City of Harrisonburg
APPLICATION FOR TAX EXEMPTION

FOR OFFICE USE ONLY:
PAYMENT AMOUNT: 50.00
RECEIVED ON: 1/30/19
CHECK NUMBER: 2116

The information requested on this application must be filled out completely and returned to the City Manager's office on or before January 30. Include a $50 application fee made payable to City of Harrisonburg. Applicant must pay the cost of the public hearing ad or their share if multiple applicants.

Please attach a copy of your current (1) 501(c)(3) certificate; **(2)** By-Laws; **(3)** Articles of Incorporation; **(4)** most recent financial statement (audited, if available); **(5)** most recently filed IRS Form 990 or 990EZ.

Reviewed By
COR KDR
Treasurer
Finance

ORGANIZATION NAME: Way to Go, Inc.

MAILING ADDRESS: P. O. Box 946
Harrisonburg, VA 22803

CONTACT PERSON AND PHONE: Ben Craig, Exec Director (540) 705-6201

Type of property for which request is made (circle applicable) **PERSONAL PROPERTY** **REAL ESTATE**

If requesting a personal property exemption, please attach a detailed itemized listing of the specific item(s) for which the exemption is sought.

If requesting a real estate exemption, complete the following on each parcel for which exemption is sought:

Name in which property is held NA

Property address

Map identification number

Taxes paid for the preceding three (3) years _____ _____ _____

Name in which property is held

Property address

Map identification number

Taxes paid for the preceding three (3) years _____ _____ _____

Name in which property is held

Property address

Map identification number

Taxes paid for the preceding three (3) years _____ _____ _____

If requesting a personal property exemption, complete the following for each account for which exemption is sought:

Name assessed: Way to Go, Inc.

Account number: Prop ID 66118

Asset type and location address: Used (donated) office furniture & equip. 317 S. Main Street

Taxes paid for the preceding three (3) years: 142.80 located in County prior

Name assessed: Way to Go, Inc.

Account number: Prop ID 61245

Asset type and location address: donated used vehicles, physical location varies

Taxes paid for the preceding three (3) years: $ ~~122.80~~ 111.34 No veh. Lic. fee located in County prior

Please complete the following questions as referenced in City Ordinance 4-2-17 (copy enclosed) and *Code of Virginia* § 58.1-3651.

1. Do you currently own property in the City that is already tax-exempt?

   _____ Yes X No

   If yes, what is the property Map ID #? _____

   On what date was the exemption granted? _____

   How/By whom was the exemption granted? _____

2. Does the organization have any rule, regulation, policy, or practice that unlawfully discriminates on the basis of religious conviction, race, color, sex, or national origin? _____ Yes X No

3. Does the organization hold a current annual alcoholic beverage license from the Virginia Alcoholic Beverage Control Board for serving alcoholic beverages on the property? If yes, please attach a copy.

   _____ Yes X No

4. What compensation is paid to each director, officer, and employee of the organization?

   No compensation is paid to directors or officers. We have one staff person - an Executive Director, who is paid a competitive salary

5. What services does each director, officer, and employee render?

   Board directors and officers meet on a regular basis to establish policies and monitor client services. The Exec Dir carries out all client referral services and office activities.

6. Does any part of the net earnings of the organization benefit any individual? If so, please explain.

Yes, We serve approximately 200 different low-income working families each year as they are referred from local agencies. Services range from our paying for an inspection sticker to our helping a family actually get a good used vehicle. (see #8)

7. What percentage of the services provided by this organization is generated by funds received from donations, contributions, or local, state, or federal grants or funds? For purposes of this question, donation may include the providing of personal services or the contribution of in-kind or other material services. 90% %

8. What specific services does the organization provide for the common good of the public?
We provide services that keep low-income working families mobile and employed
Way to Go helps low-income working vehicle or helping families who do not have a vehicle obtain one. Services include repairs, gas, DMV fees, car payments, driving lessons, etc. -whatever it takes to keep them mobile.

9. What percentage of the activities of the organization involves carrying on propaganda or otherwise attempting to influence legislation?
NONE

10. Does the organization participate or intervene in any political campaign on behalf of any candidate for public office?

_____ Yes X No

I, Betty L. Newell (printed name), do hereby certify that the information provided and/or attached to this Application for Tax Exemption, is true and accurate, to the best of my knowledge. I acknowledge that knowingly providing false information will result in criminal charges pursuant to *Code of Virginia* § 58.1-11. I acknowledge that the organization I represent may be subjected to audit by the Commissioner of the Revenue, or an appointed employee of the Commissioner of the Revenue, to ensure that all information provided is true and correct.

Betty L Newell — January 30, 2019

Signature — **Date**

President, Board of Directors

Title

Kristie R. Mowbray — **My commission expires:** 8/31/2019

Notary

KRISTIE R MOWBRAY
NOTARY PUBLIC
REG # 7668203
MY COMMISSION EXPIRES 8/31/2019
COMMONWEALTH OF VIRGINIA

ZI 00 000000 200909 5441
R19988

192192 158

TE3 611487268

Department of the Treasury
Internal Revenue Service
EO RULINGS AND AGREEMENTS
PO BOX 2508
CINCINNATI OH 45201

Date of this notice: March 16, 2009
Notice Number: CP-158
Taxpayer Identification Number:
61-1487268

028172.580450.0090.002 1 AB 0.351 535

Advance Ruling Period Ending Date:
December 31, 2009

WAY TO GO INC
% BETTY L NEWELL
3142 LANIER LN
MASSANUTTEN VA 22840-3303429

For assistance, call:
1-877-829-5500

028172

Our records indicate that you were issued an advance ruling letter that treated you as a public charity, rather than a private foundation, during an advance ruling period that ends on the date indicated above. That letter required you to file IRS Form 8734 at the end of your advance ruling period to establish that you qualify as a public charity.

New IRS regulations changed the procedures governing your public charity status. You are no longer required to file Form 8734 at the end of the ruling period. The regulations also provide that donors can rely on your advance ruling letter with respect to your public charity status unless the IRS changes that status, based on the organization no longer meeting an applicable public support test, and publishes notice of the change.

If you have received Form 8734 from the IRS, please do not file it. Please keep your advance ruling letter along with this letter for your permanent records.

The regulations also changed the rules for computing public support, consistent with the redesigned Form 990, Return of Organization Exempt from Income Tax. For more information regarding those rules and the redesigned Form 990, please see the IRS website at www.irs.gov/eo.

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: JUN 20 2005

WAY TO GO INC
3142 LANIER LN
MASSANUTTEN, VA 22840-3303

Employer Identification Number:
61-1487268
DLN:
17053137032045
Contact Person:
RENEE RAILEY NORTON ID# 31172
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
DECEMBER 31
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
YES
Effective Date of Exemption:
APRIL 25, 2005
Contribution Deductibility:
YES
Advance Ruling Ending Date:
DECEMBER 31, 2009

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

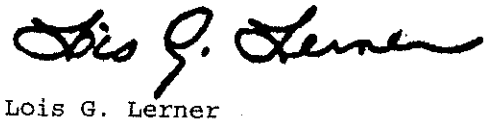
Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. During your advance ruling period, you will be treated as a public charity. Your advance ruling period begins with the effective date of your exemption and ends with advance ruling ending date shown in the heading of the letter.

Shortly before the end of your advance ruling period, we will send you Form 8734, Support Schedule for Advance Ruling Period. You will have 90 days after the end of your advance ruling period to return the completed form. We will then notify you, in writing, about your public charity status.

Please see enclosed Information for Exempt Organizations Under Section 501(c)(3) for some helpful information about your responsibilities as an exempt organization.

