is effective for fiscal years beginning after December 15, 2018. The guidance is to be applied using a retrospective transition method to each period presented. The Organization adopted this guidance as of October 1, 2019 as required by the standard. The statement of cash flows for 2019 has been restated to include restricted cash in the beginning and ending cash and restricted cash.

# 3. Liquidity:

Financial assets available for general expenditure, that is, without donor or other restrictions limiting their use, within one year of the Statement of Financial Position date, comprise the following:

	2020	2019
Financial assets:		
Cash	\$ 511,116	\$ 85,282
Accounts receivable	40,233	4,850
Pledges receivable, net	56,427	71,020
Grants receivable		21,888
Total financial assets available within one year	\$ 607,776	\$ 183,040

The Organization maintains a policy of structuring its financial assets to be available as its general expenditures, liabilities, and other obligations come due. To manage liquidity and monitor the availability of resources to meet these operating needs, the Organization produces an annual budget which outlines the anticipated financial needs to maintain the Organization within the next fiscal year. The budget is analyzed and compared to actual results throughout the year to manage current cash flow needs.

# 4. <u>Concentration of credit risk – cash and cash equivalents:</u>

Financial instruments that potentially subject the Organization to concentrations of credit risk consist primarily of cash and cash equivalents. The Organization places its cash and cash equivalents with high credit quality financial institutions. At September 30, 2020 and 2019 cash deposits exceeded federally insured limits of \$250,000 by approximately \$754,977 and \$73,513 respectively. The Organization has not experienced any losses in such accounts and believes it is not exposed to any significant credit risk.

# 5. <u>Pledges receivable, net</u>:

Pledges receivable consisted of the following as of September 30:

	<u>2020</u>	<u>2019</u>
Pledges receivable:		
Current year campaign	\$ 87,427	\$ 105,597
Prior years campaigns	28,074	78,997
	115,501	184,594
Less: allowance for uncollectible pledges	(59,074)	(113,574)
Total	\$ 56,427	\$ 71,020

### 6. Beneficial interest:

United Way of Greater Nashua, Inc. has a beneficial interest in a fund, at the New Hampshire Charitable Foundation (NHCF).

Pursuant to the terms of the resolution establishing the fund with NHCF, property contributed to the foundation is held as a separate fund designated for the benefit of United Way of Greater Nashua, Inc. In accordance with its spending policy NHCF makes distributions from the fund to United Way of Greater Nashua, Inc. The annual distributions allowable from the fund are based on five percent of a twenty-quarter moving average of the fund's market value. The funds are included in net assets without donor restrictions. The market value of the fund assets was \$192,103 and \$187,688, as of September 30, 2020 and 2019, respectively.

### 7. <u>Designated fund</u>:

United Way of Greater Nashua, Inc. is the beneficiary of the Nashua Fire Relief Fund. The Fund is held and administered by the U.S. Trust Company. Distributions of \$6,620 and \$5,622 were received for the years ended September 30, 2020 and 2019. The market value of the fund was approximately \$207,000 and \$161,000 for the years ended September 30, 2020 and 2019, respectively.

## 8. Property and equipment, net:

The following is a summary of property and equipment as of September 30:

	2020	2019
Building and land	\$ 502,500	\$ 502,500
Building improvements	239,865	238,392
Furniture, fixtures and equipment	60,823	56,763
Total	803,188	797,655
Less: accumulated depreciation	(450,517)	(430,148)
Property and equipment, net	\$ 352,671	\$ 367,507

Depreciation expense for the years ended September 30, 2020 and 2019 was \$20,369 and \$20,556, respectively.

# 9. <u>Community impact grants payable</u>:

United Way of Greater Nashua, Inc. had total community impact grants payable in the amount of \$93,001 and \$96,225, as of September 30, 2020 and 2019, respectively. These funds are subject to the Organization's ability to collect the total funds pledged.

# 10. <u>Refundable advance liability</u>:

At June 30, 2020 the Organization had a refundable advance liability of \$49,900 from the receipt of an award from the Small Business Administration's (SBA) Paycheck Protection Program (PPP) as a result of legislation passed to assist businesses in navigating the Coronavirus pandemic. The Organization has determined the award is a conditional grant and has applied the policy as described in Note 2. Accordingly, the award is reported as a refundable advance liability until the conditions are substantially met or explicitly waived.

The Organization has interpreted the condition of the award to be the approval of the forgiveness application by the lender and SBA. Should the conditions of the award not be substantially met or explicitly waived, all or a portion of the award will bear interest at 1.00% and be repayable in monthly amounts of principal and interest of \$2,794, commencing upon receipt of notification of the unforgiven amount by the SBA, and would be required to be paid no later than April 2022. The Organization anticipates that the conditions of the award will be substantially met and the full amount of the award will be recognized as revenue.

