DLN: 93493132027067

OMB No 1545-0047

Department of the Treasury Internal Re

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
 ▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

Return of Organization Exempt From Income Tax

TICCITIC	-								
			lendar year, or tax year begini C Name of organization	ning 07-01-2015 , and ending 06-30	-2016		D Emple	war id	entification number
	ck if app dress ch		UNITED WAY OF NEW YORK CITY	•			•	•	
<u>. </u>	me chai	-					13-2	61768	31
	tıal retui	-	Doing business as			L			
Fi	nal terminat	tod	Number and street (or P O box if	f mail is not delivered to street address) Roo	m/suite		E Teleph	one nui	mber
	ended re		205 EAST 42ND STREET	(212)	251-	2431			
Ap	olication	pending		ountry, and ZIP or foreign postal code					
			NEW YORK, NY 10017				G Gross	receipts	s \$ 72,077,947
			F Name and address of prince OSCAR RAPOSO	cıpal officer	H(a	a) Is this	a group	retur	n for
			205 EAST 42ND STREET			subord No	linates?		⊤ Yes 🗸
			NEW YORK, NY 10017		— н(і	b) Are all	subord	ınates	Yes No
[la:	c-exemp	ot status	✓ 501(c)(3)	4 (Insert no) 4947(a)(1) or 527		include		. a liet	(see instructions)
W	ebsite:	.► ww	W UNITEDWAYNYC ORG		H(c	c) Group			,
(Forr	n of orga	anızatıon	✓ Corporation Trust Asso	ociation Other ►	L	Year of form	nation 19	968 I	M State of legal domicile NY
Рa	rt I	Sum	mary						
				on or most significant activities					
Governance	CO BA FU' O F U N CO	MMUN SED IN TURE UNITE IITED N	ITTY-BASED NON-PROFITS T NITIATIVES THAT ENSURE L WE RIGOROUSLY EVALUATE ED WAYS TO INFORM AND A WAY OF NEW YORK CITY FOS TVELY WITH A CONSORTIU	IQUELY WORKS WITH BUSINESS, OF TACKLE THE ROOT CAUSES OF LOW-INCOME NEW YORKERS ARE AS OUR WORK AND USE LESSONS LED AND EFFE TO THE ASSOCIATION OF	POVERTABLE TO EARNED PREVEN CTIVE NO	TY WE DE MEET BA TO LEVEI TAND AL ON-PROF	SIGN A SIC NE RAGE A LEVIA TIT SEC	ND II EDS A WOR TE PO TOR I	NVEST IN EVIDENCE- AND BUILD A BETTER LDWIDE NETWORK VERTY CITYWIDE BY WORKING
	_								
ජ ഗ	2 CI	heck th	us box ▶ ☐ If the organization	discontinued its operations or dispo	sed of mo	re than 25	5% of its	s net a	assets
Activities &			1	·					
<u>ا</u>			5	rning body (Part VI, line 1a)			•	3	36
٩				s of the governing body (Part VI, line	•		•	4	36
			, ,	n calendar year 2015 (Part V , line 2a	1)		•	5	113
				necessary)			•	6 7a	2,974
				from Form 990-T, line 34			·	7b	0
				·		Prior	Year		Current Year
	8	Contri	butions and grants (Part VIII,	, line 1h)	. 🗀	į	56,497,	449	61,875,439
ēΝ	9	Progra	am service revenue (Part VIII	, line 2g)	🗀		485,	483	330,597
Rəvenuə	10	Invest	tment income (Part VIII, colui	mn (A), lines 3, 4, and 7d)			486,	734	433,978
ď	11	Other	revenue (Part VIII, column (A	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0			67,649
	12	Total (revenue—add lines 8 through 1	11 (must equal Part VIII, column (A)), line	ŗ	57,469,	666	62,707,663
	13		s and similar amounts paid (Pa	art IX, column (A), lines 1-3)	_		39,568,	454	46,230,581
	14		• •	t IX, column (A), line 4)			,,,,,,,,	0	0
	15		·	byee benefits (Part IX, column (A), lir	_		8,493,	024	10,502,569
Expenses		5-10)	•						
æ	16a		- ·	IX, column (A), line 11e)	· ·		160,	000	226,750
Ä	Ь		indraising expenses (Part IX, column		- -				
	17), lines 11a-11d, 11f-24e)		r	7,080,		6,946,812
	18 19			nust equal Part IX, column (A), line 2 ne 18 from line 12	· —		55,302, 2,167,		63,906,712
, o	13	KCVCII	ide 1633 expelises Subtract III	10 10 110 111 111 11 11 11 11 11 11 11 1					
Net Assets or Fund Balances					Bei	ginning of	Current	Year	End of Year
ASS. Bal	20		assets (Part X, line 16)		· _		36,674,		36,693,033
	21		liabilities (Part X, line 26) .		• • ⊢		23,924,		27,602,315
	22 t II		ature Block	ct line 21 from line 20	•	-	12,749,	895	9,090,718
Jnde ny kr	r penal nowledg	ties of ge and	perjury, I declare that I have ϵ	examined this return, including accon omplete Declaration of preparer (oth					•
		Sign	ature of officer			201 Date	7-05-12		
Sign Here		, -				Date	-		
1616	•		EVP & CFOO						
			Print/Type preparer's name	Preparer's signature	Date	Charl		PTIN	
Paid		R	ROBERT LYONS	ROBERT LYONS	1			L P002	27472
- aic	1	L_		NOBERT ETONS			mployed		
	ı parer	「 ⊢	Firm's name ► MARKS PANETH LLP Firm's address ► 685 THIRD AVENUE			Firm's	mployed s EIN ► 1 e no (21)	1-3518	

NEW YORK, NY 10017

May the IRS discuss this return with the preparer shown above? (see instructions)

Par	t 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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2	2	Yes	
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		No
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	Yes	
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		No
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	Yes	
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
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		No
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	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	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		No
	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	11 c	1	No
	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 2	11 d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
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	11 f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12 a	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
15	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
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	Yes	
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	Yes	
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		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules (continued) Yes 21

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

- Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or

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," 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

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

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?

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

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I.

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

- domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II . . .
- 22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part
- Yes

22

23

24a

24b

24c

24d

25a

25b

26

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28a

28h

28c

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35a

35b

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Yes

Form 990 (2015)

Yes

- Yes

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Part V	Statements	Regarding	Other II	RS Filinas	and Tax	Compliance

Pai	t V	Statements Regarding Other IRS Filings and Tax Complianc		\/			
		Check if Schedule O contains a response or note to any line in this	Part	<u>v</u>	, ,	Yes	· \
1a	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	90			
b	Enter	the number of Forms W-2G included in line 1a Enter -0 - if not applicable	1b	0			
c		ne organization comply with backup withholding rules for reportable payments to ng (gambling) winnings to prize winners?		dors and reportable	1 c		
2a	Enter Tax S	the number of employees reported on Form W-3, Transmittal of Wage and Statements, filed for the calendar year ending with or within the year covered is return	2a	113			
b	, If at l	east one is reported on line 2a, did the organization file all required federal emp If the sum of lines 1a and 2a is greater than 250, you may be required to e-file	oloym	ent tax returns?	2b	Yes	
3a		ne organization have unrelated business gross income of \$1,000 or more durin		·	3a		No
b	If "Ye	es," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanati</i>	on in S	Schedule O	3b		
4a	over,	y time during the calendar year, did the organization have an interest in, or a si a financial account in a foreign country (such as a bank account, securities acc unt)?			4a		No
b	If "Ye See II (FBAI	es," enter the name of the foreign country <u> </u>	k and	Financial Accounts			
5a	Was t	the organization a party to a prohibited tax shelter transaction at any time durin	ng the	tax year?	5a		No
b	Dıd a	ny taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		No
С	If"Ye	es," to line 5a or 5b, did the organization file Form 8886-T?					
6a		the organization have annual gross receipts that are normally greater than \$10 instance of the contributions that were not tax deductible as charitable contributions.			5c 6a		No
b	If"Ye	es," did the organization include with every solicitation an express statement the not tax deductible?			6b		
7		nizations that may receive deductible contributions under section 170(c).					
а		ne organization receive a payment in excess of \$75 made partly as a contributices provided to the payor?		d partly for goods and	7a	Yes	
b	If"Y€	es," did the organization notify the donor of the value of the goods or services p	rovide	ed?	7 b	Yes	
	file Fo	ne organization sell, exchange, or otherwise dispose of tangible personal proper orm 8282?		which it was required to	7 c		No
d	If"Y∈	es," indicate the number of Forms 8282 filed during the year	7d				
e	Did th	ne organization receive any funds, directly or indirectly, to pay premiums on a p	ersor	nal benefit contract?	7e		No
f	Did th	ne organization, during the year, pay premiums, directly or indirectly, on a perso	onal b	enefit contract?	7f		No
g	If the requi	organization received a contribution of qualified intellectual property, did the ored?	rganız • •	zation file Form 8899 as	7 g		
h		organization received a contribution of cars, boats, airplanes, or other vehicles	s, dıd •	the organization file a	7h		
8	Did a	soring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bu g the year?	sines:	s holdings at any time	8		No
9a	Did th	ne sponsoring organization make any taxable distributions under section 4966	?.		9a		No
b	Did th	ne sponsoring organization make a distribution to a donor, donor advisor, or rela	ated p	erson?	9b		No
10	Section	on 501(c)(7) organizations. Enter		_			
а	Initia	tion fees and capital contributions included on Part VIII, line 12	10 a				
b	Gross facilit	s receipts, included on Form 990, Part VIII, line 12, for public use of club ties	10b				
		on 501(c)(12) organizations. Enter		l			
		s income from members or shareholders s income from other sources (Do not net amounts due or paid to other sources	11a				
D		st amounts due or received from them)	11b				
		on 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990) in lie	eu of Form 1041?	12a		
b	If "Ye year	es," enter the amount of tax-exempt interest received or accrued during the	12 b				
13	•	on 501(c)(29) qualified nonprofit health insurance issuers.		1			
а		e organization licensed to issue qualified health plans in more than one state? N ional information the organization must report on Schedule O	lote. S	See the instructions for	13a		
	ın whi	the amount of reserves the organization is required to maintain by the states ich the organization is licensed to issue qualified health plans	13b				
		the amount of reserves on hand	13 c			ļ	
		ne organization receive any payments for indoor tanning services during the tax			14a		No
b	If"Y∈	es," has it filed a Form 720 to report these payments? <i>If "No," provide an expla</i> na	ation ir	Schedule O	14b		

orm	990 (2015)			Page 6
Par	t VI Governance, Management, and Disclosure			
	For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b,	or 10	ib belo	w,
	describe the circumstances, processes, or changes in Schedule O. See instructions.			
Se	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>	• •	🗸
<u> </u>	ction At Governing Body and Hanagement		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax			
	year 1a Manuscr of Young Members of the governing sou, at the that of the tax 36			
	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			
U	Independent 1b 15 Included in the 1a, above, who are			
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		No
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		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was			-
7	filed?	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			_
	more members of the governing body?	7a		No
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		No
۰	or persons other than the governing body?			
•	year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal F	evenu		(e.)
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing			
	the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give			
	rise to conflicts?	12b	Yes	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16 a		No
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		
Se	ction C. Disclosure			
	List the States with which a copy of this Form 990 is required to be filed▶			
	NY,NJ,CT,AL,AK,AR,CA,CO,I			
	KS , KY , ME , MD , MI , MN , MS , NH , OK , OR , PA , RI , SC , TX , UT , VA , V			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)		. ,	
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply			
	Own website			
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

State the name, address, and telephone number of the person who possesses the organization's books and records •GINA GOODENOW CONTROLLER 205 EAST 42ND STREET NEW YORK, NY 10017 (212) 251-4042 Part VII