WAY TO GO INC

Sincerely,



Lois G. Lerner
Director, Exempt Organizations
Rulings and Agreements

Enclosures: Information for Organizations Exempt Under Section 501(c)(3)

Letter 1045 (DO/CG)

Revised Edition
Effective July 2005

Way to Go, Inc.
Bylaws

Article 1

Name and Authority

Section 1: Name

The name of the organization shall be Way to Go, Inc.

Section 2: Authority

Way to Go shall operate under a not-for-profit status as confirmed by the Virginia State Corporation Commission.

The organization is organized exclusively for charitable purposes. Goods or services provided by the Corporation shall be for the purpose of assisting poor, distressed, or underprivileged persons to become more self-sufficient with the goal of improving the quality of life for them and there families. Assistance with transportation needs shall be a primary purpose of the Corporation.

Article II

Membership

Section 1: Board membership

The membership of the Board shall consist of no more than twenty (20) members and should include representatives from community agencies who have self-sufficiency as a major part of their overall mission.

Each member shall have one vote on all matters coming before the Board.

Section 2: Terms of the office

The normal term of office is three years. A member may be re-elected to the Board provided the member has given permission for his or her name to be offered in nomination.

Section 3: Election to the Board

A Nominating Committee, appointed by the President, shall present a slate of nominees to the Board at its Annual Meeting, the month of which shall be determined by current members.

Nominations from the floor may be made in addition to the slate offered, if those nominated have agreed to serve.

Section 4: Board vacancies

Vacancies on the Board will be filled for the unexpired terms in the same manner.

Section 5: Membership suspension

Members of the Board shall not be denied membership on that Board, or be denied the rights and privileges of mernbership described herein, unless said member violates these bylaws to which he or she has agreed.

Board members who are absent at two consecutive meetings without legitimate reasons may be dismissed from the Board by an action of the Board.

Article III

Powers and Duties

The powers and duties of the Board of Directors shall be to:

A. Carry out the policies and procedures of Way to Go in a manner consistent with the Articles of Incorporation and bylaws.

B. Adopt such rules for the transaction of its business as may be deemed necessary.

C. At its discretion, appoint and hire such personnel (staff or consultants) as determined necessary for the proper functioning of Way to Go.

D. Exercise general responsibility in the formulation of programs and actions.

E. Create such committees and delegate such authority to these committees as it may deem expedient for carrying out the objectives of this organization.

F. In general, take such action, adopt such polices, and cause the execution of such documents as might be reasonable in accordance with the purpose of Way to Go.

Article IV

Officers

Section 1: Officers

The officers of Way to Go shall be a President, Vice President, Secretary and Treasurer. A single person may serve in one or more offices at the discretion of the Board. Officers shall be elected annually by the Board of Directors at the Annual Business meeting. Terms of office shall be for one year or until a successor is duly elected. An officer may be re-elected for additional terms provided the officer has given permission for his or her name to be offered in nomination. Newly elected officers shall assume office on the first day of the fiscal year.

Section 2: Election procedure for officers

A Nominating Committee appointed by the President will present a slate of nominees for the officers' positions at the Annual Meeting each year. Additional nominations may be made from the floor during the meeting provided the person nominated has agreed to serve in the capacity for which he/she is being nominated. If more than one name is placed in nomination for any elected office, the vote for that office shall be made by a secret written ballot.

Section 3: President

The President of the Board shall serve as Chief Executive Officer of Way to Go and shall be in general supervision and control of all the business affairs of Way to Go subject to the control of the Board. He/she shall, when present, preside at all meetings of the Board. He/she may sign, on behalf of the Board, deeds, mortgages, bonds, contracts, or other instruments, which the Board has authorized to be executed, except where the signing and execution shall be expressly delegated by the Board to some other officer or agent of the Board.

Section 4: Vice-president

The Vice-president shall have such powers and shall perform such duties in the absence of disability of the President. The duties of the office of the President shall be performed by the Vice-president, unless and until, the Board of Directors shall otherwise direct.

Section 5: Secretary

The secretary, or his/her designated representative, shall (a) keep the minutes of the meetings of the Board of Directors in one or more books for that purpose; (b) see that all notices are given in accordance with the provisions of these bylaws or that is required by law; (c) unless otherwise provided by the Board of Directors, acts as the custodian of the official records of the Board; and (d) in general perform all duties incident to the office of Secretary and others as shall from time to time be assigned to him/her.

Section 6: Treasurer

The Treasurer, or his/her designated representative, shall, in compliance with systems, manuals or financial and accounting procedures as determined by the Board of Directors; (a) have charge and custody of and be responsible for all funds and securities of Way to Go; (b) give receipts for monies due and payable to Way to Go from any source whatsoever, and deposit all such monies in the name of Way to Go in such banks, trust companies, and other depositories as shall be elected in accordance with the provisions of these bylaws and the applicable law; and (c) in general perform all duties as from time t time be assigned to him/her.

Section 7: Officers' vacancies

A vacancy in any officer's position shall be filled for the unexpired term by the Board of Directors at its next regular meeting following occurrence of the vacancy. A member elected to fill an unexpired term may be elected to a successive term in that office.

Article V

Receipts, Expenditures, and Budget

Section 1: Fiscal year

The fiscal year for Way to Go shall be from January 1 through December 31.

Section 2: Board authority

Way to Go may make application for and accept loans and grants of money or materials or property at any time from any private or public charitable source of the United States of America or the Commonwealth of Virginia, or any agency or instrumentally thereof.

The Board may authorize any officer or officers to enter into any contract or execute and deliver any instrument in the name of and behalf of Way to Go and such authority may be general or confined to specified instances.

Section 3: Procedures for expenditures of resources

All payments, except by petty cash, shall be made by checks against funds on deposit in a bank or by credit card. Checks in the amount of less than $1,000 may be signed by one board member. All checks in excess of $1,000 shall be signed by two Board members.

Section 4: Role of Board in the expenditure of resources

All payments of a special or non-recurring nature shall be approved by the Board of Directors. This includes items such as the award of donated or purchased automobiles, or the payment of a down payment on a vehicle. Smaller expenses such as repairs, insurance, etc. may be approved by the Board or requested by a referring agency case manager or social worker. The Board shall receive a summary of assistance provided at each Board meeting.

Section 5: Program planning

A draft of the proposed programs and budget will be mailed to Board members ten days prior to the Annual Meeting for consideration by the directors.

Article VI

Committees

Section 1: Establishment of standing and other committees

From time to time, the Board may appoint from their own number, or others not members of the Board, any standing or other committees for any purpose. These committees shall have the powers and duties specified in the resolution or appointment.

Section 2: Standing committees

The Executive Committee shall be the only standing committee of the Board.

Section 3: Executive committee

The Executive Committee shall be composed of the Board officers and have the power to act for the Board between Board meetings in matters expressly delegated to it by the Board. Action taken by the committee shall be subject to ratification by the Board at its next meting.

Article VII

Staffing

Section 1: It shall be the responsibility of the Board of Directors to determine when staff support for Way to Go is necessary and appropriate. Should the Board of Directors determine that staff is needed, the President shall appoint a Search Committee to develop job description, advertise, interview, and hire staff necessary to carry out the work of the organization. The Board of Directors shall evaluate staff on an annual basis.

Article VIII

Offices

The principal offices of Way to Go shall be located at 3142 Lanier Lane, Massanutten, VA 22840 or at such other places within the area served by Way to Go as designated by the Board.

Article IX

Auditing of Books and Bonding of Officers and Employees

All proceedings of the Corporation and of the Board shall be entered into a permanent file, properly indexed, and the same be preserved by the Secretary or other appropriate persons as designated by the Board. Official records and the books of accounts and other accounting operating records shall be kept at such office or offices or places as the Board may provide.

These bylaws are subject to any applicable federal or state statute that regulated the publication or dissemination of such records, namely official record and the books of account and other accounting operating records.