# 11. Long-term debt:

The Organization has a note payable to a bank, payable in monthly installments of \$1,180, including interest. The interest rate is based on the FHLB 5 Year Classic Advance Rate plus 2.00%, currently at 4.75%, fixed for the first five years, then adjusted every five years, never dropping below 4.50%. Monthly payments are to be made through June 2028, with a final balloon payment due upon maturity. The note is secured by land and the building, and all rents received on the real property.

Interest expense for the years ended September 30, 2020 and 2019 was \$9,530 and \$9,649, respectively.

The following is a summary of future principal payments:

Fiscal Year End	
2021 (current portion)	\$ 5,159
2022	5,410
2023	5,672
2024	5,948
2025	6,236
2026 and thereafter	164,841
Total	\$ 193,266

# 12. Net assets with donor restrictions:

Net assets with donor restrictions are available for the following purposes at September 30:

	<u>2020</u>	<u>2019</u>
Fiscal agencies	\$ 307,808	\$ 129,745
New Hampshire Charitable Foundation	192,013	187,688
Preschool development grant	122,250	-
One Greater Nashua	20,690	20,345
Early Childhood Initiative	310	55,781
Employees Helping Employees	-	50,404
Other	963	5,451
Total	\$ 644,034	\$ 449,414

During the year ended September 30, 2019 the Organization expended \$54,000 for the Employees Helping Employees program. This program was funded by contributions received in previous years. As a result of the timing of these expenditures, the Organization reported a decrease in net assets which contributed to the loss for the year ended September 30, 2019. The remaining balance of \$50,404 was released during the year ended September 30, 2020.

Net assets restricted for the Early Childhood Initiative were released from restriction during the year ended September 30, 2020 in the amount of \$55,471.

# 13. Fair values of financial instruments:

The Organization reports its fair value measures using a three-level hierarchy that prioritizes the inputs used to measure fair value. This hierarchy, established by GAAP, requires that entities maximize the use of observable inputs and minimize the use of unobservable inputs when measuring fair value. The three levels of inputs used to measure fair value are as follows:

- Level 1. Quoted prices for identical assets or liabilities in active markets to which the Organization has access at the measurement date.
- Level 2. Inputs other than quoted prices included in Level 1 that are observable for the asset or liability, either directly or indirectly. Level 2 inputs include:
  - Quoted prices for similar assets or liabilities in active markets;
  - Quoted prices for identical or similar assets in markets that are not active;
  - Observable inputs other than quoted prices for the asset or liability (for example, interest rates and yield curves); and
  - Inputs derived principally from, or corroborated by, observable market data by correlation or by other means.
- Level 3. Unobservable inputs for the asset or liability. Unobservable inputs should be used to measure the fair value to the extent that observable inputs are not available.

The estimated fair value of the Organization's financial instruments is presented in the following table at September 30:

		<u>2020</u>			
	Carrying <u>Value</u>	Fair <u>Value</u>	Level <u>One</u>	Level <u>Two</u>	Level <u>Three</u>
Beneficial interest	\$ 192,013 \$	<u>192,013</u> \$	\$	\$	192,013
		<u>2019</u>			
	Carrying <u>Value</u>	Fair <u>Value</u>	Level One	Level <u>Two</u>	Level <u>Three</u>
Beneficial interest	\$ <u>187,688</u> \$	187,688 \$	\$	\$	187,688

The carrying amounts of cash and cash equivalents approximate fair value because of the short maturity of those financial instruments.

### 14. Lease of building:

The Organization rents separate offices within their building representing 56% of the total area with varying lease terms. Total rental income for the years ended September 30, 2020 and 2019 was \$62,850 and \$62,822, respectively.

The cost and accumulated depreciation of the building being leased at September 30:

	<u>2020</u>	<u>2019</u>
Land	\$ 108,788	\$ 108,788
Building	393,712	393,712
Building improvements	239,865	238,392
Total cost	742,365	740,892
Less: accumulated depreciation	(396,441)	(378,033)
Net book value of building	\$ 345,924	\$ 362,859

### 15. Contracted services:

The Organization entered into a service level agreement with an accounting firm on May 26, 2017. This is a yearly contract that is renewed every twelve months in October and can be terminated by either party with 30 days written notice, or for cause.

During the years ended September 30, 2020 and 2019, the Organization was provided management support services including but not limited to bookkeeping and maintaining financial records.

During the years ended September 30, 2020 and 2019, the Organization has incurred expenses of \$104,894 and \$107,173, respectively, on the above mentioned management support services.