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

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 - in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) A verage hours per week (list any hours	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	organization and related organizations
See Additional Data Table										

organizations [중 글 등 육 [褒 글 글 호	(F) stimated unt of ot npensati from the	am: co	(E) Reportable compensation from related organizations (W-		(D) Reportable compensation from the organization (W- 2/1099-MISC)	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(B) Average hours per week (list any hours	(A) Name and Title	
1b Sub-Total	nızatıon related anızatıo		ISC)			Former	Highest compensated employee	key employee	Officer	Institutional Trustee	Individual trustee or director	organizations below		
c Total from continuation sheets to Part VII, Section A														Additional Data Table
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A														
c Total from continuation sheets to Part VII, Section A							Ш							
	163,		0		56	1,799,2		. •		· ·	Α.	ection A	s to Part VII, S	Total from continuation sheet
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► 18				nan	more th	o received r	/e) wh	d abov						

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

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

(A) Name and business address	(B) Description of services	(C) Compensation
SAFIR & ASSOCIATES LLC	CAPACITY BUILDING	261,500
1394 BARROWS AVENUE OAKLAND, CA 94610		
THE TASC GROUP LLC	MARKETING & COMMUNICATION	170,565
153 WEST 27TH STREET STE 405 NEW YORK, NY 10001		
WENDY FLEISCHER	CHANGE CAPITAL FUND COORDINATOR	160,870
674 CARROLL STREET 4 BROOKLYN, NY 11215		
SUZETTE HUNTE	STRATEGIC LEADERSHIP	156,000
327 MACDONOUGH ST BROOKLYN, NY 11223		
ATAPE GROUP LLC	INSTRUCTIONAL LEADERSHIP	147,500
555 KAPPOCK ST BRONX, NY 10463		

Form 99								Page 9
Part V	/	Statement o						_
		Check If Schedi	ıle O contaıns a respor	ise or note to any lin	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
× τ.	1a	Federated camp	paigns 1a	27,249,436				
rant	ь	Membership du	es 1b					
s. Gl	C	Fundraising eve	ents 1 c	2,585,205				
Gifts Iar	d	Related organiz	ations 1d	7,549				
ns, (Simi	e	Government grants	s (contributions) 1e	26,115,256				
tributions, Gifts, Grants Other Similar Amounts	f	All other contribution similar amounts no	ons, gifts, grants, and 1f it included above	5,917,993				
ij Oth	g	Noncash contribution	ons included in lines	204,800		İ		
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines	s 1a-1f		61,875,439			
<u> </u>				Business Code				
Program Service Revenue	2a	CAMPAIGN FEES		900099	330,597	330,597		
	b c							
	d							
	e							
grar	f	All other progra	ım service revenue					
Ĕ	g	Total. Add lines	s 2a-2f		330,597			
	3	Investment inc	ome (including dividend	ds, interest,	267,684			267,684
	4		tment of tax-exempt bond p	proceeds ►				
	5	Royalties		•				
	6a	Gross rents	(ı) Real	(II) Personal				
	h b	Less rental						
	ر ا	expenses Rental income						
	d	or (loss)	me or (loss)					
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	9,082,611					
	ь	Less cost or other basis and	8,916,317					
	c	sales expenses Gain or (loss)	166,294					
	d		s)		166,294			166,294
Other Revenue	8a	Gross income fi events (not incl \$ 2,585 of contributions See Part IV, lin	luding ,205 reported on line 1c)					
her	.		a	453,967				
O T	l b		penses b loss)from fundraising e	453,967 events >	o			
	9a		rom gaming activities	,				
	ь	Less direct ex	penses b					
	С	Net income or (loss) from gaming activ	vities				
	10a	Gross sales of returns and allo		-				
	ь	_	oods sold b	antory				
	C	Miscellaneous	loss) from sales of inve Revenue	Business Code				
	11a	OTHER REVEN	UE	900099	67,649			67,649
	ь							
	C	A 11						
	d e	All other revenu	ı	•				
	12		See Instructions		67,649			
					62,707,663	330,597	0	501,627

Part IX Statement of Functional Expenses

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

		uns raitix			
	ot include amounts reported on lines 6b, o, 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	45,965,760	45,965,760		
2	Grants and other assistance to domestic individuals See Part IV, line 22	264,821	264,821		
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	1,277,033	300,796	698,216	278,021
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	7,298,755	2,620,298	3,057,110	1,621,347
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	153,712	56,417	64,191	33,104
9	Other employee benefits	1,138,782	405,870	497,513	235,399
10	Payroll taxes				
		634,287	223,887	278,845	131,555
11	Fees for services (non-employees)				
a	Management	05.420		05 420	
b	Legal	96,438		96,438	
c	Accounting				
d	Lobbying	226 750			226 750
e	Professional fundraising services See Part IV, line 17	226,750		74 000	226,750
f -	Investment management fees	71,899		71,899	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,676,915	425,910	1,093,411	157,594
12	Advertising and promotion	74,356	19,982	17,354	37,020
13	Office expenses	397,141	98,743	115,053	183,345
14	Information technology				_
15	Royalties				
16	Occupancy	1,674,091	650,214	633,506	390,371
17	Travel	104,316	52,179	32,133	20,004
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	267,018	71,460	151,207	44,351
20	Interest	633,130	245,906	239,588	147,636
21	Payments to affiliates	387,306	122,899	264,407	
22	Depreciation, depletion, and amortization	463,814	174,993	175,629	113,192
23	Insurance	196,590	76,355	74,393	45,842
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)				
а	CAMPAIGN EVENTS	450,577	90,319	108,291	251,967
b	EQUIP RENTALS & EXP	330,405	106,339	145,671	78,395
c	DUES & SUBSCRIPTIONS	87,648	22,935	31,775	32,938
d	TELEPHONE	35,168	18,118	10,130	6,920
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	63,906,712	52,014,201	7,856,760	4,035,751
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 She
	Check if Schedu

					(A)		(B)
		Cook and interest because			Beginning of year 963,602	1	End of year 954.091
	1	Cash-non-interest-bearing			424,722		3,921,884
	2	Savings and temporary cash investments		13.491.294	3	10,321,522	
	3	Pledges and grants receivable, net		13,491,294		10,321,522	
	4	Accounts receivable, net				4	
	5	Loans and other receivables from current and former office employees, and highest compensated employees. Consider the compensated employees.		5			
Assets	6	Loans and other receivables from other disqualified pers section 4958(f)(1)), persons described in section 4958 contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations (see ins II of Schedule L					
\$\$ (6	
Ä	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			939, 127	9	981,900
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	10,622,587			
	b	Less accumulated depreciation	10b	1,287,816	9,602,303	10 c	9,334,771
	11	Investments—publicly traded securities			10,291,307	11	9,458,295
	12	Investments—other securities See Part IV, line 11 .			459,908	12	1,265,261
	13	Investments—program-related See Part IV, line 11 .				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			501,759	15	455,309
	16	Total assets.Add lines 1 through 15 (must equal line 34)		36,674,022	16	36,693,033
	17	Accounts payable and accrued expenses			2,210,185	17	3,262,529
	18	Grants payable			5,729,538	18	7,695,730
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV	of Sche	dule D		21	

 Liabilities
<u>ر</u>

	12	Investments—other securities See Part IV, line II	459,908	12	1,265,261
	13	Investments—program-related See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets See Part IV , line 11	501,759	15	455,309
	16	Total assets.Add lines 1 through 15 (must equal line 34)	36,674,022	16	36,693,033
	17	Accounts payable and accrued expenses	2,210,185	17	3,262,529
	18	Grants payable	5,729,538	18	7,695,730
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
_iabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
<u>.</u>		persons Complete Part II of Schedule L		22	
Ë	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	10,522,642	24	10,587,750
	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			
			5,461,762	25	6,056,306
	26	Total liabilities.Add lines 17 through 25	23,924,127	26	27,602,315
Fund Balances		Organizations that follow SFAS 117 (ASC 958), check here ▶ ines 27 through 29, and lines 33 and 34.			
<u>la</u>	27	Unrestricted net assets	5,545,457	27	2,080,265
æ	28	Temporarily restricted net assets	3,878,434	28	4,683,510
Ē	29	Permanently restricted net assets	3,326,004	29	2,326,943
ō		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
ets	30	Capital stock or trust principal, or current funds		30	
Net Assets	31	Paid-in or capital surplus, or land, building or equipment fund		31	
t A	32	Retained earnings, endowment, accumulated income, or other funds		32	
	1				
${\sf S}_{\sf e}$	33	Total net assets or fund balances	12,749,895	33	9,090,718

32 Retained earnings, endowment, accumulated income, or other funds 32 33 12,749,895 9,090,718 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 36,674,022 36,693,033 Form **990** (2015)

Part XII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

a separate basis, consolidated basis, or both Separate basis Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both

Separate basis

Schedule O

Single Audit Act and OMB Circular A-133?

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

If the organization changed either its oversight process or selection process during the tax year, explain in

Consolidated basis

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

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

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

Both consolidated and separate basis

Cash ✓ Accrual Other

Both consolidated and separate basis

2b Yes

2c

3a

3b

Yes

Yes

Yes Form 990 (2015)

2a

✓

No

Νo

Yes

Software ID: Software Version:

