Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Α_	For th	e 2022 calendar year, or tax year beginning $$ JUL $$ I $$, $$ $$ 2022 $$ and $$ e	ending J	UN 30, 2023			
В	Check if applicab	C Name of organization		D Employer identific	ation number		
	Addre	e HIGH COUNTRY UNITED WAY					
	Name			56-1218079			
	Initial return Final	DO BOY 247	Room/suite	E Telephone number (828) 265			
	return termin ated			G Gross receipts \$	330,412.		
Г	Amen	ded POONE NC 29607		H(a) Is this a group re			
	Applie		***************************************	for subordinates'			
	pendi			H(b) Are all subordinates inc			
I	Tax-ex	empt status: $X = 501(c)(3) = 501(c)(0)$ (insert no.) 4947(a)(1) or	r 527	IN 107 to the seasons about the season of th	ist. See instructions		
J	Websi			H(c) Group exemption			
K	Form o	forganization: X Corporation Trust Association Other	L Year		State of legal domicile: NC		
	art I	Summary			Maria de la companya del companya de la companya de la companya del companya de la companya de l		
e	1	Briefly describe the organization's mission or most significant activities: PROVI	DE SU	PPORT FOR OT	HER		
Governance		NON-PROFITS Check this box if the organization discontinued its operations or dispose		th 050/ - 6 th 1	. 1 .		
err	2			1			
30	3			3	13		
٠ «	4	Number of independent voting members of the governing body (Part VI, line 1b)					
es	5	Total number of individuals employed in calendar year 2022 (Part V, line 2a)			2		
Activities &	6	Total number of volunteers (estimate if necessary)		6	23		
Ac	7 a	Total unrelated business revenue from Part VIII, column (C), line 12			2,013.		
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	······		0.		
Revenue		Contributions and avents (Dort VIII line 11)		Prior Year	Current Year		
	8	Contributions and grants (Part VIII, line 1h)		440,014.	328,399.		
	9	Program service revenue (Part VIII, line 2g)		0.	0.		
Re	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		443.	2,013.		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	341.	0.			
_	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		440,798.	330,412.		
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		217,545.	203,773.		
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.		
es	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		90,563.	88,978.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.		
ΩX	b	Total fundraising expenses (Part IX, column (D), line 25) 29,02		74 502	20 415		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		74,503.	39,415.		
	17907000	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		382,611.	332,166.		
	19	Revenue less expenses. Subtract line 18 from line 12		58,187.	-1,754.		
Net Assets or			Be	ginning of Current Year	End of Year		
SSE	20	Total assets (Part X, line 16)		554,041.	550,615.		
et A	21	Total liabilities (Part X, line 26)		1,672.	0.		
P	art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block		552,369.	550,615.		
		alties of perjury, I declare that I have examined this return, including accompanying schedules	and statema	ata and to the best of acc	Lander and Edit A Dis		
		thes of perjury, recease that i have examined this return, including accompanying schedules at, and complete. Declaration of preparer (other than officer) is based on all information of whi		100	knowledge and belief, it is		
true	, correc	than complete. Declaration of preparer (other than officer) is based on an information of with	ch preparer	nas any knowledge.			
Sig	ın	Signature of officer	-	Date			
Hei		REBECCA HALL, EXECUTIVE DIRECTOR		5410			
Hei	C	Type or print name and title					
		Print/Type preparer's name Preparer's signature	T	Date Check	TI PTIN		
Pair	d	JACOB HUTCHISON		1/15/23 if self-employe	A ACCOMM		
	parer		LC L	Firm's EIN 62	2-0647474		
	Only	Firm's address 136 FURMAN RD SUITE 4		THILISEIN O	J J J J J J J J J J J J J J J J J J J		
200	,	BOONE, NC 28607		Phone no 828	3.264.3595		
Ma	v the II	RS discuss this return with the preparer shown above? See instructions		FIIOII8 110. O Z (
ivid	y LITO II	to discuss this retain with the preparet shown above? See itistructions			X Yes No		