Article XI

Meetings

Section 1: Regular meetings

The Board of Directors shall meet at least four times per year at such time and place as the President shall direct. The date, time, and place shall be set forth in the notice sent to members of the Board by the President or the Secretary. The President may change the date, time, and place of the regular meeting by so notifying the other members of the Board in writing.

Section 2: Special meetings

Special meetings of the Board may be called by the President of by two members upon written request to the Secretary and notification of all members.

Section 3: Electronic Meetings

The Board may hold meetings using electronic mail or telephone conference calls and may vote on issues using either of these methods. However, if any member prefers not to vote on an issue without a regular or called meeting of the Board, this preference shall be honored and a meeting called to discuss the issue.

Section 4: Quorum

One third of the directors of the Corporation shall constitute a quorum for the transaction of business at any regular or called meeting of the Board. The vote of a majority of all members present at any meeting of the Board shall be necessary to take any action.

Any two members of the Executive Committee will constitute a quorum for that committee.

Article XII

Rules of Order

Robert's Rules of Order, revised, shall be the parliamentary authority for all matters of procedure as may be adopted by the Board.

Article XIII

Amendments

These bylaws may be adopted, amended, or repealed, if not inconsistent with the Articles of Incorporation of Way to Go, at any meeting of the Board of Directors, provided that the members of the Board of Directors were informed, in writing, that a change in the bylaws is to be considered during the meeting.

Article XIV

Effective Date

These bylaws, and any amendments thereof, shall become effective immediately upon adoption.

Articles of Incorporation
of
Way to Go, Inc.

The undersigned, pursuant to Chapter 10 of Title 13.1 of the Code of Virginia, states as follows:

Article 1: Name
The name of the Corporation shall be Way to Go, Inc.

Article 2: Members
The Corporation shall have no members.

Article 3: Director selection
The directors of the Corporation shall elect their successors as provided for in the Bylaws of the Corporation.

Article 4: Registered agent
The initial registered agent is Betty L. Newell, a resident of Virginia and an initial director of the Corporation.

Article 5: Registered office
The Corporation's initial registered office address is 3142 Lanier Lane, Massanutten, VA 22840. This is the address of the initial registered agent and is located in Rockingham County, Virginia.

Article 6: Directors
The names and addresses of the initial directors of the corporation are:

Betty L. Newell, 3142 Lanier Lane, Massanutten, VA 22840
Sherry Black, P. O. Box 1071, Harrisonburg, VA 22801
Neal Frankel, 2405 A Isaac Lane, Harrisonburg, VA 22801
Elizabeth Estep, 250 E. Elizabeth Street, Suite 117, Harrisonburg, VA 22802

Article 7: Incorporator
The incorporator of the Corporation is Betty L. Newell and her signature appears below.

Article 8: Purpose
Said corporation is organized exclusively for charitable purposes. Goods or services provided by the Corporation shall be for the purpose of assisting poor, distressed, or underprivileged persons to become more self-sufficient with the goal of improving the quality of life for them and their families. Assistance with transportation needs shall be a primary purpose of the Corporation.

Article 9: Distribution of earnings
No part of the net earnings of the corporation shall inure to the benefit of, or be distributed to its members, trustees, officers, or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purposes set forth above.

Article 10: Legislative and political action
No substantial part of the activities of the corporation shall be the carrying on of propaganda, or otherwise attempting to influence legislation, and the corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of, or in opposition to, any candidate for public office. Notwithstanding any other provision of these articles, the corporation shall not, except to an insubstantial degree, engage in any activities or exercise any powers that are not in furtherance of the purposes of this corporation.

Article 11: Limitation or elimination of liability
To the full extent that the Virginia Code or the Virginia Nonstock Corporation Act permits the limitation or elimination of the liability of directors or officers, a director or officer of the Corporation shall not be liable for damages in any proceeding against him or her.

Article 12: Distribution of assets upon dissolution
Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose.

Given under my hand this 19th day of April 2005.

_____
Betty L. Newell

WAY TO GO, INC.
Balance Sheet
As of December 31, 2018

		Dec 31, 18
ASSETS		
Current Assets		
Checking/Savings		
Bank of America		
Business Savings		200.00
Checking - Non-TANF		
Reserved for Rent	1,600.00	
Exec. Director Salary Reserved	7,500.00	
United Way Veh. Subsidies Fun...	10,864.23	
Unrestricted	9,301.89	
Total Checking - Non-TANF		29,266.12
Checking - TANF		-12,149.73
Total Bank of America		17,316.39
Total Checking/Savings		17,316.39
Accounts Receivable		
TANF Receivable		18,066.98
Total Accounts Receivable		18,066.98
Other Current Assets		
Donated Vehicles		8,395.00
Total Other Current Assets		8,395.00
Total Current Assets		43,778.37
Fixed Assets		
Computer Equipment		184.99
Furniture & Furnishings		7,154.98
Total Fixed Assets		7,339.97
TOTAL ASSETS		**51,118.34**
LIABILITIES & EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
VISA Payable - Non-TANF		2,439.67
VISA Payable - TANF		2,073.45
Total Accounts Payable		4,513.12
Other Current Liabilities		
Other Liabilities		6,000.00
Payroll Liabilities		
State Withholding Tax		170.00
Federal Payroll Taxes		584.50
Total Payroll Liabilities		754.50
Total Other Current Liabilities		6,754.50
Total Current Liabilities		11,267.62
Total Liabilities		11,267.62
Equity		
Retained Earnings		9,612.81
Temporarily Restricted Funds		
United Way Veh. Subsidies Funds		10,864.23
Total Temporarily Restricted Funds		10,864.23
Unrestricted Fund Balance		9,172.51
Net Income		10,201.17
Total Equity		39,850.72
TOTAL LIABILITIES & EQUITY		**51,118.34**

N-TANF FUND BALANCE 12/31/18

Non-TANF Unrestricted	
Checking Account Balance	$ 17,116.39
Less Un. Way Veh. Subsidy Funds	(10,864.23)
Less Rent funds reserved	(1,600.00)
Less Newell Loan Payable	(6,000.00)
Less Exec. Director Reserved Funds	(7,500.00)
Less Visa Payable	(2,439.67)
Non-TANF Available Funds	$ (11,287.51)

TANF GRANT 7/1/18 - 6/30/19

Grant	$ 83,438.00
Invoices: July-Dec.	$ (61,054.76)
Unused Balance 12/31/18	$ 22,383.24

01/13/19
Accrual Basis

WAY TO GO, INC.
TANF Profit & Loss Budget vs. Actual
July through December 2018

	Jul - Dec 18	Budget	$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
Grants				
TANF	61,054.76	41,719.02	19,335.74	146.3%
Total Grants	61,054.76	41,719.02	19,335.74	146.3%
Total Income	61,054.76	41,719.02	19,335.74	146.3%
Expense				
Expense				
TANF Expenses				
Driving School	1,455.00			
Gas Cards	5,085.00	2,500.02	2,584.98	203.4%
Insurance	2,669.15	3,600.00	-930.85	74.1%
Printing/Postage	0.00	249.96	-249.96	0.0%
Program Coordinator				
Payroll Taxes	754.80			
Bank Transfer Fees	5.00			
Health Insurance	1,400.00			
Worker's Comp. Insurance	238.64			
Professional Services	20,312.20	15,210.00	5,102.20	133.5%
Travel	371.06	582.00	-210.94	63.8%
Telephone	198.32	300.00	-101.68	66.1%
Total Program Coordinator	23,280.02	16,092.00	7,188.02	144.7%
Purchased Services (Databas...	0.00	250.02	-250.02	0.0%
Office Supplies & Expense	389.25	157.02	232.23	247.9%
Other Assistance	75.00	499.98	-424.98	15.0%
Repairs and Towing	19,814.87	10,000.02	9,814.85	198.1%
Taxi Fares	477.32	375.00	102.32	127.3%
Vehicle Fees	102.75	750.00	-647.25	13.7%
Vehicle Loan Payments	2,096.50	645.00	1,451.50	325.0%
Workcars Dealer Prep Fees	0.00	0.00	0.00	0.0%
Workcars Down Payments	3,300.00	4,800.00	-1,500.00	68.8%
Workcars Vehicle Fees	2,662.40	1,800.00	862.40	147.9%
Total TANF Expenses	61,407.26	41,719.02	19,688.24	147.2%
Total Expense	61,407.26	41,719.02	19,688.24	147.2%
Total Expense	61,407.26	41,719.02	19,688.24	147.2%
Net Ordinary Income	-352.50	0.00	-352.50	100.0%
Net Income	**-352.50**	**0.00**	**-352.50**	**100.0%**