# 16. <u>Related-party transactions</u>:

There were transactions for program services totaling \$1,925 and \$1,900 with businesses or individuals related to current board members for the years ended September 30, 2020 and 2019, respectively. The following transactions occurred between the Organization and related parties:

Summary of related-party transactions:

	2020	2019
Expenses:		
Miscellaneous program expense	<u>\$ 1,925</u>	<u>\$ 1,900</u>
Total related-party expenses	<u>\$ 1,925</u>	<u>\$ 1,900</u>

### 17. Uncertainty regarding the impact of COVID-19:

In March 2020, the World Health Organization recognized the novel strain of coronavirus, COVID-19, as a pandemic. The coronavirus outbreak has severely restricted the level of economic activity around the world. In response to this coronavirus outbreak, the governments of many countries, states, cities and other geographic regions have taken preventative or protective actions, such as imposing restrictions on travel and business operations and advising or requiring individuals to limit or forgo their time outside of their homes. Temporary closures of businesses had been ordered and numerous other businesses have temporarily closed voluntarily or restricted access to their premises. As a result, the coronavirus outbreak may have a material adverse impact on the Organization's financial position, operations, and cash flows. Given the uncertainty regarding the spread of the coronavirus, the related financial impact cannot be reasonably predicted or estimated at this time.

### 18. Subsequent events:

In accordance with the provisions set forth by FASB ASC, *Subsequent Events*, events and transactions from October 1, 2020 through January 25, 2021, the date the financial statements were available to be issued, have been evaluated by management for disclosure. Management has determined that there were no material events that would require disclosure in the Organization's financial statements through this date.

### 19. <u>Reclassifications</u>:

Certain amounts in the prior year financial statements have been reclassified to improve comparability between the two years.

# 2020 Governance Board and Community Advisory Council



United Way of Greater Nashua

### **Governance Board**

### Chair, Governance Board

Bob Mack BOD Since 2007; renewal 1/1/18 Welfare Officer City of Nashua 18 Mulberry St., Nashua, NH 03060 Or 4 Rita Street, Nashua, NH 03060 Tel: 603-589-4555 Cell: 603-521-5314 Email: mackb@nashuanh.gov

### At Large Member

Bob S. Larmouth BOD Since 2003; renewal 1/1/18 69 Main Street, Hollis, NH 03049 Tel: 603-465-2381 Cell: 603-930-9199 Email: <u>rlarmouth@charter.net</u>

### **Treasurer**

Dan Munroe BOD Since 1990; renewal 1/1/18 Outpost International 20 Trafalgar Square, Suite 205 Nashua, NH 03063 Or 15 Shelton St., Nashua, NH 03062 Tel: 603-546-4403 Cell: 603-459-5458 Email: <u>munroe1234@comcast.net</u>.

### Community Assessment Chair

Galina Szakacs BOD Since 2016; renewal 1/1/19 Leadership Coach Galina Szakacs Integral Coaching 25 Deerhaven Drive, Nashua, NH 03064 Tel: 603-594-2446 Cell: 603-566-1352 Email: galina@szakacs.org Business Website: www.gszakacscoaching.com

### Secretary, Governance Board / RD Committee Co-Chair

Bernie Rousseau BOD Since 2008; renewal 1/1/18 Retired, Pennichuck Water Service 9 Josiah Bartlett Road, Amherst, NH 03031 Cell: 603-566-6412 Email: <u>bern\_rousseau@comcast.net</u>

### Finance Committee Chair

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### **Community Investment Chair**

Jay Dinkel BOD Since 2011; renewal 1/1/18 Senior Vice President Enterprise Bank 88 Main Street, Nashua, NH 03060 Or 3 Beldano Mill Lane, Amherst, NH 03031 Tel: 603-881-9660 Cell: 603-801-1601 Email: jay.dinkel@comcast.net



# Governance Board (continued)

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Michael Reid BOD Since 2018 Area Sales Manager UPS 435 Savage Rd., Milford, NH 03055 Tel: 603-732-8792 Cell: Email: mrreid@ups.com

### **RD Committee Co-Chair**

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### At Large Member

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United Way of Greater Nashua

## **Community Advisory Council**

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# 2020 Governance Board and Community Advisory Council



United Way of Greater Nashua

Full Time Staff

#### **Michael Apfelberg**

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#### STANDING MEETING SCHEDULE

FINANCE: 3<sup>rd</sup> Wednesday of month; 7:30 AM GOVERNANCE: 3<sup>rd</sup> Thursday of month; 7:30 AM COMMUNITY ADVISORY: 4<sup>th</sup> Thursday of month, every other month; 7:30 AM