Form 990 (2022) HIGH COUNTRY UNITED WAY 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? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? 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			3.7
	similar amounts as defined in Rev. Proc. 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	100		3.7
_	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,	100000		7.7
-	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	88		_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?			37
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		3.7
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	50.556	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.		F) - 31	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	nament.	37	
	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	2022		v
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			v
	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			v
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446		Х
40-	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	40		v
	Schedule D, Parts XI and XII	12a		X
a	Was the organization included in consolidated, independent audited financial statements for the tax year?	401		v
40	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		
۵	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	1/h		Х
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		- 47
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		- 21
10		16		Х
17	or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts III and IV</i> Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	16		- 21
17		47		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		21
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	10		Х
10	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	18		- 21
19		10		y
20-	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	19		X
		20a		
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
21		04	Х	
PROPAGING	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II	21	THE RESERVE TO SHARE THE PARTY OF THE PARTY	(0000)

Form 990 (2022) HIGH COUNTRY UNITED WAY

Part V 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 27 If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24 a	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		<u>X</u> _
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			v
la.	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		_X
D	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	Offic		Х
26	Schedule L, Part I Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		- 47
26				
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	26		Х
27	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,	20		77
21	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? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,	2000		- 1A wagen A year - 1A wagen A year - 15 year A year
20	instructions for applicable filing thresholds, conditions, and exceptions):	MALE TO SERVICE STATE OF SERVICE STATE STA		AND CONTRACT
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? #			- NATIONAL STATES
-	"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 line 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			
	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		: :	•
	Schedule N, Part II	32		_X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? 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			
	Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			-u-
	If "Yes," complete Schedule R, Part V, line 2	36	· ·	<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			**
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?		_"	
D 5	Note: All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance	38	X,	
- 4	Chook if Schodula O contains a response or note to any line in this Dark V		•	· ·
	Check if Schedule O contains a response or note to any line in this Part V		-	
٠	Establish museless assessed in heavy of Ferma 1000 Ferm	33 300	Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 1c			
	1(1(1)1(1)1(1)1(1)1(1)1(1)1(1)1(1)1(1)1			
, c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	4 ±		
20000	(gambling) winnings to prize winners?	1ċ Form	990	(2020)

dragon	(Continued)				Γ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			Yes	No
	filed for the calendar year ending with or within the year covered by this return	2a 2		dentile talk	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	· · · · · · · · · · · · · · · · · · ·	2b	Х	
За	Did the consideration become unrelated breathers made to some at the OOO and are used to the OO		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b	· · · · · ·	
	At any time during the calendar year, did the organization have an interest in, or a signature or other a				<u> </u>
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		x
b	If "Yes," enter the name of the foreign country	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	2		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac	counts (FBAR).	in Sierre	Annual projections	
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a	*****	Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the				
	any approximations that were not try deductible as shortship as shortship it and		6a		Х
b	If "Yes," did the organization include with every solicitation an express statement that such contribution				
	were not tax deductible?		6b	٠	
7	Organizations that may receive deductible contributions under section 170(c).	·····			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices provided to the payor?	7a		Х
b	If III and the approximation and the property of the section of th		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was				
	to file Form 8282?	•	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7 - 1.1. Page 10 - 1	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or	ontract?	7e		· · · · · · · · · · · · · · · · · · ·
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the		7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	**************************************
	sponsoring organization have excess business holdings at any time during the year?		8		
9	Sponsoring organizations maintaining donor advised funds.			when the second	
а	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	Section 501(c)(7) organizations. Enter:		20 00 00 00 00 00 00 00 00 00 00 00 00 0	Year Land	
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			P. A. Santa
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b		200 - 1436 200 - 1436 200 - 1436 200 - 1436	
11	Section 501(c)(12) organizations. Enter:	t l		Arrest a month	11 11 11 11 11 11 11 11 11 11 11 11 11
а	Gross income from members or shareholders	11a	71. No. 11. August	1000 1000 1000 1000 1000 1000 1000 100	
b	Gross income from other sources. (Do not net amounts due or paid to other sources against				
	amounts due or received from them.)	11b	Water		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		- 17 Billion (17 24)	Andrews Age	
а	Is the organization licensed to issue qualified health plans in more than one state?	,.,.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	13a	one .cvmw.	26.7
	Note: 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	· I I	7 - 2000	201 C VINE 1	
	organization is licensed to issue qualified health plans	13b			
С	Enter the amount of reserves on hand	13c			
14a			_14a		X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b	ļ	ļ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				4.
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16	***************************************	X
	If "Yes," complete Form 4720, Schedule O.			2000	
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac			l	
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		2000
	If "Yes," complete Form 6069.				2000