8:21 AM
01/13/19
Accrual Basis

WAY TO GO, INC.
Non-TANF Profit & Loss Prev Year Comparison
January through December 2018

	Jan - Dec 18	Jan - Dec 17	$ Change	% Change
Ordinary Income/Expense				
Income				
Contributions				
In-Kind	0.00	7,050.00	-7,050.00	-100.0%
Nonprofits	3,480.00	2,669.86	810.14	30.3%
Business	596.00	2,784.00	-2,188.00	-78.6%
Foundations	17,000.00	1,000.00	16,000.00	1,600.0%
Individuals	13,819.31	20,888.00	-7,068.69	-33.8%
Other	11,016.20	2,000.00	9,016.20	450.8%
Vehicle Donations	26,627.00	23,221.00	3,406.00	14.7%
Total Contributions	72,538.51	59,612.86	12,925.65	21.7%
Grants				
TANF	106,982.68	103,875.64	3,107.04	3.0%
United Way				
Unrestricted	8,441.54	9,158.76	-717.22	-7.8%
Vehicle Subsidies	5,490.64	6,000.00	-509.36	-8.5%
Total United Way	13,932.18	15,158.76	-1,226.58	-8.1%
Total Grants	120,914.86	119,034.40	1,880.46	1.6%
Other Income				
Fund Raising	238.63	460.58	-221.95	-48.2%
HRDSS Reimbursements	90,857.57	126,596.16	-35,738.59	-28.2%
VISA Rewards	1,000.00	850.00	150.00	17.7%
Total Other Income	92,096.20	127,906.74	-35,810.54	-28.0%
Total Income	285,549.57	306,554.00	-21,004.43	-6.9%
Expense				
Expense				
Administrative				
Fundraising Expense	11.94	0.00	11.94	100.0%
Office Rent	4,400.00	1,200.00	3,200.00	266.7%
Website	191.05	21.57	169.48	785.7%
Accounting Fees	1,750.00	1,750.00	0.00	0.0%
Administrative	2,603.10	490.10	2,113.00	431.1%
Bank Charges	44.49	140.36	-95.87	-68.3%
Coalition/Board Meeting Exp.	644.06	753.36	-109.30	-14.5%
Insurance	143.33	236.00	-92.67	-39.3%
Office Supplies	648.20	246.39	401.81	163.1%
Postage/Mailing Service	264.74	76.00	188.74	248.3%
Taxes and Licenses	35.00	25.00	10.00	40.0%
Total Administrative	10,735.91	4,938.78	5,797.13	117.4%
Non-TANF Expenses				
Gas Cards	13,875.00	7,400.00	6,475.00	87.5%
Insurance	6,681.38	8,513.15	-1,831.77	-21.5%
Other	300.00	35.00	265.00	757.1%
Repairs and Towing	29,103.85	34,726.86	-5,623.01	-16.2%
Taxi Fares	1,260.30	393.00	867.30	220.7%
Vehicle Fees	2,805.99	3,385.77	-579.78	-17.1%
Vehicle Loan Payments	5,336.47	8,399.52	-3,063.05	-36.5%
Vehicle Subsidies				
Other	18,150.00	101,947.09	-83,797.09	-82.2%
United Way	5,360.05	7,000.00	-1,639.95	-23.4%
Total Vehicle Subsidies	23,510.05	108,947.09	-85,437.04	-78.4%
Vehicles Awarded	26,624.00	17,169.00	9,455.00	55.1%
Workcars Vehicle Fees	719.00	1,589.10	-870.10	-54.8%
Workcars Vehicle Subsidies	47,091.27	0.00	47,091.27	100.0%
Total Non-TANF Expenses	157,307.31	190,558.49	-33,251.18	-17.5%
TANF Expenses				
Driving School	2,055.00	3,950.00	-1,895.00	-48.0%
Gas Cards	9,050.00	7,650.00	1,400.00	18.3%
Insurance	5,552.92	7,050.66	-1,497.74	-21.2%

WAY TO GO, INC.
Non-TANF Profit & Loss Prev Year Comparison
January through December 2018

	Jan - Dec 18	Jan - Dec 17	$ Change	% Change
Printing/Postage	507.25	365.81	141.44	38.7%
Program Coordinator				
Payroll Taxes	754.80	0.00	754.80	100.0%
Bank Transfer Fees	5.00	0.00	5.00	100.0%
Health Insurance	1,400.00	0.00	1,400.00	100.0%
Worker's Comp. Insurance	238.64	0.00	238.64	100.0%
Professional Services	45,141.44	41,101.11	4,040.33	9.8%
Travel	996.38	972.00	24.38	2.5%
Telephone	533.94	524.26	9.68	1.9%
Total Program Coordinator	49,070.20	42,597.37	6,472.83	15.2%
Purchased Services (Databas...	450.00	650.00	-200.00	-30.8%
Office Supplies & Expense	791.48	533.39	258.09	48.4%
Other Assistance	118.00	1,182.50	-1,064.50	-90.0%
Repairs and Towing	25,159.17	23,871.18	1,287.99	5.4%
Taxi Fares	1,854.32	425.00	1,429.32	336.3%
Vehicle Fees	421.75	1,371.98	-950.23	-69.3%
Vehicle Loan Payments	3,451.39	2,323.46	1,127.93	48.6%
Workcars Down Payments	4,803.00	8,210.00	-3,407.00	-41.5%
Workcars Vehicle Fees	4,050.70	3,694.29	356.41	9.7%
Total TANF Expenses	107,335.18	103,875.64	3,459.54	3.3%
Total Expense	275,378.40	299,372.91	-23,994.51	-8.0%
Total Expense	275,378.40	299,372.91	-23,994.51	-8.0%
Net Ordinary Income	10,171.17	7,181.09	2,990.08	41.6%
Other Income/Expense				
Other Income				
Other Income/Expense				
Other Income				
Gain (Loss) Sale of Vehicles	30.00	-2,875.00	2,905.00	101.0%
Total Other Income	30.00	-2,875.00	2,905.00	101.0%
Total Other Income/Expense	30.00	-2,875.00	2,905.00	101.0%
Total Other Income	30.00	-2,875.00	2,905.00	101.0%
Net Other Income	30.00	-2,875.00	2,905.00	101.0%
Net Income	10,201.17	4,306.09	5,895.08	136.9%

WAY TO GO, INC.

FINANCIAL STATEMENTS

For the Years Ended December 31, 2017 and 2016

TABLE OF CONTENTS

INDEPENDENT ACCOUNTANT'S REVIEW REPORT	2
FINANCIAL STATEMENTS	
Statements of Financial Position	3
Statements of Activities	4
Statements of Cash Flows	5
Statement of Functional Expenses	6
Notes to Financial Statements	7-9

GRAHAM AND POIROT CPAs, LLC

Certified Public Accountants

57 South Main Street, Suite 507, Harrisonburg, Virginia 22801

Phone 540.433.2001 Fax 540.433.2277

American Institute of Certified Public Accountants Virginia Society of Certified Public Accountants

INDEPENDENT ACCOUNTANT'S REVIEW REPORT

To the Board of Directors of
Way to Go, Inc.