EIN: 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

FOCUSING ON THOSE BELOW THE SELF-SUFFICIENCY STANDARD

) (Expenses \$ 1,355,283 including grants of \$ 563,734) (Revenue \$ ORGANIZATIONAL CAPACITY BUILDING UNITED WAY OF NEW YORK CITY MOBILIZES RESOURCES, STABILIZE, STRENGTHEN AND SUSTAIN NON-PROFITS TO DELIVER HIGH QUALITY SERVICES THAT IMPROVE THE LIVES OF LOW-INCOME NEW YORKERS UWNYC WORKS WITH A CROSS-SECTION OF PARTNERS TO IMPLEMENT INITIATIVES AND PROMOTE PRACTICES THAT STREGTHEN AND SUPPORT THE RANGE OF THE CITY'S NONPROFITS $\,$ UWNYC STREGTHENS THE SECTOR THROUGH, BOARD DEVELOPMENT, GRANT MAKING, BOTH SYSTEMIC AND DIRECT APPROACHES TO EXPANDED ACCESS TO RESOURCES, LEARNING OPPORTUNITIES TO BUILD ORGANIZATIONAL CAPACITY, AND ADVOCACY FOR THE CONTRIBUTIONS OF THE SECTOR TO THE ECONOMY AND WELL-BEING OF NEW YORKERS FOR EXAMPLES OF OUR SNYCN INITIATIVES SEE SCHEDULE O (Code) (Expenses \$ 16,329,840 including grants of \$ 16,408,172) (Revenue \$ 330,597) EDUCATION 2015/2016ATTENDANCE IMPROVEMENT DROPOUT PREVENTION (AIDP) SERVICESFOR OVER TWO DECADES, UNITED WAY OF NEW YORK CITY (UWNYC) AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS THROUGH THIS INITIATIVE, COMMUNITY-BASED ORGANIZATIONS (CBOS) ARE PARTNERED WITH NYCDOE DESIGNATED SCHOOLS TO PROVIDE SERVICES TO ELIGIBLE STUDENTS AND THEIR FAMILIES CAMPAIGN FOR GRADE LEVEL READING (CGLR)CGLR IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE READNYCREADNYC IS UNITED WAY OF NEW YORK CITY'S CAMPAIGN FOR GRADE-LEVEL READING THROUGH A COLLECTIVE IMPACT APPROACH, THIS INITIATIVE SUPPORTS ATTAINMENT OF GRADE LEVEL READING BY 3RD GRADE AND FOCUSES ON THE POOREST COMMUNITIES IN NEW YORK CITY WE BRING TOGETHER COMMUNITY BASED ORGANIZATIONS, FUNDERS, GOVERNMENT OFFICIALS, SCHOOLS, PARENTS, FAMILIES AND MORE, IN ORDER TO WORK TOGETHER TO IMPROVE LITERACY OUTCOMES FOR NYC'S CHILDREN INCOME 2015/2016CHANGE CAPITAL FUNDTHE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING FIVE COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH NONPROFIT ORGANIZATION WILL BE FUNDED AT \$250,000 PER YEAR FOR FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS EMERGENCY FOOD & SHELTER PROGRAM (EFSP) EFSP HELPS TO PREVENT HUNGER AND PRESERVE SHELTER FOR NEW YORKERS FACING ECONOMIC EMERGENCIES OVER 400 SOUP KITCHENS, FOOD PANTRIES, AND NONPROFITS ARE AWARDED FUNDING FOR FOOD AND EMERGENCY SHELTER IN ADDITION, NONPROFITS RECEIVE RESOURCES TO PROVIDE CLIENTS WITH FINANCIAL SUPPORT TO ADDRESS THEIR RENT AND UTILITIES ARREARS UWNYC PROVIDES FUNDED AGENCIES WITH TECHNICAL ASSISTANCE TO HELP ENSURE THEY ARE PROVIDING THE HIGHEST QUALITY SERVICES AND ARE MEETING CONTRACTUAL OBLIGATIONS FAMILY FINANCIAL EMPOWERMENTTHE CLOSING THE SKILLS GAP PROGRAM SEEKS TO INCREASE LOW TO MODERATE INCOME WORKING NEW YORKERS' ACCESS TO FINANCIAL CAPABILITY RESOURCES AND SERVICES, HELPING RESIDENTS DEVELOP GREATER ECONOMIC STABILITY AND STRENGTH HOUSING COURT ANSWERS CRISIS SUPPORTSTHIS SERVICE IS A RENTAL ARREARS, UTILITY AND MORTGAGE ARREARS HOTLINE THAT PROVIDES CRISIS SUPPORT TO RESIDENTS FROM ALL FIVE BOROUGHS FACING EVICTION DUE TO NONPAYMENT OF RENT, WHO ARE SEEKING RENTAL ASSISTANCE OR WHO HAVE QUESTIONS REGARDING HOUSING COURT FOOD SUPPORT CONNECTIONS (FSC) FSC IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS NONPROFIT PARTNERS CONDUCT GRASSROOTS OUTREACH AND FACILITATE BENEFITS ACCESS NONPROFIT STAFF WORK WITH INDIVIDUALS TO DETERMINE BENEFIT ELIGIBILITY, ASSIST WITH THE APPLICATION AND DOCUMENTATION PROCESS, SCHEDULE APPOINTMENTS WITH NEW YORK CITY HUMAN RESOURCE ADMINISTRATION (HRA), AND ADVOCATE IF BARRIERS ARE ENCOUNTERED UWNYC PARTNERS WITH FOOD BANK, NEW YORK CITY COALITION AGAINST HUNGER, BRONXWORKS, CHINESE-AMERICAN PLANNING COUNCIL, COMMUNITY HEALTH ACTION OF STATEN ISLAND AND RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL TO DELIVER SERVICES THROUGHOUT THE CITY HEALTHY FOOD ACCESS 2015/16HUNGER PREVENTION AND NUTRITION ASSISTANCE PROGRAM (HPNAP) THROUGH THE NEW YORK STATE DEPARTMENT OF HEALTH FUNDED HPNAP PROGRAM, UWNYC HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES THE PROGRAM PROVIDES UP TO 50 MILLION HPNAP SUPPORTED MEALS TO FOOD INSECURE NEW YORKERS THROUGH A NETWORK OF OVER 300 FOOD PANTRIES AND SOUP KITCHENS THROUGHOUT NEW YORK CITY ON AN ANNUAL BASIS ORGANIZATIONAL CAPACITY BUILDING 2015/16BOARDSERVENYCOUR BOARDSERVENYC INITIATIVE BUILDS THE CAPACITY OF NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD MEMBERS THE BOARD CANDIDATES REPRESENT A CROSS-SECTION OF NEW YORKERS OF VARIED SKILLS AND BACKGROUNDS, ALL OF WHOM ARE INTERESTED IN VOLUNTEERING THEIR TIME AS BOARD MEMBERS BOARDSERVENYC PARTICIPATION INCLUDES TRAINING FOR BOARD MEMBER CANDIDATES IN NONPROFIT GOVERNANCE, TRAINING FOR NONPROFITS TO RECRUIT, ENGAGE, AND UTILIZE NEW BOARD MEMBERS, AND COACHING AND PEER LEARNING GROUPS FOR NEWLY PLACED BOARD MEMBERS OVER THEIR FIRST YEAR OF BOARD SERVICE SELF-SUFFICIENCY STANDARD REPORTTHE SELF-SUFFICIENCY STANDARD REPORT FOR NEW YORK CITY MEASURES HOW MUCH INCOME A FAMILY OF A CERTAIN COMPOSITION IN A GIVEN PLACE MUST EARN TO MEET THEIR BASIC NEEDS WITHOUT ANY ASSISTANCE, PUBLIC OR PRIVATE IT INCLUDES DETAILS ABOUT THE NUMBER AND CHARACTERISTICS OF HOUSEHOLDS,

Compensated Employees, and Inde					ıru	stee	5, r	key Employed	es, nignest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	
ROBERT KUEPPERS DIR BOARD CHAIR (FORMER)	1 00	×		×				0	0	0
JOSEPH A CABRERA DIRECTOR, VICE CHAIR	1 00	×		x				0	0	0
CHERYLE A WILLS DIRECTOR, SECRETARY	1 00	×		×				0	0	O
DONALD F DONAHUE DIRECTOR, CO-CHAIR	1 00	×		x				0	0	0
ANDREW ALFANO DIRECTOR	1 00	×						0	0	O
BERNICE CLARK DIRECTOR	1 00	×						0	0	0
SUSAN L BURDEN	1 00	х						0	0	0
DIRECTOR	1	l	l	1						

1 00

1 00

1 00

J EMILIO CARRILLO MD MPH

MARIANNE D COOPER

STEPHEN J DANNHAUSER

DIRECTOR

DIRECTOR

DIRECTOR

Compensated Employees, and Inde					. r u:	stee:	5, F	tey Employed	es, nigilest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	Pos mo unles	sition nore ti ess pe offic direct	(C) n (do than ersoi icer ttor/t	not one on is and trust	stee)	an	(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
	below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	<u>g</u>		PH3C)	and related organizations
KIMBERLY B DAVIS DIRECTOR (FORMER)	1 00	×						0	0	C
BRENDAN DOUGHER DIRECTOR	1 00	x	_					0	0	
ROBERT A DUPUY DIRECTOR	1 00	x						0	0	
NEIL MASTERSON DIRECTOR	1 00	x						0	0	
WILLIAM K FLEMMING DIRECTOR	1 00	×						0	0	(
ROBERT FRIEDMAN DIRECTOR AND TREASURER	1 00	×		×				0	0	(
FELIX V MATOS RODRIQUEZ DIRECTOR	1 00	x						0	0	(
ISIDORE MAYROCK	1 00	[¹					П			1

1 00

1 00

DIRECTOR

ANISH MELWANI DIRECTOR

TED MOUDIS DIRECTOR

Compensated Employees, and Inde					rus	stees	5, K	tey Employed	es, Hignest	
(A) Name and Title	(B) Average hours per week (list any hours for related	Pos m unles	sition iore t ss pe	(C (do han erso cer	not one on is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
ROBERT MULLEN DIRECTOR	1 00	×						0	0	0
DAVID OWEN DIRECTOR	1 00	x						0	0	C
JOSHUA B MASON DIRECTOR	1 00	x						0	0	C
DENISE PICKETT DIRECTOR AND VICE CHAIR	1 00	x		x				0	0	C
JENNIFER RAAB DIRECTOR	1 00	×						0	0	C
BRAD ROTHBAUM DIRECTOR	1 00	×						0	0	C
MICHAEL SCHMIDTBERGER	1 00						\exists	_	_	

1 00

1 00

1 00

Х

DIRECTOR AND CO-CHAIR

JEFFREY SHERMAN

DIRECTOR

AMANI TOOMER DIRECTOR

DAVID TURNER DIRECTOR

24,413

726

Compensated Employees, and Inde					ı u	stee.	э, г	tey Employed	es, iligilest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than erso icer	not one on is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Forner	MISC)	MISC)	organization and related organizations
KARYN TWARONITE DIRECTOR	1 00	x						0	0	q
LISA CARNOY DIRECTOR	1 00	×						0	0	С
CHARLES P WANG DIRECTOR	1 00	×						0	0	C
RUDOLPH WYNTER DIRECTOR	1 00	x						0	0	C
KYUNG B YOON DIRECTOR	1 00	×						0	0	C
NANCY ZIMPHER DIRECTOR	1 00	x						0	0	С

1 00

50 00

50 00

Х

Х

358,334

95,792

ROSSIE TURMAN III

DIRECTOR

DIRECTOR

DIPTI GULATI

SHEENA WRIGHT

PRESIDENT & CEO

JOHN A MCKEGNEY

EXEC VP & CFO (FORMER)

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

14,696

12,967

32,205

33,703

compensated Employees, and Inde	penaent co.	1100	,	-				I .	ı	
(A) Name and Title	(B) Average hours per week (list any hours for related	unles	ore tl ss pe	than ersoi icer	not one on is and 'trust	tee)		(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
SUNITA SUBRAMANIAN GENERAL COUNSEL AND ASST	45 00			x				196,272	0	8,581
LESLEIGH IRISH-UNDERWOOD SNR VP OF MARKETING & COMM	45 00	 	 		x		_ _	205,370	0	8,948
NICOLE GALLANT SNR VP OF CI	45 00		 		x		 	195,435	0	7,724
ELENA PAK SR VP OF RESOURCE DEV (FORMER)	45 00					х		145,644	0	19,606
JACQUELINE JENKINS	45 00						\Box			

45 00

45 00

45 00

.

VP OF STRATEGY MANAGEMENT

.....

MIRIAM BENITEZ

PATRICK MA

VP OF OPERATIONS

VP OF HUMAN CAPITAL

MINDEE H BARHAM FORMER

SEN VP & CHIEF DEV OFFICER

Х

Χ

Х

149,399

146,407

165,145

141,458

efile GRAPHIC pr	int - DO NOT PROCESS	As Filed Data
SCHEDULE A	Public Ch	narity Status

(Form 990 or

Internal Revenue Service Name of the organization

UNITED WAY OF NEW YORK CITY

990EZ)

Part I

1

2 3

Treasury

Department of the

DLN: 93493132027067 OMB No 1545-0047

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.

Employer identification number

Schedule A (Form 990 or 990-EZ) 2015

13-2617681

► Attach to Form 990 or Form 990-EZ. ▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at Open to Public Inspection

www.irs.gov/form990.

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g 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. 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. 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. 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. 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 Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) A mount of Name of supported organization Type of Is the organization A mount of other listed in your governing organization monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes No Total Cat No 11285F For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

Page 2

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

S	ection A. Public Support		•				•	
(or	Calendar year fiscal year beginning in) ▶	(a)2011	(b) 2012	(c)2013	(d)2014	(e)20	015	(f) Total
1	Gifts, grants, contributions, and							
_	membership fees received (Do	63,681,587	67,043,537	57,980,327	56,280,856	61	,875,439	306,861,746
_	not include any unusual grants)							
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	63,681,587	67,043,537	57,980,327	56,280,856	61	,875,439	306,861,746
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							306,861,746
_	from line 4 ection B. Total Support							
	Calendar year							
(or	fiscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d) 2014	(e) 20	15	(f) Total
7	Amounts from line 4	63,681,587	67,043,537	57,980,327	56,280,856	61	,875,439	306,861,746
8	Gross income from interest,							_
	dividends, payments received	204 226	105.765	102 120	271 074		267.604	1 210 000
	on securities loans, rents, royalties and income from	294,236	185,765	192,129	271,074		267,684	1,210,888
	similar sources							
9	Net income from unrelated							
	business activities, whether or							
	not the business is regularly							
10	Carried on Other income Do not include							
10	gain or loss from the sale of	-54,977	34,021	33,548			67,649	80,241
	capital assets (Explain in Part	-34,977	34,021	33,346			07,049	80,241
	VI) Total support. Add lines 7							
11	through 10							308,152,875
12	Gross receipts from related activi	ties, etc (see ins	tructions)		•	12		
13	First five years.If the Form 990 is	for the organizat	ion's first, second,	third, fourth, or fi	ıfth tax year as a s	section !	501(c)(3)	organization,
	check this box and stop here						▶□	
S	ection C. Computation of Pu							
14	Public support percentage for 201	L5 (line 6, column	(f) divided by line	11, column (f))		14		99 580 %
15	Public support percentage for 201	L4 Schedule A, Pa	art II, line 14			15		99 620 %
16a	33 1/3% support test—2015. If the	e organızatıon dıd	not check the box	on line 13, and li	ine 14 is 33 1/3%	or more	, check th	nis box
	and stop here. The organization q							▶▽
b	33 1/3% support test—2014. If th			•	and line 15 is 33	1/3% or	more, che	
17.	box and stop here. The organizati		, , ,	_	012 162 05166	and lin	. 1.4	▶ □
1/a	10%-facts-and-circumstances tes is 10% or more, and if the organiz	_				•		
	in Part VI how the organization me			•		-	•	ted
	organization			 	,		, .FF	▶ □
b	10%-facts-and-circumstances tes							•
	15 is 10% or more, and if the org							
	Explain in Part VI how the organiz	ation meets the "	tacts-and-circums	tances" test The	e organization qua	ilifies as	a publicly	•
18	supported organization Private foundation. If the organization	ation did not chec	k a hov on line 13	16a 16h 17a o	r 17h check this	hox and	see	▶┌
	instructions	.c.on ala not chech	a box on fine 15,	104, 100, 174, 0	175, CHECK CHIS	SOX UNU	500	▶┌
								<u> </u>