HIGH COUNTRY UNITED WAY Form 990 (2022) Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI X Section A. Governing Body and Management Yes Νø 13 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 12 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? 2 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 Did the organization become aware during the year of a significant diversion of the organization's assets? 5 5 Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? X 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? X 8a Each committee with authority to act on behalf of the governing body? Х 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the X organization's mailing address? If "Yes," provide the names and addresses on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Νo 10a Did the organization have local chapters, branches, or affiliates? 10a b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b Х 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 X 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe X on Schedule O how this was done 12c X Did the organization have a written whistleblower policy? 13 13 Х Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official X 15a b Other officers or key employees of the organization X 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed NC Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection, indicate how you made these available. Check all that apply. X Upon request Other (explain on Schedule O) Own website Another's website Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

State the name, address, and telephone number of the person who possesses the organization's books and records

28607

REBECCA HALL - (828) 265-2111

PO BOX 247, BOONE, NC

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

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

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

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

 List all of the organization's current officers, directors, trustees (whether Individuals or organizations), regardless of amount of compensation.

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

X Check this box if neither the organization n (A)	(B)	Urga	/IIZa			iper	isate	(D)	'	(E)
Name and title	Average			Pos	C) ition	ı		Reportable	(E) Reportable	(F) Estimated
Name and the	hours per		not o	heck i sa pei	more	than -		compensation	compensation	amount of
	week			d a d				from	from related	other
	(list any	ector						the	organizations	compensation
•	hours for	or dir	d5			ated		organization	(W-2/1099-MISC/	from the
	related	trustee or director	fruste		읈	ibens		(W-2/1099-MISC/	1099-NEC)	organization
	organizations below		fional		ploy	t corr	_	1099-NEC)		and related organizations
*	line)	ndīvidaa	institutional trustee	Officer	Key employee	Highest compensated employee	Former			Organizations
(1) REBECCA HALL	40.00	 -					144			
EXECUTIVE DIRECTOR		1			х			54,180.	0.	0.
(2) MARK TAGGART	5.00	-				1				
CHAIR		X		X				0.	0.	0.
(3) DR. DAN BRIGMAN	5.00	<u> </u>								
VICE CHAIR		X		X				0.	0.	0.
(4) BELINDA TRIVETTE	5.00									
TREASURER		Х		X				0.	0.	0.
(5) TERRI LOCKWOOD	1.00									
BOARD MEMBER		X						0.	0.	0.
(6) DR. SCOTT ELLIOT	1.00									
BOARD MEMBER		X						0.	0.	0.
(7) TINA HOUSTON	1.00									
BOARD MEMBER		X						0.	0.	0.
(8) JOAN HEARN	1.00									
BOARD MEMBER		X		<u> </u>				0.	0.	0.
(9) WALTON SHEPHARD	1.00]								
BOARD MEMBER		X	<u> </u>	<u> </u>		<u>L</u> .		0.	0.	0.
(10) SHANE TRIPLETT	1.00									
BOARD MEMBER	<u> </u>	X						0.	0.	0.
(11) MATTHEW MANIACI	1.00]								,
BOARD MEMBER		X		<u> </u>		<u> </u>		0.	0.	0.
(12) WENDY BOONE	1.00									
BOARD MEMBER		X				ļ		0.	0.	0.
(13) HEATHER CASEY	1.00	1.						_		_
BOARD MEMBER		X	ļ	Ŀ				0.	0.	0.
(14) JACK JAMES	1.00									
EMERITUS BOARD MEMBER		X	ļ			<u> </u>	ļ	0.	0.	0.
(15) SUSAN POORMAN	1.00	-							_	_
EMERITUS BOARD MEMBER	4 4 5	X			<u> </u>	ļ	<u> </u>	0.	0.	0.
(16) FRED PFOHL	1.00							_	_	_
EMERITUS BOARD MEMBER	1 1	X	<u> </u>			<u> </u>		0.	0.	0.
(17) JENNIE STULTZ	1.00							_	_	,
EMERITUS BOARD MEMBER	L	X	<u></u>		L		<u> </u>	0.	0.	0.