We have reviewed the accompanying financial statements of Way to Go, Inc. (a nonprofit organization), which comprise the Statement of Financial Position as of December 31, 2017 and 2016, and the related statements of Activities, Cash Flows, and Functional Expenses for the years then ended, and the related notes to the financial statements. A review includes primarily applying analytical procedures to management's financial data and making inquiries of management. A review is substantially less in scope than an audit, the objective of which is the expression of an opinion regarding the financial statements as a whole. Accordingly, we do not express such an opinion.

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.

Accountant's Responsibility

Our responsibility is to conduct the review engagement in accordance with Statements on Standards for Accounting and Review Services promulgated by the Accounting and Review Services Committee of the AICPA. Those standards require us to perform procedures to obtain limited assurance as a basis for reporting whether we are aware of any material modifications that should be made to the financial statements for them to be in accordance with accounting principles generally accepted in the United States of America. We believe that the results of our procedures provide a reasonable basis for our conclusion.

Accountant's Conclusion

Based on our review, we are not aware of any material modifications that should be made to the accompanying financial statements in order for them to be in accordance with accounting principles generally accepted in the United States of America.

Graham and Poirot CPAs

Graham & Poirot CPAs, LLC
Harrisonburg, Virginia
April 12, 2018

WAY TO GO, INC
STATEMENT OF FINANCIAL POSITION
FOR YEARS ENDED DECEMBER 31:

	2017	2016
ASSETS		
CURRENT ASSETS		
CASH IN BANK	$ 23,309	$ 22,339
GRANTS RECEIVABLE	10,541	5,413
VEHICLES INVENTORY	8,902	5,900
OTHER CURRENT ASSESTS	-	-
TOTAL CURRENT ASSETS	$ 42,752	$ 33,652
FIXED ASSETS		
COMPUTER EQUIPMENT	290	-
FURNITURE	7,050	-
TOTAL GROSS FIXED ASSETS	7,340	-
ACCUMULATED DEPRECIATION	(513)	-
NET FIXED ASSETS	$ 6,827	$ -
TOTAL ASSETS	**$ 49,579**	**$ 33,652**
LIABILITIES & NET ASSETS		
CURRENT LIABILITIES		
ACCOUNTS PAYABLE	$ 13,242	$ 8,308
NOTE PAYABLE	7,200	-
TOTAL CURRENT LIABILITIES	$ 20,442	$ 8,308
NET ASSETS		
UNRESTRICTED	18,103	13,310
TEMPORARILY RESTRICTED	11,034	12,034
PERMANENTLY RESTRICTED	-	-
TOTAL NET ASSETS	$ 29,137	$ 25,344
TOTAL LIABILITIES & NET ASSETS	**$ 49,579**	**$ 33,652**

WAY TO GO, INC
STATEMENT OF ACTIVITIES
FOR YEARS ENDED DECEMBER 31:

	2017	2016
SUPPORT & REVENUE:		
IN-KIND DONATIONS	$ 30,271	$ 30,046
GRANTS AND OTHER ASSISTANCE:		
TEMPORARY ASSISTANCE TO NEEDY FAMILIES (TANF)	$ 103,876	$ 93,826
UNITED WAY - UNRESTRICTED	9,159	9,655
UNITED WAY - RESTRICTED VEHICLE SUBSIDIES	6,000	5,083
CONTRIBUTIONS	153,938	83,958
OTHER INCOME	3,311	3,500
TOTAL SUPPORT & REVENUE	$ 306,555	$ 226,068
EXPENSES		
VEHICLES AWARDED	$ 18,758	$ 25,259
OTHER ADMINISTRATIVE EXPENSES	5,452	2,929
TEMPORARY ASSISTANCE FOR NEEDY FAMILIES (TANF) EXPENSES:		
REPAIRS & TOWING	$ 23,871	$ 23,573
PROGRAM COORDINATOR	42,597	32,872
INSURANCE	7,051	5,994
GASOLINE	7,650	9,142
CAB FARES	425	3,818
VEHICLE FEES	1,372	4,386
CAR PAYMENTS	10,533	10,043
VEHICLES AWARDED	3,694	2,242
OTHER	6,682	1,757
TOTAL TANF EXPENSES	$ 103,875	$ 93,827
NON - TANF EXPENSES:		
REPAIRS & TOWING	$ 34,727	$ 29,183
INSURANCE	8,513	3,451
GASOLINE	7,400	4,378
CAB FARES	393	3,021
VEHICLE FEES	3,386	4,673
CAR PAYMENTS	8,400	5,227
VEHICLE SUBSIDIES	108,947	67,527
OTHER	35	145
TOTAL NON - TANF EXPENSES	$ 171,801	$ 117,605
TOTAL EXPENSES	$ 299,886	$ 239,620
(GAIN) LOSS ON SALE OF VEHICLES	$ 2,875	$ 280
EXCESS (DEFICIT) OF SUPPORT & REVENUE OVER EXPENSES	$ 3,794	$ (13,832)
BEGINNING UNRESTRICTED NET ASSETS	$ 13,310	$ 24,825
CHANGE IN NET ASSETS:		
UNRESTRICTED	$ 3,793	$ (13,832)
UNRESTRICTED - PRIOR PERIOD ADJUSTMENT	-	2,317
TEMPORARILY RESTRICTED	1,000	(2,317)
PERMANENTALY RESTRICTED	-	-
TOTAL CHANGE IN NET ASSETS	$ 4,793	$ (13,832)
ENDING NET ASSETS:		
UNRESTRICTED	$ 18,103	$ 13,310
TEMPORARILY RESTRICTED	11,034	12,034
PERMANENTLY RESTRICTED	-	-
TOTAL ENDING NET ASSETS	$ 29,137	$ 25,344

See Accompanying Notes and Independent Accountant's Review Report

WAY TO GO, INC
STATEMENT OF CASH FLOWS
FOR YEARS ENDED DECEMBER 31:

	2017	2016
CASH FLOWS FROM OPERATING ACTIVITIES:		
NET INCOME (LOSS)	$ 3,793	$ (13,832)
DEPRECIATION EXPENSE	513	-
UNRESTRICTED - PRIOR PERIOD ADJUSTMENT	1,000	2,317
TEMPORARILY RESTRICTED	(1,000)	(2,317)
ADJUSTMENTS TO RECONCILE NET INCOME TO NET CASH PROVIDED BY OPERATING ACTIVITIES:		
DECREASE (INCREASE) IN GRANTS RECEIVABLE	(5,128)	(2,201)
DECREASE (INCREASE) IN INVENTORY	(3,002)	(1,587)
DECREASE (INCREASE) IN OTHER CURRENT ASSETS	-	-
(DECREASE) INCREASE IN ACCOUNTS PAYABLE	4,934	3,342
(DECREASE) INCREASE IN OTHER CURRENT LIABILITIES	-	-
NET CASH PROVIDED BY OPERATING ACTIVITIES	1,110	(14,278)
CASH FLOWS FROM INVESTING ACTIVITIES:		
NET CASH USED IN INVESTING ACTIVITIES	$ (7,340)	$ -
CASH FLOWS FROM FINANCING ACTIVITIES:		
NET CASH USED IN FINANCING ACTIVITIES	$ 7,200	$ -
INCREASE (DECREASE) IN CASH AND CASH EQUIVALENTS	$ 970	$ (14,278)
CASH, BEGINNING OF YEAR	22,339	36,617
CASH, END OF YEAR	**$ 23,309**	**$ 22,339**

See Accompanying Notes and Independent Accountant's Review Report

WAY TO GO
STATEMENT OF FUNCTIONAL EXPENSES
FOR THE YEARS ENDED DECEMBER 31:

	2017	2016
PROGRAM EXPENSES		
VEHICLES AWARDED	$ 18,758	$ 25,259
PROGRAM COORDINATOR	42,597	32,872
REPAIRS & TOWING	58,598	52,756
INSURANCE	15,564	9,446
VEHICLE FEES	4,758	9,059
DOWN PAYMENTS	8,210	6,882
CAR PAYMENTS	10,723	8,388
GASOLINE	15,050	13,520
CAB FARES	818	6,839
RENTAL CARS	-	-
VEHICLE SUBSIDIES	112,641	69,768
MISCELLANEOUS	6,717	1,902
TOTAL PROGRAM EXPENSES	$ 294,434	$ 236,691
MANAGEMENT & GENERAL		
MEETINGS	$ 753	$ 730
OFFICE SUPPLIES AND POSTAGE	706	488
OFFICE RENT	1,200	-
DEPRECIATION EXPENSE	513	-
PRINTING	-	63
SUPPLIES	246	284
OTHER	2,034	1,364
TOTAL MANAGEMENT & GENERAL EXPENSES	$ 5,452	$ 2,929
TOTAL EXPENSES	$ 299,886	$ 239,620

Note 1 - Nature of the Organization

Way To Go, Inc. (a not-for-profit organization) is a community coalition that helps low-income working families become more self-sufficient by assisting them with their vehicle transportation needs. The coalition accepts donated vehicles, pays for necessary repairs and awards the vehicle to an applicant on their waiting list. The coalition also helps with other vehicle costs such as insurance and title fees. Way To Go, Inc. receives considerable support from the Virginia Department of Social Services – Temporary Assistance to Needy Families (TANF) and the United Way.

Note 2 - Significant Accounting Policies

Basis of Presentation

Financial statement presentation follows the recommendations of the Financial Accounting Standards Board in its Accounting Standards Codification (ASC) No. 958. Under ASC No. 958, the Organization is required to report information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

Basis of Accounting

The financial statements of Way to Go Inc. have been prepared on the accrual basis of accounting and accordingly reflect all significant receivables, payables, and other liabilities.

Revenue Recognition

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions. All donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is when a stipulated time restriction ends or purpose restrictions is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

In-kind donations of vehicles are recorded at fair market value when received.

Temporarily restricted revenues were $6,000 in 2017, which when they occur are restricted for vehicles subsidies. Unrestricted revenues were $300,554 in 2017. Temporarily restricted revenues were $5,083 in 2016, which were restricted for vehicles subsidies. Unrestricted revenues were $220,985 in 2016.

NOTE 2 – continued

Income Tax Status
The organization is a non-for-profit organization that is exempt from income taxes under section 501 (c) (3) of the Internal Revenue Code. The organization has also been classified as an entity that is not a private foundation within the meaning of section 509 (a) and qualifies for deductible contributions as provided in Section 170(b)(1)(A)(vi).

Cash and Cash Equivalents
The organization considers all short-term investments with an original maturity of three months or less to be cash equivalents

Vehicles Inventory
Vehicles are carried at fair market value which is estimated using the Kelly Blue Book. When vehicles are charged to expense as incurred.

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

Expense Allocation
Directly identifiable expenses are charged to programs and supporting services. Expenses related to more than one function are charged to programs and supporting services on the basis of periodic time and expense studies. 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.

Depreciation Expense
During 2017, the Organization acquired used office furniture and equipment and minor computer equipment. These assets are being depreciated using straight-line over useful lives of 5 years for computer equipment and 7 years for all others.

Rent Expense
On October 17, 2017, the Organization entered into a lease with Eastham, LLC to rent office space in the lower level of the Plecker Center for Community Philanthropy. The lease is a three year term, starting on November 1, 2017 and expiring on October 31, 2020. The lease can be extended for up to three one-year terms. The rent is $400 per month and the premises is restricted to be used solely as office space. The annual rent expense for the three year term is $4,800 per year.

Note 3 – Restriction on Net Assets

Contributions received are recorded as increases in unrestricted, temporarily restricted, or permanently restricted net assets, depending on the existence and/or nature of any donor restrictions. Unrestricted net assets totaled $18,103 in 2017 and $13,310 in 2016. Temporarily restricted net assets totaled $11,034 in 2017 and $12,034 in 2016. There were no permanently restricted net assets in 2017 or 2016.

Note 4 – Temporary Assistance to Needy Families Grant (TANF)

The Temporary Assistance to Needy Families (TANF) Grant is a reimbursement grant from the Virginia Department of Social Services and is renewable on an annual basis. Through the Virginia Department of Social Services, the remaining sub-grant balance unspent is $30,928 as of December 31, 2017, and $40,366 as of December 31, 2016. These amounts are through the fiscal years ending June 30, 2018 and 2017, respectively.

Note 5 – United Way Subsidies

United Way of Rockingham and Harrisonburg provides funds for vehicle subsidies to purchase vehicles for various clients. These funds are temporarily restricted for that purpose only. The remaining balance of these subsidies as of December 31, 2017 was $11,034, and as of December 31, 2016 was $12,034. These amounts are disclosed as a portion of net assets listed on the balance sheet.

Note 6 – Short-term Note Payable

The Organization president, Betty Newell, has provided a temporary source of financing in the form of an unsecured $7,200 loan bearing an annual interest rate of 1%. This note is expected to be paid soon after the Great Community Give on April 18, 2018. The financing was provided to meet temporary short term cash flow needs of the Organization.

Note 6 - Management's Review

Management has evaluated subsequent events through April 12, 2018, the date on which the financial statements were available to be issued.

Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047

2017

Open to Public Inspection

A For the 2017 calendar year, or tax year beginning and ending

B Check if applicable:
- [X] Address change
- [ ] Name change
- [ ] Initial return
- [ ] Final return/terminated
- [ ] Amended return
- [ ] Application pending

C Name of organization: WAY TO GO, INC.

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): P O BOX 946 | Room/suite

City or town, state or province, country, and ZIP or foreign postal code: HARRISONBURG, VA 22803

D Employer identification number: 61-1487268

E Telephone number: (540) 705-6201

G Gross receipts $ 306,554.

F Name and address of principal officer: Betty L. Newell
3142 Lanier Lane Mc Gaheysville, VA 22840

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

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

H(c) Group exemption number ▶

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c)( )◀ (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: ▶www.w2ginc.com

K Form of organization: [X] Corporation [ ] Trust [ ] Association [ ] Other ▶

L Year of formation: 2005

M State of legal domicile: VA

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
We assist low-income employed individuals and families with transportation assistance.

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

3	Number of voting members of the governing body (Part VI, line 1a)	3	14
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	14
5	Total number of individuals employed in calendar year 2017 (Part V, line 2a)	5	0
6	Total number of volunteers (estimate if necessary)	6	35
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
b	Net unrelated business taxable income from Form 990-T, line 34	7b	0.

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	133,766.	178,647.
	9	Program service revenue (Part VIII, line 2g)	91,301.	126,596.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,000.	1,311.
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	226,067.	306,554.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	203,818.	250,288.
	14	Benefits paid to or for members (Part IX, column (A), line 4)		
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	36,081.	51,960.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	239,899.	302,248.
	19	Revenue less expenses. Subtract line 18 from line 12	-13,832.	4,306.
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	33,652.	50,092.
	21	Total liabilities (Part X, line 26)	8,308.	20,442.
	22	Net assets or fund balances. Subtract line 21 from line 20	25,344.	29,650.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

▶ Signature of officer | Date

▶ WILLIAM J. TROYER, TREASURER
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [ ] if self-employed	PTIN

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no.

May the IRS discuss this return with the preparer shown above? (see instructions) [ ] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions.