Sche	dule A (Form 990 or 990-EZ) 2015						Page 3
Pā	Support Schedule						
	(Complete only if you						under Part
50	II. If the organization ction A. Public Support	Talls to qualif	y under the te	sts listed below	, please comple	ete Part II.)	
36	Calendar year		1	1			1
(or f	iscal year beginning in)	(a) 2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) ⊤otal
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						
	Amounts included on lines 1, 2,						
7 a	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
Sa	from line 6) ction B. Total Support						<u> </u>
36			1	T	1	1	
/orf	Calendar year iscal year beginning in) ▶	(a) 2011	(b) 2012	(c)2013	(d)2014	(e) 2015	(f) Total
9	Amounts from line 6						
LOa	Gross income from interest,						
LVa	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 Add lines 10a and 10b						
C	Net income from unrelated						
11	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,						
14	11, and 12) First five years.If the Form 990 is f	or the organizati	on's first secon	third fourth or	fifth tay year ac a	section 501/cV	3) organization
		or the organizati	on a mat, second	i, ama, iouitii, 0f	municax year as a	. accion aut(c)(o , organization, ► □
e -	check this box and stop here	lie Cunnert 5	larcantasa				P
ъе	ction C. Computation of Pub	nc support P	rercentage				

15 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2014 Schedule A, Part III, line 15 $\,$ 16

Section	D. (Compu	tation	of	Invest	ment	Income	Percent	tage
---------	------	-------	--------	----	--------	------	--------	---------	------

18

17	nvestment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))	

Investment income percentage from 2014 Schedule A, Part III, line 17	18
23.1/20/ support tosts 2015 if the organization did not shock the box on line 14, and line 15 to more than	22

19a 33 1/3% support tests—2015. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support tests—2014. 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

17

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and C, molete Part V, V

	I, complete Sections A and D, and complete Part V)	a circo	Ned II	a 011 a
Se	ction 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		
3а	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	3 c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b 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	4b		
c	by or in connection with its supported organizations 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	4c		
	organization was used exclusively for section 170(c)(2)(B) purposes 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		
	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 (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) 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 IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	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 II of Schedule L (Form 990)	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 9(a)) 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 9(a)) 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		
0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10 a		
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		
1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
_	A 250% controlled entity of a person described in (a) or (b) above 21f "Ves" to a boar a provide detail in Part VI	110		

Part IV Supporting Organizations (continued)

Part IV	Supporting	Organizations	(continuea)

Se	ection 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		
Se	ection 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		
Se	ection 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, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) 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		
-	notion E. Tuno III Eurotionally, Intoquated Connecting Overninations			
1 1	The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity instructions.			
2	Activities Test Answer (a) and (b) below.		Yes	No
ā	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	2 a		
t	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? <i>Provide details in Part VI</i>	3a		
Ŀ	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		

Par	Type III Non-Functionally Integrated 509(a)(3) Suppor	ting C	Organizations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tr	uston	Nov 20,1970 See inst i	ructions. All other
	Type III non-functionally integrated supporting organizations must complete S	ections	s A through E	
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(optional)
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 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property				
7	held for production of income (see instructions) Other expenses (see instructions)	6 7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
•	Adjusted Net Income (Subtract lines 3, 6 and 7 from line 4)	Ū		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
c	Fair market value of other non-exempt-use assets	1 c		
d	Total (add lines 1a, 1b, and 1c)	1 d		
e	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	A cquisition 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-instructions)	ntegrat	ea Type III supporting o	organization (see

P	art V Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (co	ontinued)				
S	ection D - Distributions			Current Year				
1	Amounts paid to supported organizations to accom	plish 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 exemp	ot purposes of supported orga	anızatıons					
4	Amounts paid to acquire exempt-use assets							
	Qualified set-aside amounts (prior IRS approval rea	uured)						
	Other distributions (describe in Part VI) See instru							
	,	ac cions						
	Total annual distributions. Add lines 1 through 6							
8	Distributions to attentive supported organizations t details in Part VI) See instructions	o which the organization is re	esponsive (provide					
9	Distributable amount for 2015 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-2015	(iii) Distributable Amount for 2015				
1	Distributable amount for 2015 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)							
	Excess distributions carryover, if any, to 2015							
<u>a</u>								
b								
	From 2013							
	From 2014							
	Total of lines 3a through e							
	Applied to underdistributions of prior years							
h	Applied to 2015 distributable amount							
i	Carryover from 2010 not applied (see instructions)							
j	Remainder Subtract lines 3g, 3h, and 3i from 3f							
	Distributions for 2015 from Section D, line 7 \$							
	Applied to underdistributions of prior years							
b	Applied to 2015 distributable amount							
	Remainder Subtract lines 4a and 4b from 4							
5	Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)							
6	Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)							
7	Excess distributions carryover to 2016. Add lines 3j and 4c							
8	Breakdown of line 7							
a								
b								
c	Excess from 2013							
d	From 2014							
е	From 2015							
			Cahadula A	Form 990 or 990-F7) (2015				

DLN: 93493132027067

Employer identification number

13-2617681

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Name of the organization

UNITED WAY OF NEW YORK CITY

Political expenditures

Service

2

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2015
Open to Public Inspection

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

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

• Section 501(c)(4), (5), or (6) organizations Complete Part III

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

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

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

Provide a description of the organization's direct and indirect political campaign activities in Part IV

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

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

•	volunteer nours						
Par	t I-B Complete if the or	ganization is exempt under	section 501(c)(3).			
1	Enter the amount of any excise	e tax incurred by the organization un	der section 4955	•	\$		
2	Enter the amount of any excise	e tax incurred by organization manag	gers under section	n 4955 ▶	\$		
3	If the organization incurred a s	ection 4955 tax, did it file Form 47.	20 for this year?		☐ Yes ☐ No		
4 a	Was a correction made?				☐ Yes ☐ No		
b	If "Yes," describe in Part IV						
Par	t I-C Complete if the or	ganization is exempt under	section 501(c), except section 50	1(c)(3).		
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exemp	ot function activities 🕨	\$		
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to o	ther organizations	s for section 527 ▶	\$		
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	0-POL, line 17b ►	\$		
4	Did the filing organization file F	orm 1120-POL for this year?					
Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter amount of political contributions received that were promptly and directly delivered to a separate political organization, such as separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.							
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-		
2							
3							
4							
5							
6							
For F	Paperwork Reduction Act Notice, se	ee the instructions for Form 990 or 99	D-EZ.	Cat No 50084S Schedule C (F	orm 990 or 990-EZ) 2015		

Other exempt purpose expenditures

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

reporting section 4911 tax for this year?

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Grassroots nontaxable amount

Lobbying ceiling amount

Not over \$500,000

Over \$17,000,000

g

2a

If the amount on line 1e, column (a) or (b) is:

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

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

, if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN

^	expenses, and share of excess lobbying expenditures)	d group member's nam	e, address, ETN,
В	Check Fifthe filing organization checked box A and "limited control" provisions apply		
	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0_	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	88,044	
c	Total lobbying expenditures (add lines 1a and 1b)	88,044	

Total exempt purpose expenditures (add lines 1c and 1d)

\$1,000,000

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

Lobbying nontaxable amount Enter the amount from the following table in both columns The lobbying nontaxable amount is:

20% of the amount on line 1e

1.000,000

265

250,000

\$100,000 plus 15% of the excess over \$500,000

250,000

63,818,668

63,906,712 1,000,000

1.000.000

104.077

250,000

60.468

1.000.000

88,044

250,000

Schedule C (Form 990 or 990-EZ) 2015

4,000,000

6,000,000

280,102

1,000,000

1,500,000

147,632

(Some organizations that made a section 501(h) election do not have to complete all of the five

4-Year Averaging Period Under section 501(h)

columns below. See the separate instructions for lines 2a through 21.)							
Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year	(a)2012	(b) 2013	(c) 2014	(d) 2015	(e) Total		

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) Tota		

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) To
					l

1.000.000

87,716

250,000

87,164

Return Reference

Sche	edule C (Form 990 or 990-EZ) 2015				Pä	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N filed Form 5768 (election under section 501(h)).	TO				
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying	(a)	1	(b)	
activ		Yes	No		4 moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	103				
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			7		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912			1		
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section $501(c)(4)$, section $501(c)(6)$.	501 (c)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		i
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
C	Total	2 c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information	1				
	evide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou	ın lıc+\	Dart T	T_A	inec 1	
	see instructions), and Part II-B, line 1. Also, complete this part for any additional information	ip 113t)	, . a.c.1	·-^, I	11163 1	anu

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

SCHEDULE D (Form 990)

Department of the

Internal Revenue Service

Treasury

Supplemental Financial Statements

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

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

DLN: 93493132027067OMB No 1545-0047

2015

Open to Public
Inspection

	me of the organization ITED WAY OF NEW YORK CITY		Empi	oyer identification number
			13-2	617681
Pa		Advised Funds or Other Similar F	unds (or Accounts.
	Complete if the organization answer	ed "Yes" on Form 990, Part IV, line 6.		
1	Total number at end of year	(a) Donor advised funds	(b)	Funds and other accounts
_	·	5		
2	Aggregate value of contributions to (during year)	0		1,280,00
3	Aggregate value of grants from (during year)	79,089		_,,,-
4	Aggregate value at end of year	144,293		1,710,01
5	Did the organization inform all donors and donor funds are the organization's property, subject to	advisors in writing that the assets held in doi	nor advis	· · · · · · · · · · · · · · · · · · ·
5	Did the organization inform all grantees, donors, used only for charitable purposes and not for the conferring impermissible private benefit?			
Pa		ete if the organization answered "Yes" o	on Forn	• • • • • • • • • • • • • • • • • • • •
1	Purpose(s) of conservation easements held by the			,
	Preservation of land for public use (e.g., recreducation)	eation or	n histor	ically important land area
	Protection of natural habitat	Preservation of a	certifie	d historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization easement on the last day of the tax year	held a qualified conservation contribution in	the form	of a conservation
				Held at the End of the Year
а	Total number of conservation easements		2a	
b	Total acreage restricted by conservation easeme	ents	2b	
c	Number of conservation easements on a certified	historic structure included in (a)	2c	
d	Number of conservation easements included in (historic structure listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
3	Number of conservation easements modified, tra tax year ►	nsferred, released, extinguished, or terminato	ed by th	e organization during the
4	Number of states where property subject to cons	ervation easement is located •		
· 5	Does the organization have a written policy regain		—— dling of	
	violations, and enforcement of the conservation		anny or	☐ Yes ☐ No
6	Staff and volunteer hours devoted to monitoring, year	inspecting, handling of violations, and enforc	ing cons	servation easements during the
,	A mount of expenses incurred in monitoring, insp	ecting, handling of violations, and enforcing o	onserva	ation easements during the vear
,	▶ \$,
В	Does each conservation easement reported on II (B)(I) and section $170(h)(4)(B)(II)^{2}$	ne 2(d) above satisfy the requirements of sec	ction 17	0(h)(4) Yes No
9	In Part XIII, describe how the organization repor balance sheet, and include, if applicable, the text the organization's accounting for conservation ea	of the footnote to the organization's financia		
ar		ctions of Art, Historical Treasures, ed "Yes" on Form 990, Part IV, line 8.	or Oth	ner Similar Assets.
1a	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide, in Part XIII, the text of the foot	assets held for public exhibition, education,	or resea	arch in furtherance of public
b	If the organization elected, as permitted under S works of art, historical treasures, or other similar service, provide the following amounts relating to	assets held for public exhibition, education,		
((i) Revenue included on Form 990, Part VIII, line	1	> \$	