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(A) Name and title	(B) Average hours per week	do) box offl	not ol	Pos Pos heck	itior more) than dis both	one i an	(D) Reportable compensation from	s (continued) (E) Reportable compensatio from related		(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MIS 1099-NEC)		compensation from the organization and related organizations
(18) TOM HUGHES	1.00				×	a					
EMERITUS BOARD MEMBER		X	<u> </u>			ļ		0.		0.	0.
											de varie a material de de la material de varie de la material de la definition de la material de la material d La material de la material de
THE THE PROPERTY AND ADDRESS OF THE PROPERTY O											
							٠.				- 1
	- 				:						
1b Subtotal			,			.,,,,		58,785.		0.	0.
c Total from continuation sheets to Part VI								58,785.		0.	0.
d Total (add lines 1b and 1c) Total number of individuals (including but n									000 of reportable		0
compensation from the organization						,	1				Yes No
3 Did the organization list any former officer, line 1a? If "Yes," complete Schedule J for s					-		-	· · · · · · · · · · · · · · · · · · ·	•		3 X
4 For any individual listed on line 1a, is the su	ım of reportabl	e cc	mpe	ensa	tion	and	oth	ner compensation from t			
and related organizations greater than \$150Did any person listed on line 1a receive or a									lual for consider		4 X
rendered to the organization? If "Yes," com							эаге	ed organization or individ	lual for services		5 X
Section B. Independent Contractors											
Complete this table for your five highest country the organization. Report compensation for the organization for the organization.								the state of the s		ensat	tion from
(A) Name and business		-			ıri i v	21 741	4111	(B) Description of s			(C)
Name and Dalies	address	INC	INC	<u></u>				Description of s	ei vices		ompensation
									······································		
	· ·										
-	·										
Total number of independent contractors (ii \$100,000 of compensation from the organization)	_	ot lir	nited	d to		se lis)	ted	above) who received me	ore than		A common of the
Troops of componential from the organic		-				-					Earm 990 (2022)

ΕЗ	T.VI	**************************************		rosponos	or noto to any lin	o in this Dart VIII	4.		
		Check if Schedule O co	ontains 8	i iesbouse	ei note to any lin	e in this Part VIII (A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1 a	Federated campaigns		1a		Explanation of the second of t	The second secon	min degree of the control of the con	The state of the s
ran	k	Membership dues		1b		The second secon	Commence of the Commence of th	The Description of Agriculture of Telegraphy (2) than 1 and 2 and	The state of the s
S, G	c	Fundraising events		10		Company Comp	A simple of the second	Segment Committee Committe	10 10 10 10 10 10 10 10
ar /	c	Related organizations		1d		And the property of the control of t	The product of the pr	Benderford and particular threat threat order or destination and a finite or destination and a finite order or destination and a finite or destination and a finite order or destination and a finite or destination and a finite order or destinati	The state of the s
s, G	• 6	Government grants (contrib	outions)	1e		Sign and the second sec		### CP (### 1976 *** 1970 *** Nov. 1974 *** 1974	The state of the s
ion r Si	f	All other contributions, gifts, g	rants, an	d				The state of the s	
but		similar amounts not included a	aboye	1f	328,399.			And A family and the support of the same age of the six of the support of the sup	a state of the sta
Contributions, Gifts, Grants and Other Similar Amounts	ç	Noncash contributions included in lir	nes 1a-1f	1g \$				Control of the Contro	The second secon
<u>a</u> 0	<u>.</u>	Total, Add lines 1a 1f				328,399.			The second secon
					Business Code				
çe	2 ε	l							
evi.	b)							
Senu	•								
Program Service Revenue	c	d					ļ		
rog	€								
Ω.		All other program service re							
		Total. Add lines 2a-2f					1 Charles (A. 1) Samuel A. 1 Charles A. 1 Ch	Property of the control of the contr	Account to the second to the s
	3	Investment income (includi			A contract of the contract of	2,013.		2,013.	
		other similar amounts)			voosads	Z, VIJ.		2,013.	
	4 5	Royalties							
	J	1 Toyalues		(i) Real	(ii) Personal	Version 1. The land St. 1	Land Control of the C		MAT MAIL SAN
	6 e	Gross rents	6a	(1) / (0 01)	(1) (1)		The state of the s	and the second s	
			6b			The second of th	The second secon	The state of the s	
	~ C	· · · · · · · · · · · · · · · · · · ·	6c			The second secon	Service and the service and th		
		Net rental income or (loss)							A STATE OF THE STA
		Gross amount from sales of		Securities	(ii) Other		A STATE OF THE STA	The Article of the Control of the Co	And the second s
			7a			The second secon	And the second s		
	k	Less: cost or other basis				The second secon	And the state of t	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	A CONTROL OF THE PROPERTY OF T
e		and sales expenses	7b				A	Chairman and Chair	A consideration of the constant of the constan
Revenue	c	Gain or (loss)						A CANADA CONTROL OF THE CONTROL OF T	
Re		Net gain or (loss)		<u></u>					
ner	8 8	Gross income from fundraising	g events	(not			Section and Contact the Contac	A CONTROL OF THE CONTROL OF T	
Oth		including \$					The state of the s	Probability of the Control of the Co	A series of the
	٠	contributions reported on li				- 10 23 # 24 C C _ H		System State of the State of th	
		Part IV, line 18		<u>8a</u>					
	k				<u> </u>				American State Control of the Contro
		Net income or (loss) from fu					The state of the s	**************************************	TACAL AND
	9 a	Gross income from gaming					See A A See	and the "Analysis of Engineering" in the "Analysis of Engineering" in the "Analysis of Engineering" in the "Analysis of Engineering of Engine	The second secon
		Part IV, line 19					And the second of the second o	Symmetry Comments of the Comme	The second secon
			,			Be of Provide to the second of the Control of the C		The production of the producti	A STATE OF THE PARTY OF T
		Net income or (loss) from g			T	And deligned a superior of any deligned a superior of the supe			
	10 8	Gross sales of inventory, le			'	and 1 of 200 miles of the control of		The second secon	### Company of the Co
		and allowances			 	and the second s		Secretary Association of Association of an Association of the Conference of the Conf	And the second s
-			alon of i		1			White the second	The second secon
	<u> </u>	Net income or (loss) from s	ales of I	iveritory	Business Code	The state of the s			1. (A) 1. (B) 4. (C) 1.
sn	11 a	· · · · · · · · · · · · · · · · · · ·	٠		Dualiteas Code	The state of the s			
neo	11 2 k								
ella ven	r		•						
Miscellaneous Revenue	,	d All other revenue							
Σ	_	Total. Add lines 11a-11d					The second secon	A WARF TO A THE STATE OF THE ST	VALUE OF THE STATE
						220 /12	A	2 012	