UYA

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

Empowering low-income, working families to improve their quality of life by assisting them with their transportation needs.

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

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . . ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 155,090. including grants of $) (Revenue $)

Assisted low-income employed individuals to obtain vehicles through grants for down payments and payments of DMV fees; make loan payments for individuals who were delinquent on existing car loans; and award used vehicles from vehicles donated to us.

4b (Code:) (Expenses $ 58,598. including grants of $) (Revenue $)

Assisted low-income employed individuals with repairs to their vehicles.

4c (Code:) (Expenses $ 36,599. including grants of $) (Revenue $)

Assisted low-income employed individuals with vehicle-related expenses other than repairs, such as gas, insurance, temporary transportation such as bus and taxi fares, and driving school education.

4d Other program services (Describe in Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses ▶ 250,287.

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 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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or 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.			
a	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		X
c	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
e	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		X
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 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 foreign organization? *If "Yes," complete Schedule F, Parts II and IV*	15		X
16	Did the organization report on Part IX, column (A), line 3, more than $5,000 of aggregate grants or other assistance to 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, column (A), lines 6 and 11e? *If "Yes," complete Schedule G, Part I* (see instructions)	17		X
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 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," complete Schedule G, Part III*	19		X

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		X
b	If "Yes," to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	21		X
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	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
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		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *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, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	26	X	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	28b		X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *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
35a	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		
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 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? **Note.** All Form 990 filers are required to complete Schedule O	38	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 1			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		1c		
2 a	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 0			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?		2b		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to *e-file* (see instructions)				
3 a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*		3b		
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		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 Accounts (FBAR).				
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		5c		
6 a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d 0			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		X
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h	X	
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		X
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12 a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	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 organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14 a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*		14b		

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 in 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	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	14		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.				
b	Enter the number of voting members included in line 1a, above, who are independent	1b	14		
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			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	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			X
7 a	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:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O.*	9			X

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

			Yes	No
10 a	Did the organization have local chapters, branches, or affiliates?	10a		X
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		
11 a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		X
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12 a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13		X
14	Did the organization have a written document retention and destruction policy?	14		X
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a		X
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16 a	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		X
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		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed ▶

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[X] Own website [X] Another's website [X] Upon request [ ] Other *(explain in Schedule O)*

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records: ▶ (540) 908-0142
William J. Troyer 2280 Lake Terrace Dr. Harrisonburg, VA 22802

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definintion of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than $100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) Betty L Newell President	15	X		X						
(2) Sherry Cline Vice-President	1	X		X						
(3) Lori Petrie Secretary	1	X		X						
(4) William J Troyer Treasurer	3	X		X						
(5) Seth Blanchard Director	1	X								
(6) Jessica Clegg Director	1	X								
(7) Ashley Cromer Director	1	X								
(8) Rachel Lewis Director	1	X								
(9) Joshua Montanez Director	1	X								
(10) Patricia Potter Director	1	X								
(11) Rebecca Price Director	1	X								
(12) Shirley Sheets Director	1	X								
(13) Rhonda Taylor Director	1	X								
(14) Andy Bolt Director	1	X								

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee): Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
1b Sub-total ▶										
c Total from continuation sheets to Part VII, Section A ▶										
d Total (add lines 1b and 1c) ▶										

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶

Part VIII Statement of Revenue

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	178,647.				
	g Noncash contributions included in lines 1a-1f: $ 23,221.						
	h Total. Add lines 1a–1f. ▶			178,647.			
Program Service Revenue			Business Code				
	2a Reimbursements from						
	b Social Services			126,596.	126,596.		
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f ▶			126,596.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts) ▶						
	4 Income from investment of tax-exempt bond proceeds ▶						
	5 Royalties ▶						
		(i) Real	(ii) Personal				
	6a Gross rents						
	b Less: rental expenses						
	c Rental income or (loss)						
	d Net rental income or (loss) ▶						
		(i) Securities	(ii) Other				
	7a Gross amount from sales of assets other than inventory						
	b Less: cost or other basis and sales expenses						
	c Gain or (loss)						
	d Net gain or (loss) ▶						
	8a Gross income from fundraising events (not including $ _____ of contributions reported on line 1c). See Part IV, line 18	a	461.				
	b Less: direct expenses	b					
	c Net income or (loss) from fundraising events ▶			461.			
	9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities ▶						
	10a Gross sales of inventory, less returns and allowances	a					
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales inventory ▶						
	Miscellaneous Revenue		Business Code				
	11a Credit Card Rewards			850.			850.
	b						
	c						
	d All other revenue						
	e Total. Add lines 11a-11d ▶			850.			
	12 Total revenue. See instructions ▶			306,554.	126,596.		850.

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22	250,288.	250,288.		
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, trustees, and key employees				
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				
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits				
10 Payroll taxes				
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	1,750.		1,750.	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	41,101.	34,936.	6,165.	
12 Advertising and promotion				
13 Office expenses	2,512.	1,653.	859.	
14 Information technology	650.		650.	
15 Royalties				
16 Occupancy	1,200.		1,200.	
17 Travel	972.	826.	146.	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	140.	140.		
21 Payments to affiliates				
22 Depreciation, depletion, and amortization				
23 Insurance	236.		236.	
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Telephone	524.	445.	79.	
b Losses on sales of unusable				
c donated vehicles	2,875.	2,875.		
d				
e All other expenses				
25 **Total functional expenses.** Add lines 1 through 24e	302,248.	291,163.	11,085.	
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)				

Part X Balance Sheet

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

			(A) Beginning of year		(B) End of year
Assets	1	Cash — non-interest-bearing	22,339.	1	23,108.
	2	Savings and temporary cash investments		2	200.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	5,413.	4	10,542.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	5,900.	8	8,902.
	9	Prepaid expenses and deferred charges		9	
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D — 10a 7,340.			
	b	Less: accumulated depreciation — 10b		10c	7,340.
	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		14	
	15	Other assets. See Part IV, line 11		15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	33,652.	16	50,092.
Liabilities	17	Accounts payable and accrued expenses	8,308.	17	13,242.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	7,200.
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	**Total liabilities.** Add lines 17 through 25	8,308.	26	20,442.
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☒ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	13,310.	27	18,616.
	28	Temporarily restricted net assets	12,034.	28	11,034.
	29	Permanently restricted net assets		29	
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	25,344.	33	29,650.
	34	Total liabilities and net assets/fund balances	33,652.	34	50,092.

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	306,554.
2	Total expenses (must equal Part IX, column (A), line 25)	2	302,248.
3	Revenue less expenses. Subtract line 2 from line 1	3	4,306.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	25,344.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	29,650.

Part XII Financial Statements and Reporting

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

			Yes	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	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: ☒ 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: ☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c		
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	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 in Schedule O and describe any steps taken to undergo such audits.	3b		

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: WAY TO GO, INC.

Employer identification number: 61-1487268

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

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

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____

10 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions–subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations . . . . . ☐

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

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

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

UYA

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	130,024.	101,047.	128,423.	225,067.	305,243.	889,804.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	130,024.	101,047.	128,423.	225,067.	305,243.	889,804.
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.						889,804.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7 Amounts from line 4	130,024.	101,047.	128,423.	225,067.	305,243.	889,804.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	350.	1,777.	1,637.	1,000.	1,311.	6,075.
11 **Total support.** Add lines 7 through 10						895,879.