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

Revenue included on Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

Assets included in Form 990, Part X

▶ \$ _

Part	Continued)	g Collections of	Art, Historical	Treasures, or	Other Similar A	ssets
3	Using the organization's acquisition, ac collection items (check all that apply)	cession, and other re	ecords, check any	of the following that	are a significant us	e of its
а	Public exhibition		d _ Lo	an or exchange pro	grams	
b	Scholarly research		e	ther		
c	Preservation for future generations					
4	Provide a description of the organization		xnlain how they fur	ther the organizatio	n's exemnt nurnose	o in
•	Part XIII	To concedions and ex	kpiaiii ilow tiley iai	ther the organizatio	irs exempt purpose	
5	During the year, did the organization so assets to be sold to raise funds rather t	han to be maintained				s No
Par	rt IV Escrow and Custodial Arr Complete if the organization Part X, line 21.		n Form 990, Par	t IV, line 9, or re	ported an amour	nt on Form 990,
1a	Is the organization an agent, trustee, concluded on Form 990, Part X?	ıstodıan or other ınte	ermediary for contr	lbutions or other as	sets not	s √ No
b	If "Yes," explain the arrangement in	Part XIII and comple	ete the following ta	ble	Am	nount
c	Beginning balance		J	10	:	
d	Additions during the year			10	ı	
е	Distributions during the year			16	:	
f	Ending balance			1f	•	
2 a	Did the organization include an amount	on Form 990, Part X	, line 21, for escro	w or custodial acco	unt liability? Ye	s No
b	If "Yes," explain the arrangement in Pai	t XIII Check here if	the explanation h	as been provided in	Part XIII	🗆
Pa	rt V Endowment Funds. Compl	ete if the organiza	ition answered "	Yes" to Form 990	, Part IV, line 10	
		(a)Current year	(b)Prior year	b (c) Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	3,326,004	3,256,414	3,222,866	3,616,285	2,793,822
b	Contributions	0	94,590		450,000	877,440
c	Net investment earnings, gains, and losses	-999,061	-25,000	33,548	34,021	-54,977
d	Grants or scholarships					
e	Other expenditures for facilities and programs				877,440	
f	Administrative expenses					
g	End of year balance	2,326,943	3,326,004	3,256,414	3,222,866	3,616,285
2	Provide the estimated percentage of the	•	lance (line 1g, col	umn (a)) held as		
a	Board designated or quasi-endowment i					
b	Permanent endowment ► 100 000 %					
С	Temporarily restricted endowment ► The percentages on lines 2a, 2b, and 2c	s should agual 100%				
За	Are there endowment funds not in the programization by	·		neld and administere	ed for the	Yes No
	(i) unrelated organizations				38	a(i) Yes
	(ii) related organizations				3a	n(ii) No
	If "Yes" on 3a(II), are the related organi				<u></u>	3b
4 Date	Describe in Part XIII the intended uses rt VI Land, Buildings, and Equi		s endowment funds			
Pai	Complete if the organization		Form 990, Part	IV, line 11a.See	Form 990, Part >	K, line 10.
	Description of property		(a) Cost or other (Investme	basis Cost or other ba	Accumulated	(d)Book value
1a	Land					
b	Buildings					
	Leasehold improvements		·	9,285,		
d	Equipment		.	1,337,0	056 238,26	58 1,098,788

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

9,334,771

See Form 990, Part	A. IIIIE 12.				
	of security or category		(b) Book value	(c)Method of valuation	
(1)Financial derivatives	name of security)			Cost or end-of-year mark	et value
(2)Closely-held equity interests					
(3)O ther					
Total. (Column (b) must equal Form 990, i	Part X, col (B) line 12)	>			
Part VIII Investments—Pro	ogram Related.	Yes' on Form 990	Part IV line 11c	See Form 990, Part X, line 1	
	tion of investment	163 011101111 330	(b) Book value	(c) Method of valuation	
				Cost or end-of-year marke	t value
Total (Column (h) must equal Form 990 i	Part X col (B) line 13)	•			
Total. (Column (b) must equal Form 990, part IX Other Assets. Com			orm 990, Part IV, lir	ne 11d See Form 990, Part X, line	15
		answered 'Yes' on F	orm 990, Part IV, lir	ne 11d See Form 990, Part X, line (b) Book value	15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV , lır		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV, lir		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV , lir		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV , lır		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV, lir		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV , lir		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV , lır		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV, lir		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV , lir		15
	plete if the organization	answered 'Yes' on F	orm 990, Part IV, lir		15
Part IX Other Assets. Com Total. (Column (b) must equal Form 9	nplete if the organization (a) Descrip	answered 'Yes' on Fotion		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part	general specific programs (a) Descrip (a) Descrip (a) Descrip (a) Descrip (a) Descrip (a) Descrip (b) Descrip (b) Descrip (b) Descrip (c) Descrip (c) Descrip (d)	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (general specific programs (a) Descrip (a) Descrip (a) Descrip (a) Descrip (a) Descrip (a) Descrip (b) Descrip (b) Descrip (b) Descrip (c) Descrip (c) Descrip (d)	answered 'Yes' on Fotion		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part	general specific programs (a) Descrip (a) Descrip (a) Descrip (a) Descrip (a) Descrip (a) Descrip (b) Descrip (b) Descrip (b) Descrip (c) Descrip (c) Descrip (d)	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)	'Yes' on Form 990	(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability	answered 'Yes' on Fotion)		(b) Book value	15
Total. (Column (b) must equal Form 9 Part X Other Liabilities. (See Form 990, Part 1. (a) Description Federal income taxes CAMPAIGN DESIGNATIONS PAY,	pplete if the organization (a) Descrip 990, Part X, col (B) line 15 Complete if the organ X, line 25. n of liability ABLE T OBLIGATION	answered 'Yes' on Fotion)	Yes' on Form 990	(b) Book value	15

1 2

Part XII

1

2

d

b

Schedule D (Form 990) 2015

45,463,223

49,122,400

1,623,860

47,498,540

16,408,172

63,906,712

-191,356 3 Subtract line 2e from line 1 . . 3 45,654,579 Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . 4a Other (Describe in Part XIII) 4b 17,053,084 Add lines 4a and 4b 40 17,053,084 Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12) 5 62,707,663

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

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

2a

2b

2c

2d

2a

2b

2c

2d

-269,688

78,332

78,332

1.545.528

2e

4c

2e

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990, Part VIII, line 12 Net unrealized gains (losses) on investments

Total expenses and losses per audited financial statements .

Amounts included on line 1 but not on Form 990, Part IX, line 25

Donated services and use of facilities . . .

Recoveries of prior year grants . .

Other (Describe in Part XIII)

Add lines 2a through 2d .

3 Subtract line 2e from line 1 . Amounts included on Form 990, Part IX, line 25, but not on line 1:

Other (Describe in Part XIII)

Add lines 2a through 2d .

Donated services and use of facilities .

Prior year adjustments

Other losses

Investment expenses not included on Form 990, Part VIII, line 7b 4a

Other (Describe in Part XIII) 4b 16,408,172 Add lines **4a** and **4b** Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Part XIII Supplemental Information

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

information

Return Reference

PART V, LINE 4 THE ORGANIZATION'S ENDOWMENT FUNDS ARE PRIMARILY USED IN PERPETUITY TO PROVIDE A PERMANENT SOURCE OF INCOME Schedule D (Form 990) 2015

Explanation

Schedule D (Form 990) 2015	Page 5
Part XIII Supplemental 1	Information (continued)
Return Reference	Explanation
PART XI, LINE 4B - OTHER ADJUSTMENTS	RESERVE FOR UNCOLLECTABLE RECEIVABLES FOR CAMPAIGN 644,912 DONOR DESIGNATIONS 16,408,172
PART XII, LINE 2D - OTHER ADJUSTMENTS	PENSION RELATED CHANGES 1,499,078 PROVISION FOR UNCOLLECTIBLE RECEIVABLES FOR CAMPAIGN CHANGE IN PERPETUAL TRUST 46,450
PART XII, LINE 4B - OTHER ADJUSTMENTS	DONOR DESIGNATIONS 16,408,172

Schedule D (Form 990) 2015

DLN: 93493132027067

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ

Open to Public Inspection ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number

13-2617681

	Fundraising Activities. Complete if the organization answered the officer 1990, Part IV, line 17.	
	Form 990-EZ filers are not required to complete this part.	
1	Indicate whether the organization raised funds through any of the following activities Check all that apply	

- ✓ Mail solicitations
- ▼ Solicitation of non-government grants
- ▼ Internet and email solicitations
- ▼ Solicitation of government grants

▼ Phone solicitations

▼ Special fundraising events

UNITED WAY OF NEW YORK CITY

- Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising ✓Yes No services?
- If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization

(i) Name and address of ındıvıdual or entity (fundraiser)	(ii) Activity	fundrai cust cont contrib	Did ser have ody or trol of outions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
1 PREMIERE EVENTS PLUS INC 1441 BROADWAY SUITE 5001 NEW YORK, NY 10018	EVENT MANAGEMENT	Yes	No	1,912,643	171,750	1,740,893
JFM GROUP 629 FIFTH AVE STE 106	EVENT MANAGEMENT	Yes		862,751	55,000	807,751
3 MAX MARA 813 MADISON AVENUE NEW YORK, NY 10065	CO-VENTURE	Yes		1,657	0	1,657
4 THE PROMETHEUS EXCHANGE LLC 170 EAST 88TH STREET SUITE 6H NEW YORK, NY 10128	FUNDRAISING COUNSEL		No	0	106,355	-106,355
5						
6						
7						
8						
9						
10						
Total		1	>	2,777,051	333,105	2,443,946

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

NY, NJ, CT, AL, AK, AR, CA, CO, DC, FL, GA, HI, IL, KS, KY, ME, MD, MI, MN, MS, NH, NM, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI, MA

	(0. 5.5	0 22,20
Part II	Fundrai	sing	Events.
	Camplet	0 if th	

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

	receipts greater than \$5,000.	(a) Event #1	(b) Event #2	(c)O ther events	(d) Total events
		GRIDIRON GALA (event type)	WLC LUNCHEON (event type)	(total number)	(add col (a) through col (c))
Reverne	1 Gross receipts	1,800,752	974,642	263,778	3,039,172
	2 Less Contributions	1,664,962	874,715	45,528	2,585,205
	3 Gross income (line 1 minus line 2)	135,790	99,927	218,250	453,967
	4 Cash prizes				
	5 Noncash prizes				
w	6 Rent/facility costs				
Expenses	7 Food and beverages				
å Ä	8 Entertainment				
Direct I	9 Other direct expenses	340,588	99,927	13,452	453,967
ā	10 Direct expense summary Add lines 4	through 9 in column (d)		453,967
	11 Net income summary Subtract line 10) from line 3, column (d)		0
Par	rt III Gaming. Complete if the organization of Form 990-EZ, line 6a.	answered "Yes" on F	Form 990, Part IV, line	e 19, or reported mor	e than \$15,000 on
Revernie		(a)Bıngo	(b)Pull tabs/Instant bingo/progressive bingo	(c)O ther gaming	(d) Total gaming (add col (a) through col (c))
Re	1 Gross revenue				
ses	2 Cash prizes				
Expenses	3 Noncash prizes				
Direct Direct	4 Rent/facility costs				
<u> </u>	5 Other direct expenses				
	6 Volunteer labor	│ Yes <u>%</u> │ No	├ Yes <u>%</u> ├ No	☐ Yes%	
	7 Direct expense summary Add lines 2	through 5 ın column (d)		
	8 Net gaming income summary Subtrac	t line 7 from line 1, col	umn (d)		
9 a	Enter the state(s) in which the organizations are the organization licensed to conduct or the conduct of the co		<u>-</u>		Yes No
b	If"No," explain				
L0a	Were any of the organization's gaming lid	censes revoked, suspe	nded or terminated during	the tax year?	
b	If "Yes," explain				