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Form 990 (2022) HIGH COUNTRY UNITED WAY Part IX Statement of Functional Expenses

	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	his Part IX (B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations		<u> </u>		And the state of t
	and domestic governments. See Part IV, line 21	203,773.	203,773.	The state of the s	White the state of
2	Grants and other assistance to domestic			The state of the s	The state of the s
	individuals. See Part IV, Ilne 22			A COLUMN TO THE PROPERTY OF TH	And the second s
3	Grants and other assistance to foreign			The second secon	The second secon
	organizations, foreign governments, and foreign			An analysis of the second of t	Mouth and gift a confirment of a construction of
	individuals. See Part IV, lines 15 and 16			1. particul super in a framework transfer in supply of particul super in a super in	A CHINA SHEET AND
4	Benefits paid to or for members			The state of the	
5	Compensation of current officers, directors,				
	trustees, and key employees	54,180.	32,508.	10,836.	10,836
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	28,431.	17,059.	5,686.	5,686
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	C 268	3 004	1 0 1 2	4 053
10	Payroll taxes	6,367.	3,821.	1,273.	1,273
11	Fees for services (nonemployees):				
	Management	2 126		2 426	
	Legal	3,136.	· · · · · · · · · · · · · · · · · · ·	3,136.	
	Accounting	4,200.		4,200.	
	Lobbying		The second secon	Marie Carlo Ca	
	Professional fundraising services. See Part IV, line 17		Common Agricological Company (1997) (A 1 may 4 shahama ka saqiqhada 1 shahama 1 may 3	
f	Investment management fees		· · · · · · · · · · · · · · · · · · ·	***************************************	
g	Other, (If line 11g amount exceeds 10% of line 25,	076	430	105	240
	column (A), amount, list line 11g expenses on Sch O.)	976. 39.	439. 17.	195.	342
12	Advertising and promotion	155.	70.	31.	14 54
13	Office expenses	1,446.	651.	289.	506
14	Information technology	1,440.	00.1.	409.	300
15	Royalties	12 000	6,210.	2 760	1 020
16	Occupancy	13,800.	0,410.	2,760.	4,830
17	Travel	***************************************			
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	2,933.	1,319.	587.	1,027
19	Conferences, conventions, and meetings	4,733.	т, этэ.	50/•	1,027
20	Interest			**************************************	
21 -	Payments to affiliates	1,703.	766.	341.	596
22 23		3,865.	1,739.	773.	1,353
23 24	Other expenses. Itemize expenses not covered	3,003	4 C C C C C C C C C C C C C C C C C C C	117.	<u> </u>
24	above. (List miscellaneous expenses on line 24e. If		Section of the second section of the s		
	line 24e amount exceeds 10% of line 25, column (A),			The second secon	
_	amount, list line 24e expenses on Schedule 0.) EOUIPMENT EXPENSE	3,354.	1,509.	671.	$1.17\overline{4}$
i a	UTILITIES UTILITIES	1,311.	590.	262.	459
b	AUTO	1,088.	489.	218.	381
c c	POSTAGE	805.	362.	161.	282
d	All other expenses	604.	273.	120.	211
	Total functional expenses. Add lines 1 through 24e	332,166.	271,595.	31,547.	29,024
25 26	Joint costs. Complete this line only if the organization	. 552,100.	211-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	J1, J4/•	47,044
∠0	reported in column (B) Joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