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

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 99.32%

15 Public support percentage from 2016 Schedule A, Part II, line 14 15 99.41%

16a **33 1/3 % support test–2017.** If the organization did not check the box on line 13, and line 14 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3 % support test–2016.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3 % or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test–2017.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test–2016.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 **Total support.** (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15	Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f))	15	%
16	Public support percentage from 2016 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2017** (line 10c, column (f) divided by line 13, column (f))	17	%
18	Investment income percentage from **2016** Schedule A, Part III, line 17	18	%

19a **33 1/3 % support test–2017.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3 %, and line line 17 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3 % support test–2016.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3 %, and line 18 is not more than 33 1/3 %, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

(Complete only if you checked a box 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

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

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	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		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *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		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *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		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	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		

Section E. Type III Functionally Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (****see instructions****):*

a ☐ The organization satisfied the Activities Test. *Complete* ***line 2*** *below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete* ***line 3*** *below.*

c ☐ The organization supported a governmental entity. *Describe in* ***Part VI*** *how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. ***Answer (a) and (b) below.***			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *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. ***Answer (a) and (b) below.***			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in* ***Part VI.***	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* ***Part VI*** *the role played by the organization in this regard.*	3b		

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

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

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

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

7 ☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

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

Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required-explain in **Part VI**). See instr.			
3	Excess distributions carryover, if any, to 2017:			
a				
b	From 2013			
c	From 2014			
d	From 2015			
e	From 2016			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount			
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2017 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	**Excess distributions carryover to 2018.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			
c	Excess from 2015			
d	Excess from 2016			
e	Excess from 2017			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

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

2017

Name of the organization	Employer identification number
WAY TO GO, INC.	61-1487268

Organization type (check one):

Filers of:	**Section:**
Form 990 or 990-EZ	☒ 501(c)(3) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☐ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

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

General Rule

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

Special Rules

☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 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-EZor 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).

Name of organization: WAY TO GO, INC.

Employer identification number: 61-1487268

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	Virginia Dep't of Social Services 801 E. Main Street Richmond, VA 23219-2901	$ 103,876.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2	United Way-Harrisonburg/Rockingham 100 S. Mason Street Harrisonburg, VA 22801	$ 15,159.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3	DONOR WISHES TO REMAIN ANONYMOUS P O Box 946 Harrisonburg, VA 22803	$ 13,000.	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

Name of organization: WAY TO GO, INC.

Employer identification number: 61-1487268

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

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

(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
		$	

Name of organization: WAY TO GO, INC.

Employer identification number: 61-1487268

Part III ***Exclusively*** **religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor.** Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4	Relationship of transferor to transferee

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: WAY TO GO, INC.

Employer identification number: 61-1487268

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

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

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

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

Part II Conservation Easements.

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

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

☐ Preservation of land for public use (e.g., recreation or education)
☐ Protection of natural habitat
☐ Preservation of open space
☐ Preservation of historically important land area
☐ Preservation of a certified historic structure

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements.

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

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII. ☐

Part V Endowment Funds.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment ▶ _____%
b Permanent endowment ▶ _____%
c Temporarily restricted endowment ▶ _____%

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) unrelated organizations	3a(i)		
(ii) related organizations	3a(ii)		
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organizaton's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	7,340.			7,340.
e Other				
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* ▶				7,340.

Part VII Investments — Other Securities.

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

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

Part VIII Investments — Program Related.

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

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

Part IX Other Assets.

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* ▶	

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* ▶	

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a			
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	
5	Total revenue. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 12.)*			5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines 2a through 2d			2e	
3	Subtract line 2e from line 1			3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines 4a and 4b			4c	
5	Total expenses. Add lines 3 and 4c. *(This must equal Form 990, Part I, line 18.)*			5	

Part XIII Supplemental Information.

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

Part XIII Supplemental Information (continued)

SCHEDULE I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization
WAY TO GO, INC.

Employer identification number
61-1487268

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . ☒ Yes ☐ No

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . ▶ 0

3 Enter total number of other organizations listed in the line 1 table . . . ▶ 0

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

UYA

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
1 Vehicle operating expense	172		250,288.		Repairs, insurance, gas
2					
3					
4					
5					
6					
7					

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

Part 1,Line 2 Detailed records are maintained by client listing all

Part 1,Line 2 services provided with descriptions, dates,amounts, and

Part 1,Line 2 the social workers making the referrals.

Part III,Col b See Part III of 990 for more details of assistance

SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions With Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2017
Open To Public Inspection

Name of the organization: WAY TO GO, INC.

Employer identification number: 61-1487268

Part I **Excess Benefit Transactions** (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only).
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b.

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected? Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958. . . . . ▶ $

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization. . . . . ▶ $

Part II **Loans to and/or From Interested Persons.**
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22.

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization? To	From	(e) Original principal amount	(f) Balance due	(g) In default? Yes	No	(h) Approved by board or committee? Yes	No	(i) Written agreement? Yes	No
(1) Betty Newell	President	Oper Fds	X		7,200.	7,200.		X	X		X	
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)												
(9)												
(10)												
Total . . . . . ▶ $						7,200.						

Part III **Grants or Assistance Benefiting Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				

Part IV **Business Transactions Involving Interested Persons.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					

Part V **Supplemental Information**
Provide additional information for responses to questions on Schedule L (see instructions).

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization: WAY TO GO, INC.

Employer identification number: 61-1487268

VI, LINE 11b
Form 990 is reviewed by the officers of the organization
VI, LINE 11b
before the return is filed.
VI, LINE 12 c
The organization engages local repair shops, insurance
VI, LINE 12 c
agents and car dealers to provide program services. None
VI, LINE 12 c
of the directors or officers, or individuals related to
VI, LINE 12 c
directors or officers are owners of these providers.

Name of the organization: WAY TO GO, INC.

Employer identification number: 61-1487268

Part VI Line 11b
See Schedule O

Part VI Line 12c
See Schedule O

Part VI Line 19
We received no requests for organizational documents.

Part IX Line 11g
Program Coordinator Total expenses - $41101.00 Program service expenses - $34936.00 Mgmt and general expenses - $6165.00 Fundraising expenses - $0.00

Mail: P.O. Box 946, Harrisonburg, VA 22803
Office: 317 S. Main Street, Harrisonburg, VA 22801
(p): 540-289-7171
(f): 540-208-7496
blnewell@verizon.net

January 30, 2019

To: City of Harrisonburg
From: Betty L. Newell, President, Board of Directors
Re: Request for tax exempt status – personal property tax

Attached is an application and supporting documentation requesting that the City of Harrisonburg designate Way to Go, Inc. as exempt from personal property taxes. To fulfill our mission of keeping low-income working families mobile so they can remain employed, we receive 10-20 vehicles each year as donations from the community – mostly from individuals, but occasionally from a business. We evaluate these vehicles and, whenever possible, award them to hard working Harrisonburg and Rockingham County residents who need a vehicle to get to work. We "turn over" most vehicles fairly quickly, but we still get "caught up" in the January 1 ownership policy which results in our being billed for personal property taxes.

Prior to November 2017, we had a Rockingham County address and the County did designate us as tax exempt in February 2017. Since we have since moved into our office in the Eastham House with The Community Foundation, we are asking you to also approve a tax-exempt status for us. This will allow us to use our funding for direct client services.

As instructed on the application form, a check for $50 is included.

I believe this application is complete, but please contact me at (540) 289-7171 or at blnewell@verizon.net if you need further information or clarification.

We understand you will hold a public hearing on this request and ask that you notify us of this date and time.

Thank you for considering our request.

cc: Ben Craig

City of Harrisonburg, Virginia

CM2019005

Treasurer's Office Advice/Receipt

(This is not a Customer Receipt)

Make Checks Payable and Remit To:
Harrisonburg City Treasurer
409 South Main Street
Harrisonburg, Virginia 22801

Payment Due: 0

Customer: **Way to Go, Inc.**

Department	Date	Receipt Code	Description	Amount
CMO	1/31/2019	GF 1901	Application for Tax Exemption	50.00
			Total	50.00

PAID # 6
JAN 31 2019
JEFFREY L. SHAFER
HARRISONBURG CITY TREASURER

Aimee Londeree
Print Name