22.00	II.A	Check if Schedule O contains a response or note to any line in the	ıls Part X	***************************************		
				(A) Beginning of year		(B) End of year
	1	Cash - non-Interest-bearing		65,530.	1	27,426.
	2	Savings and temporary cash investments		436,067.	2	440,786.
	3	Pledges and grants receivable, net		46,165.	3	77,971.
	4	Accounts receivable, net		144.	4	
	5	Loans and other receivables from any current or former officer, d				A CONTRACTOR OF THE CONTRACTOR
		trustee, key employee, creator or founder, substantial contributo	r, or 35%	A Comment of the Comm		Approximate
		controlled entity or family member of any of these persons		5		
	6	Loans and other receivables from other disqualified persons (as	defined	Annual Manual Article Control of the		
		under section 4958(f)(1)), and persons described in section 4958	(c)(3)(B) [6	
e e	7	Notes and loans receivable, net	,		7	
Assets	8	Inventories for sale or use			8	
Ä	9	Prepaid expenses and deferred charges		2,833.	9	2,833.
	10a	Land, buildings, and equipment: cost or other				
		basis, Complete Part VI of Schedule D 10a	16,157.			
	b	Less: accumulated depreciation10b	14,558.	3,302.	10c	1,599.
	11	Investments · publicly traded securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11	
	12	Investments other securities. See Part IV, line 11			12	
	13	investments - program-related. See Part IV, line 11			13	
	14	Intangible assets		the second	14	
	15	Other assets, See Part IV, Ilne 11			15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)		554,041.	16	550,615
	17	Accounts payable and accrued expenses		1,672.	17	
	18	Grants payable			18	
	19	Deferred revenue			19	
	20	Tax-exempt bond llabilities			20	
	21	Escrow or custodial account liability. Complete Part IV of Schedu			21	
Ś	22	Loans and other payables to any current or former officer, director	or,			
IItte		trustee, key employee, creator or founder, substantial contributo	r, or 35%			A CONTROL OF THE PROPERTY OF T
Liabilities		controlled entity or family member of any of these persons			22	
ב	23	Secured mortgages and notes payable to unrelated third parties	,		23	
	24	Unsecured notes and loans payable to unrelated third parties			24	
	25	Other liabilities (including federal income tax, payables to related	third			
		parties, and other liabilities not included on lines 17-24). Complet	te Part X			
		of Schedule D			25	
	26	Total liabilities. Add lines 17 through 25		1,672.	26	0.
		Organizations that follow FASB ASC 958, check here		Section of the control of the contro		A CONTROL OF THE CONT
Ses		and complete lines 27, 28, 32, and 33.		A CONTROL OF THE PROPERTY OF T		And the second of the second o
an	27	Net assets without donor restrictions		111,751.	27	171,086.
Ба	28	Net assets with donor restrictions		440,618.	28	379,529
nd		Organizations that do not follow FASB ASC 958, check here				A CONTROL OF THE PROPERTY OF T
Ţ		and complete lines 29 through 33.		The state of the s		
5	29	Capital stock or trust principal, or current funds			29	
100	30	Paid-in or capital surplus, or land, building, or equipment fund			30	
As	31	Retained earnings, endowment, accumulated income, or other fu			31	
Net Assets or Fund Balances	32	Total net assets or fund balances		552,369.	32	550,615
_	33	Total liabilities and net assets/fund balances	l l	554,041.	33	550,615

or audits, explain why on Schedule O and describe any steps taken to undergo such audits