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493132027067 OMB No 1545-0047 Schedule I Grants and Other Assistance to Organizations, (Form 990) 2015 Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public Attach to Form 990. Department of the Inspection ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization Employer identification number UNITED WAY OF NEW YORK CITY 13-2617681 **General Information on Grants and Assistance** Part I Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 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 Part II that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (c) IRC section (d) A mount of cash **(b)** EIN (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance or government (book, FMV, assistance appraisal, other) See Additional Data Table

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

(c)A mount of

(b)Number of

Schedule I (Form 990) 2015

(a) Type of grant or assistance

(f)Description of non-cash assistance

Page **2**

		recipients	cash grant	non-cash assistance	(book, FMV, appraisal, other)				
(1) READNYC		2	22,249		, 11				
(2) FOOD ASSISTANCE COLLABORA	ATIVE	1	25,239						
(3) HPNAP		2	41,880						
(4) BOARDSERVE NYC		2	19,900						
(5) CHANGE CAPITAL FUND		2	155,553						
Part IV Supplemental Ir	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.								
Return Reference	Explanation								
PART I, LINE 2	AS PART OF THE PROCESS OF MONITORING THE COMMUNITY BASED ORGANIZATIONS THAT UWNYC FUNDS, UWNYC REQUIRES A								

(d)A mount of

DETAILED BUDGET TO IDENTIFY HOW THE AGENCY INTENDS TO SPEND THE CONTRACT AWARD AND AN EXPENDITURE REPORT TO

ACCOMPLISHMENTS FINALLY, UWNYC CONDUCTS PROGRAMMATIC REVIEWS AT THE PROGRAM SITES AND PROVIDE FEEDBACK

(e)Method of valuation

Software ID: Software Version:

EIN: 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (f) Method of valuation **(b)** EIN (c) IRC section (d) A mount of cash (e) A mount of non-(g) Description of (h) Purpose of grant cash (book, FMV, appraisal, organization if applicable non-cash assistance or assistance grant or government assistance other) AFTER SCHOOL ALL STARS 11-3306766 501(C)(3) 346,999 ATTENDANCE IMPROVEMENT 8000 UTOPIA PKWY DROPOUT JAMAICA, NY 11439 PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES BRONXWORKS 13-3254484 501(C)(3) 521,709 ATTENDANCE 60 EAST TREMONT AVE IMPROVEMENT BRONX, NY 10453 DROPOUT PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES CAMBA 11-2480339 501(C)(3) 275,560 ATTENDANCE IMPROVEMENT 1720 CHURCH AVENUE DROPOUT BROOKLYN, NY 11226 PREVENTION SERVICES (AIDP)-UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE

IMPROVEMENT SERVICES

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CATHOLIC CHARITIES COMMUNITY SERVICES ARCHDIOCESE OF NY 1011 FIRST AVENUE NEW YORK, NY 10022	13-5562184	501(C)(3)	403,611				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
CENTER FOR SUPPORTIVE SCHOOLS 461 GRAND STREET BROOKLYN,NY 11211	22-2962532	501(C)(3)	439,478				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
EAST SIDE HOUSE INC 337 ALEXANDER AVE BRONX,NY 10454	13-1623989	501(C)(3)	1,339,866				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EL-PUENTE 211 SOUTH 4TH STREET BROOKLYN,NY 11211	11-2614265	501(C)(3)	362,607				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
FAMILY HEALTH INTERNATIONAL 71 5TH AVENUE NEW YORK, NY 10003	23-7413005	501(C)(3)	503,424				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
GLOBAL KIDS INC 137 EAST 25TH STREET 2ND FLOOR NEW YORK, NY 10010	13-3629485	501(C)(3)	692,666				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE 9TH FL NEW YORK, NY 10001	13-5598710	501(C)(3)	949,377				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
GRAND STREET SETTLEMENT 80 PITT STREET NEW YORK,NY 10002	13-5562230	501(C)(3)					ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
HENRY STREET SETTLEMENT 265 HENRY STREET NEW YORK,NY 10002	13-1562242	501(C)(3)	287,279				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990,Schedule I, Par	t II, Grants and	l Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MAKE THE ROAD NY 301 GROVE STEET BROOKLYN,NY 11237	11-3344389	501(C)(3)	807,630				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
NEW YORK CENTER FOR INTERPERSONAL DEVELOPMENT 130 STUYVESANT PLACE STATEN ISLAND, NY 10301	23-7085239	501(C)(3)	638,483				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
NEW YORK COMMUNITY LEARNING SCHOOL INITIATIVEUFT 52 BROADWAY NEW YORK,NY 10004	46-1227433	501(C)(3)	1,330,435				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	nizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PARTNERSHIP WITH CHILDREN INC 299 BROADWAY SUITE NEW YORK, NY 10007	13-5596751	501(C)(3)	1,006,674				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
PATHWAYS TO LEADERSHIP 598 BROADWAY NEW YORK, NY 100123352	38-3886413	501(C)(3)	725,345				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
PHIPPS COMMUNITY DEVELOPMENT CORPORATION 902 BROADWAY 13TH FLOOR NEW YORK, NY 10010	13-2707665	501(C)(3)	363,812				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SCAN-NEW YORK 245 E 87TH ST STE 11E NEW YORK,NY 10128	13-2912963	501(C)(3)	312,966				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
SCO FAMILY OF SERVICES 1 ALEXANDER PLACE GLEN COVE, NY 11542	11-2777066	501(C)(3)	283,563				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
SPORTS & ARTS IN SCHOOLS FOUNDATION 58-12 QUEENS BLVD WOODSIDE, NY 11377	11-3112635	501(C)(3)	1,003,204				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST NICKS ALLIANCE 2 KINGSLAND AVENUE 2ND FLOOR BROOKLYN,NY 11211	51-0192170	501(C)(3)	354,145				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
TEACHER COLLEGE COLUMBIA UNIVERSITY 525 W 120TH ST NEW YORK,NY 10027	13-1624202	501(C)(3)	297,774				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
THE DOOR - A CENTER OF ALTERNATIVES 121 AVENUE OF THE AMERICAS NEW YORK,NY 10013	13-6127348	501(C)(3)	368,428				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	e to Domestic Orga	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable			(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
THE CHILDREN'S AID SOCIETY 105 E 22ND STREET NEW YORK, NY 10010	13-5562191	501(C)(3)	1,409,771				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT
URBAN ARTS PARTNERSHIP 414 BROADWAY FL NEW YORK, NY 10013	13-3554734	501(C)(3)	495,125				ATTENDANCE IMPROVEMENT DROPOUT PREVENTION SERVICES (AIDP)- UWNYC AND THE NEW YORK CITY DEPARTMENT OF EDUCATION (NYCDOE) HAVE COLLABORATED TO PROVIDE ATTENDANCE IMPROVEMENT AND DROPOUT PREVENTION (AIDP) SERVICES IN NEW YORK CITY'S LOWEST PERFORMING PUBLIC SCHOOLS GRADUATE PREPARE SUCCEED (GPS)-HELPS STUDENTS ATTEND SCHOOL, ATTAIN ACADEMIC SUCCESS, AND GRADUATE FROM HIGH SCHOOL THROUGH TARGETED COUNSELING, ACADEMIC SUPPORT, FAMILY ENGAGEMENT, AND ATTENDANCE IMPROVEMENT SERVICES
ATAPE GROUP LLC 555 KAPPOCK STREET BRONX,NY 10463	46-1739670		356,846				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990,Schedule I, Par	t II, Grants and	d Other Assistanc	e to Domestic Org	anizations and C	omestic Governme	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE NEW SCHOOL CENTER FOR NYC AFFAIRS 66 WEST 12TH STREET NEW YORK,NY 10111	13-3297197	501(C)(3)	50,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
CHILD & FAMILY POLICY CENTER 505 5TH AVENUE DES MOINES,IA 50309	42-1378567	501(C)(3)	49,971				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
CHILDREN'S DEFENSE FUND 25 E STREET NORTHWEST WASHINGTON, NY 20001	52-0895622	501(C)(3)	26,400				READNYC - READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990, Schedule I, Par	rt II, Grants and	Other Assistance	e to Domestic Org	anizations and [Oomestic Governme	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CITY YEAR INC 287 COLUMBUS BOSTON,NY 02116	22-2882549	501(C)(3)	180,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
COMMUNITY SERVICE SOCIETY OF NEW YORK 105 EAST 22ND STREET 2ND FL NEW YORK, NY 10010	13-5562202	501(C)(3)	264,618				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
CYPRESS HILLS LOCAL DVELOPMENT CORPORATION 625 JAMAICA AVENUE BROOKLYN,NY 11208	11-2683663	501(C)(3)	12,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990,Schedule I, Par	t II, Grants and	Other Assistanc	e to Domestic Org	anizations and D	omestic Governme	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EAST SIDE HOUSE INC 337 ALEXANDER AVE BRONX,NY 10454	13-1623989	501(C)(3)	865,510				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
EXPANDED SCHOOLS 1440 BROADWAY 16TH FLR NEW YORK, NY 10018	13-4004600	501(C)(3)	166,950				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
GENERATION READY 352 SEVENTH AVE NEW YORK,NY 10001	13-3762096	501(C)(3)	310,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990,Schedule I, Par	rt II, Grants and	d Other Assistanc	e to Domestic Org	anizations and f	<u> Jomestic Governm</u>	≥nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
HOUGHTON MIFFLIN HARCOURT 222 BERKELEY STREET BOSTON,MA 021163764	80-0277046		73,703				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
INWOOD HOUSE 320 EAST 82ND STREET NEW YORK,NY 10028	13-5562254	501(C)(3)	180,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
KINETIC LEARNING ENTERPRISES 205 ROCKINGHAM ROW PRINCETON,NY 08540	27-0274973		23,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990,Schedule I, Pa	rt II, Grants and	Other Assistanc	e to Domestic Org	anizations and D	omestic Governme	nts.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANET YOUNG 125-28 QUEENS BLVD KEW GARDENS,NY 11415	45-5296107		9,437				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
REACH OUT AND READ OF GREATER NEW YORK 30 EAST 33RD STREET NEW YORK, NY 10016	13-4080045	501(C)(3)	15,000				READNYC-READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
READ ALLIANCE 80 MAIDEN LANE 11TH FLOOR NEW YORK,NY 10038	13-4091062	501(C)(3)	216,265				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990,Schedule I, Par	t II, Grants and	d Other Assistanc	e to Domestic Org	anizations and I	<u>Domestic Governm</u>	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance
ROAD TO SUCCESS 307 W 38TH ST STE1101 NEW YORK,NY 10018	41-2166096	501(C)(3)	180,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
SAFIR & ASSOCIATES LLC 1394 BARROWS RD OAKLAND,CA 94610	81-1068039		207,000				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
TARRYTOWN HOUSE ESTATE & CONFERENCE CENTER 49 EAST SUNNYSIDE LANE TARRYTOWN, NJ 10591	20-2373966		21,410				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE

Form 990,Schedule I, Par	t II, Grants and	d Other Assistance	e to Domestic Org	anizations and C	omestic Governm	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non-	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance
WOMEN'S HOUSING & ECONOMIC DEVELOPMENT CORP 50 EAST 168TH STREET BRONX,NY 10452	11-3099604	501(C)(3)	168,395				READNYC- READNYC IS A COMPREHENSIVE, ALIGNED, AND COLLECTIVE STRATEGY TO SUPPORT CHILDREN, FAMILIES, AND COMMUNITIES WITH RESOURCES TO BUILD AND SUSTAIN A CULTURE OF LEARNING AND ACHIEVEMENT, CAPTURED IN THE PROOF POINT OF STUDENT SUCCESS IN GRADE THREE
MCGLADREY LLP 331 WEST 3RD STREET DAVENPORT,IA 06902	42-0714325		50,000				FOOD ASSISTANCE COLLABORATIVE- THE FAC EXISTS FOR THE PURPOSE OF INCREASING EQUITY AND EFFICIENCY ACROSS THE EMERGENCY FOOD NETWORK IN NEW YORK CITY THIS IS ACCOMPLISHED PRIMARILY THROUGH THE PROVISION OF ADDITIONAL FOOD IN HIGHLY CONCENTRATED AREAS OF NEED AS WELL AS CAPITAL SUPPORT TO NON- PROFITS IN NEED OF INFRASTRUCTURAL RESOURCES
AGRI PROCESSORS INCORPORATED 5600 1ST AVENUE BROOKLYN,NY 11220	22-2885839		25,612				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES RE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
AGUDATH ISRAEL OF AMERICA 42 BROADWAY NEW YORK,NY 10004	13-3918814	501(C)(3)	5,125				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
BALTER SALES COMPANY INC 209 BOWERY NEW YORK,NY 10002	13-1911598		130,652				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
BENZ'S FOOD PRODUCTS INCORPORATED 332 ALBANY AVENUE BROOKLYN,NY 11213	11-2841450		54,325				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
CRANBERRY HALL FARM PO BOX 227 COOKSTOWN,NJ 08551	22-2897065		76,128				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
CURTIS WARD REFRIGERATION 217-44A 98TH AVENUE QUEENS VILLAGE,NY 11429	11-1748460		35,381				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
DAVID ELLIOT POULTRY FARM 300 BRECK STREET SCRANTON,PA 18505	24-0835679		33,127				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			

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DRISCOLL FOODS 174 DELAWANNA CLIFTON,NJ 07014	22-3482240		4,114,255				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
FRATERNITE NOTRE DAME INC 502 N CENTRAL AVENUE CHICAGO,IL 60644	13-3600714	501(C)(3)	5,125				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
GOLDEN EARTHWORM ORGANIC FARM LLC 652 PECONIC BAY BLVD PO BOX 871 JAMESPORT,NY 11947	41-2170690		39,600				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		

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GOOD SHEPHERD SERVICES 305 SEVENTH AVENUE 9TH FL NEW YORK,NY 10001	13-5598710	501(C)(3)	29,999				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
GRAND CENTRAL NEIGHBORHOOD 120 EAST 32ND STREET NEW YORK, NY 100168648	13-3534255	501(C)(3)	5,000				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
GROWNYC 51 CHAMBERS STREETRM NEW YORK,NY 10007	13-2765465	501(C)(3)	30,000				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable			(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance		
HEARTY ROOTS FARM PO BOX 277 TIVOLI, NY 12583	20-2925491		51,840				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
JAN HUS PRESBYTERIAN CHURCH 351 E 74TH STREET NEW YORK,NY 10021	13-1635255	501(C)(3)	29,998				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
KENOVER MARKETING CORPORATION 9 - 29TH STREET BROOKLYN,NY 11232	11-3328605		6,494				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		

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NEIGHBORS TOGETHER 2094 FULTON STREET BROOKLYN,NY 112336009	11-2632109	501(C)(3)	5,125				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
OVERCOMING LOVE MINISTRIES 7814 ROCKAWAY BLVD WOODHAVEN,NY 114212926	11-2774575		5,125				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
RED APPLE FRUIT AND VEGETABLE 455 ALBANY AVENUE BROOKLYN,NY 11213	06-2607071		27,637				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.									
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable			(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance		
RUSSO'S ROOTS LLC 277 N SOCIETY RD CANTEBURRY,CT 06331	47-2906381		23,760				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
SALEM COMMUNITY SERVICE COUNCIL 211 WEST 129TH STREET NEW YORK,NY 10027	13-2665561	501(C)(3)	29,993				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		
SALEM UNITED METHODIST CHURCH 2190 ADAM CLAYTON POWELL JR BVLD NEW YORK, NY 10027	56-1368982	501(C)(3)	5,000				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES		

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable			(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance			
SHABBOS FISH MARKET 417 KINGSTON AVENUE BROOKLYN,NY 11225	11-3180901		25,617				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
STONELEDGE FARM LLC 359 ROSS RULAND RD SOUTH CAIRO,NY 12482	20-4541185		35,640				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
THE FARM AT MILLER'S CROSSING 81 ROXBURY ROAD HUDSON,NY 12534	14-1811452		52,272				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
THE RIVER FUND NEW YORK INC 89-11 LEFFERTS BLVD RICHMOND HILL, NY 11418	11-3450363	501(C)(3)	5,000				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
UNITED COACH LINE INC 3120 ARTHUR KILL ROAD STATEN ISLAND,NY 10309	27-1227571		7,480				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES			
WAY OUT CHURCH MINISITRIES 520 E 148TH STREET BRONX,NY 104552844	13-2953909		5,125				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD SECURITY AND NUTRITION ISSUES			

Form 990,Schedule I, Par	t II, Grants and	d Other Assistance	e to Domestic Orga	anizations and C	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance
WHISTLE DOWN FARM 20 SCHOOL TEACHER ROAD HUDSON,NY 12534	46-2876339		53,280				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES
WINDFLOWER FARM 585 MEETING HOUSE ROAD VALLEY FALLS,NY 12185	52-2336178		74,448				HPNAP HELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD SECURITY AND NUTRITION ISSUES
AGRI PROCESSORS INCORPORATED 5600 1ST AVENUE BROOKLYN,NY 11220	22-2885839		8,843				SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS, (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS, AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE- KINDERGARTEN

Form 990,Schedule I, Par	t II, Grants and	Other Assistance	to Domestic Orga	nizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BENZ'S FOOD PRODUCTS INCORPORATED 332 ALBANY AVENUE BROOKLYN,NY 11213	11-2841450		23,555				SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS, (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS, AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE- KINDERGARTEN
DAVID ELLIOT POULTRY FARM 300 BRECK STREET SCRANTON,PA 18505	24-0835679		7,385				SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS, (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS, AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE- KINDERGARTEN
DRISCOLL FOODS 174 DELAWANNA AVENUE CLIFTON,NJ 07014	22-3482240		1,018,747				SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS, (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS, AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE- KINDERGARTEN

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.										
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable			(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance			
SHABBOS FISH MARKET 417 KINGSTON AVENUE BROOKLYN,NY 11225	11-3180901		6,654				SOCIAL SERVICE BLOCK GRANT (SSBG) - THE SSBG TARGETS ADVOCACY WORK FOR EARLY CHILDHOOD EDUCATION (ECE), WHICH SEEKS TO (I) EDUCATE PUBLIC OFFICIALS AT THE FEDERAL, STATE AND LOCAL LEVELS ABOUT THE IMPORTANCE OF ECE AND THEIR SPECIFIC OPPORTUNITIES TO IMPACT CERTAIN PROGRAMS, (II) INFLUENCE NEW YORK STATE TO INCREASE ITS OWN INVESTMENT IN ECE AS WELL AS MATCH FEDERAL ALLOCATIONS, AND, (III) PROMOTE THE RENEWAL AND FLEXIBILITY OF TANF, THE CHILD CARE & DEVELOPMENT BLOCK GRANT AND UNIVERSAL PRE- KINDERGARTEN			
COMMUNITY HEALTH ACTION OF STATEN ISLAND INC 56 BAY STREET STATEN ISLAND,NY 10301	13-3556132	501(C)(3)	25,000				HURRICANE SANDY RECOVERY FUND (HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF HSRF HAS PROVIDED BOTH NEAR AND LONGER TERM ASSISTANCE TO INDIVIDUALS, FAMILIES AND ORGANIZATIONS IMPACTED BY THE HURRICANE			
ROCKAWAY YOUTH TASK FORCE INC 19-20 MOTT AVENUE FAR ROCKAWAY,NY 11691	45-4926515	501(C)(3)	25,000				HURRICANE SANDY RECOVERY FUND (HSRF)-UWNYC SERVED AS THE FUND MANAGER FOR HSRF HSRF HAS PROVIDED BOTH NEAR AND LONGER TERM ASSISTANCE TO INDIVIDUALS, FAMILIES AND ORGANIZATIONS IMPACTED BY THE HURRICANE			

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance			
BRONXWORKS 60 EAST TREMONT AVENUE BRONX,NY 10453	13-3254484	501(C)(3)	197,327				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE A WARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY			
CHINESE-AMERICAN PLANNING COUNCIL INC 150 ELIZABETH ST NEW YORK,NY 10012	13-6202692	501(C)(3)	136,063				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE A WARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY			
COMMUNITY HEALTH ACTION OF STATEN ISLAND INC 56 BAY STREET STATEN ISLAND,NY 10301	13-3556132	501(C)(3)	79,972				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE A WARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY			

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FOOD BANK FOR NEW YORK FOOD CHANGE 39 BROADWAY 10TH FLOOR NEW YORK,NY 10006	13-3036532	501(C)(3)	294,266				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY		
NEW YORK CITY COALITION AGAINST HUNGER 16 BEAVER STREET 3RD FLOOR NEW YORK, NY 10004	13-3471350	501(C)(3)	192,792				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY		
RIDGEWOOD BUSHWICK SENIOR CITIZENS COUNCIL INC 217 WYCKOFF AVENUE BROOKLYN,NY 11237	11-2453853	501(C)(3)	162,176				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE AWARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY		

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(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)		(h) Purpose of grant or assistance			
URBAN UPBOUND 38-81 13TH ST ISLAND CITY,NY 11101	86-1096987	501(C)(3)	75,685				FOOD SUPPORT CONNECT (FSC) FSC FACILITATES AND IMPROVES NYC RESIDENTS' ACCESS TO SNAP BENEFITS BY CONDUCTING GRASSROOTS OUTREACH WITH SPECIALIZED COMPUTER SOFTWARE CREATED BY UNITED WAY OF NEW YORK CITY TO INCREASE A WARENESS, AND WORK WITH INDIVIDUALS TO DETERMINE POTENTIAL ELIGIBILITY			
HOUSING COURTS ANSWERS 125 MAIDEN LANERM 318 NEW YORK,NY 10013	13-3317188	501(C)(3)	30,000				HOUSING COURT ANSWERS CRISIS SUPPORTS - THIS SERVICE IS A RENTAL ARREARS, UTILITY AND MORTGAGE ARREARS HOTLINE THAT PROVIDES CRISIS SUPPORT TO RESIDENTS FROM ALL FIVE BOROUGHS FACING EVICTION DUE TO NONPAYMENT OF RENT, WHO ARE SEEKING RENTAL ASSISTANCE OR WHO HAVE QUESTIONS REGARDING HOUSING COURT			
CAUSE EFFECTIVE 505 EIGHTH AVENUE SUITE 1212 NEW YORK,NY 10018	13-3083978	501(C)(3)	60,000				BOARDSERVENYC- BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC SERVICE, BUILDS THE CAPACITY OF NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD MEMBERS			

Form 990,Schedule I, Pai	rt II, Grants and	Other Assistance	e to Domestic Org	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STATEN ISLAND NFP ASSOCIATION INC 5 TELPORT DRIVE SUITE STATEN ISLAND,NY 10311	20-3560375	501(C)(3)	5,000				BOARDSERVENYC- BOARD RECRUITMENT, TRAINING, AND PLACEMENT PROGRAM, IN PARTNERSHIP WITH NYC SERVICE, BUILDS THE CAPACITY OF NONPROFITS IN NEW YORK CITY BY CONNECTING THEM TO A POOL OF PROSPECTIVE BOARD MEMBERS
ANAT GERSTEININC 108-18 QUEENS BLVD FOREST HILLS,NY 11375	80-0609476		41,000				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TO WARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TO WARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS
COMMUNITY SOLUTIONS 125 MAIDEN LANE NEW YORK, NY 10038	27-3523909	501(C)(3)	225,000				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS

Form 990,Schedule I, Par (a) Name and address of organization	rt II, Grants and	(c) IRC section If applicable	e to Domestic Orga (d) Amount of cash grant		omestic Governme (f) Method of valuation (book, FMV, appraisal,	ents. (g) Description of non-cash assistance	(h) Purpose of grant or assistance
or government		друпсавіс	grant	assistance	other)	53511 45515141166	
CYPRESS HILLS LOCAL DVELOPMENT CORPORATION 625 JAMAICA AVENUE BROOKLYN, NY 11208	11-2683663	501(C)(3)	171,200				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING
FIFTH AVENUE COMMITTEE	11-2475743	501(C)(3)	179,400				MORE EFFECTIVE BUSINESS MODELS CHANGE CAPITAL
294 SMITH STREET BROOKLYN,NY 11231							FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TO WARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TO WARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS
MDRC 16 E 34TH STREET NEW YORK,NY 10016	23-7379473	501(C)(3)	110,000				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TO WARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TO WARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS

Form 990,Schedule I, Pa							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
	14-1719016	1f applicable 501(C)(3)	164,375			non-cash assistance	CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES
NONPROFIT FINANCE FUND 70 WEST 36TH STREET 11TH FLOOR NEW YORK,NY 10018	13-3238657	501(C)(3)	70,000				TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TO WARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TO WARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING
PUBLIC WORKS PARTNERS LCC 220 FIFTH AVE 2ND FL NEW YORK, NY 10001	27-3647604		33,900				AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TOWARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING MORE EFFECTIVE BUSINESS MODELS

Form 990,Schedule I, Par	rt II, Grants and	d Other Assistanc	e to Domestic Org	anizations and D	omestic Governme	ents.	
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant		(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of	(h) Purpose of grant or assistance
ST NICKS ALLIANCE 2 KINGSLAND AVENUE 2ND BROOKLYN,NY 11211	51-0192170	501(C)(3)	172,495				CHANGE CAPITAL FUND - CHANGE CAPITAL FUND THE CHANGE CAPITAL FUND (CCF) IS A COLLABORATION OF 15 PHILANTHROPIC FOUNDATIONS AND FINANCIAL INSTITUTIONS THAT POOL FUNDS TO INVEST IN COMMUNITY DEVELOPMENT EFFORTS ACROSS NEW YORK CITY CCF BEGAN FUNDING COMMUNITY DEVELOPMENT CORPORATIONS TO WARDS THE GOAL OF MORE EFFECTIVELY REDUCING PERSISTENT AND CHRONIC POVERTY EACH PARTICIPATING NONPROFIT ORGANIZATION WILL BE FUNDED OVER FOUR YEARS AND RECEIVE TECHNICAL ASSISTANCE SUPPORT TOWARDS THE GOAL OF BUILDING INTERNAL CAPACITY FOR MULTI-DISCIPLINARY PRACTICES AND IMPROVED OUTCOMES TRACKING SYSTEMS, AND DEVELOPING
MAYORS FUND 253 BROADWAY 6TH FL NEW YORK, NY 10007	13-3783906	501(C)(3)	225,000				MORE EFFECTIVE BUSINESS MODELS EXPANDING NYC SERVICE - EXPANDING NYC SERVICE YEARS PROJECT IS TO IMPLEMENT A MULTI- YEAR PLAN TO DOUBLE CURRENT NUMBERS OF INDIVIDUALS FULFILLING A "SERVICE YEAR" (THE "SERVICE YEAR") IN NEW YORK CITY, WITH CROSS SECTOR COLLABORATION AND INNOVATIVE NEW SERVICE YEAR MODELS TO SUPPORT THIS GROWTH, AS WELL AS CONTINUED ADVOCACY FOR FEDERALLY FUNDED AMERICORPS POSITIONS AND AWARENESS OF SERVICE YEAR IMPACTS IN NYC
CODERO HOSTING 8735 ROSEHILL ROAD LENEXA,KS 66215	27-0214713		13,138				HPNAPHELPS ENSURE THE ACCESSIBILITY AND AVAILABILITY OF SAFE, NUTRITIOUS FOOD IN NYC'S MOST VULNERABLE COMMUNITIES, SUPPORTS COMPREHENSIVE NUTRITION AND HEALTH EDUCATION EFFORTS, MONITORS NEED AND ISSUES RELATED TO FOOD SECURITY, AND PARTNERS WITH OTHER EMERGENCY FOOD PROVIDERS ON FOOD SECURITY AND NUTRITION ISSUES

Schedule J

(Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

DLN: 93493132027067 OMB No 1545-0047

2015

Depai Freas	rtment of the ury			ch to Form 990.) and its instructions is at <u>www.irs.gov/form990</u> .	pen t	o Pul ectio	
	nal Revenue Service						
	me of the organiz ITED WAY OF NEW Y			Employer identificat	ion nui	mber	
В-	Over at	and December Commence		13-2617681			
.6	rt I Questi	ons Regarding Compensation					
1_	Charletha ann	raniata hay(aa) if the arganization prov	idad an	over the fellowing to or for a nerson listed on Form		Yes	No
1 a				ny of the following to or for a person listed on Form ide any relevant information regarding these items			
	First-clas	s or charter travel		Housing allowance or residence for personal use	ļ	ļ	ļ
	Travel for	companions		Payments for business use of personal residence	ļ	ļ	ļ
	Tax idemi	nification and gross-up payments		Health or social club dues or initiation fees	ļ	ļ	
	Discretion	nary spending account	Г	Personal services (e g , maid, chauffeur, chef)		 	
b				on follow a written policy regarding payment or above? If "No," complete Part III to explain	1b		
2	_	·		ing or allowing expenses incurred by all irector, regarding the items checked in line 1a?	2	Yes	
						1	
3	organization's	CEO/Executive Director Check all tha	at apply	used to establish the compensation of the Do not check any boxes for methods the CEO/Executive Director, but explain in Part III			
	✓ Compensa	ation committee	V	Written employment contract			
		ent compensation consultant		Compensation survey or study	İ	İ	
	<u> </u>	of other organizations		Approval by the board or compensation committee	İ		
4	During the year or a related org		art VII	I, Section A, line $1a$ with respect to the filing organization	1		
а	Receive a seve	rance payment or change-of-control p	ayment	t?	4a	Yes	
b	Participate in,	or receive payment from, a supplement	tal nond	qualified retirement plan?	4b		Νo
c		or receive payment from, an equity-ba		-	4c		Νo
	If "Yes" to any	of lines 4a-c, list the persons and pro	vide the	e applicable amounts for each item in Part III			
	Only 501(c)(3)	, 501(c)(4), and 501(c)(29) organizati	ons mu	ist complete lines 5-9.			
5	For persons lis			, did the organization pay or accrue any			
а	The organization	on?			5a		No
b	Any related org	janization?			5b		Νo
	If "Yes," on line	e 5a or 5b, describe in Part III					
6	•	ted on Form 990, Part VII, Section A, contingent on the net earnings of	line 1a	, did the organization pay or accrue any			
а	The organization	on?			6 a		No
b	Any related org	ganization?			6b		Νo
	If "Yes," on line	e 6a or 6b, describe in Part III					
7		ted on Form 990, Part VII, Section A , described in lines 5 and 67 If "Yes," de		, did the organization provide any non-fixed in Part III	7		No
8				occured pursuant to a contract that was tions section 53 4958-4(a)(3)? If "Yes," describe			NI -

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

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

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

(A) Name and Title		(B) Breakdown oʻ	f W-2 and/or 1099-MIS	3C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		Base (1) compensation	(iı) Bonus & ıncentive compensation	(III) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 SHEENA WRIGHT PRESIDENT & CEO	(i)	356,790	0	1,544	7,000	17,413	382,747	0
	(ii)	0	0	0	0	0	0	0
2 SUNITA SUBRAMANIAN GENERAL COUNSEL AND	(i)	195,740	0	532	3,946	4,635	204,853	0
ASST	(ii)	0	0	0	0	0	0	0
LESLEIGH IRISH- 3 UNDERWOOD	(i)	204,082	0	1,288	4,100	4,848	214,318	0
SNR VP OF MARKETING & COMM	(ii)	0	0	0	0	0	0	0
4 NICOLE GALLANT SNR VP OF CI	(i)	194,616	0	819	4,000	3,724	203,159	0
511(1) 6. 22	(ii)	0	0	0	0	0	0	0
5 ELENA PAK SR VP OF RESOURCE DEV	(i)	145,321	0	323	4,200	15,406	165,250	0
(FORMER)	(ii)	0	0	0	0	0	0	0
6 JACQUELINE JENKINS VP OF STRATEGY	(i)	149,035	0	364	3,000	11,696	164,095	0
MANAGEMENT	(ii)	0	0	0	0	0	0	0
7 MIRIAM BENITEZ VP OF HUMAN CAPITAL	(i)	143,808	0	2,599	2,987	9,980	159,374	0
	(ii)	0	0	0	0	0	0	0
8 MINDEE H BARHAM FORMER	(i)	164,455	0	690	3,200	29,005	197,350	0
SEN V P & CHIEF DEV OFFICER	(ii)	0	0	0	0	0	0	0
9 PATRICK MA VP OF OPERATIONS	(i)	141,162	0	296	2,800	30,903	175,161	0
VI 01 01 2	(ii)	0	0	0	0	0	0	0

Schedule J (Form 990) 2015	Page 3					
Part III Supplemental Inform	nation					
Provide the information, explanation, or	Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information					
Return Reference	Explanation Explanation					

Schedule J (Form 990) 2015

Software ID: Software Version:

EIN: 13-2617681

Name: UNITED WAY OF NEW YORK CITY

Form 990, Schedule J,	Part	II - Officers, Direc	tors, Trustees, Ke	ey Employees, and	d Highest Compen	sated Employees	i	
(A) Name and Title		(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in
		(i) Base Compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1SHEENA WRIGHT PRESIDENT & CEO	(1)	356,790	0	1,544	7,000	17,413	382,747	0
	(11)	0	o	0	0	0	_ o	C
1 SUNITA SUBRAMANIAN GENERAL COUNSEL AND	(1)	195,740	0	532	3,946	4,635	204,853	0
ASST	(11)	o	0	0	0	-	-	0
LESLEIGH IRISH- 2UNDERWOOD	(1)	204,082	0	1,288	4,100	4,848	214,318	0
SNR VP OF MARKETING & COMM	(11)	0	0	0	0	-	- 0	0
3NICOLE GALLANT SNR VP OF CI	(1)	194,616	0	819	4,000	3,724	203,159	0
	(11)	0	0	0	0		- 0	0
4ELENA PAK SR VP OF RESOURCE DEV	(1)	145,321	0	323	4,200	15,406	165,250	0
(FORMER)	(11)	0	0	0	0	-	- 0	0
5 JACQUELINE JENKINS VP OF STRATEGY	(1)	149,035	0	364	3,000	11,696	164,095	0
MANAGEMENT	(11)	o	0	0	0	-	-	0
6MIRIAM BENITEZ VP OF HUMAN CAPITAL	(1)	143,808	0	2,599	2,987	9,980	159,374	0
	(11)	0	0	0	0		-	0
7 MINDEE H BARHAM FORMER	(1)	164,455	0	690	3,200	29,005	197,350	0
SEN VP & CHIEF DEV OFFICER	(11)	0	0	0	0		-	0
8PATRICK MA VP OF OPERATIONS	(1)	141,162	0	296	2,800	30,903	175,161	0
	(11)	0	0	0	0	-	-	0
						0	0	

SCHEDULE M

DLN: 93493132027067 OMB No 1545-0047

Employer identification number

2015

Open to Public Inspection

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

Department of the Treasury Internal Revenue Service

Name of the organization UNITED WAY OF NEW YORK CITY

21 Taxidermy 22 Historical artifacts . . . Scientific specimens . . 24 Archeological artifacts . . .

25 Other ▶ (

SPECIAL EVENT ITEMS) **26** Other▶(_____ **27** Other ▶ (___

(Form 990)

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990

13-2617681 Types of Property Part I (b) (d) (a) (c) Check Number of contributions Noncash contribution Method of determining ١f or items contributed amounts reported on noncash contribution amounts applicable Form 990, Part VIII, line 1 g 1 Art—Works of art . . 2 Art—Historical treasures 3 Art-Fractional interests Books and publications Clothing and household goods Cars and other vehicles Boats and planes . . . Intellectual property . . . Securities—Publicly traded . 10 Securities—Closely held stock Securities—Partnership, LLC, or trust interests 12 Securities-Miscellaneous . . 13 Qualified conservation contribution—Historic structures 14 Qualified conservation contribution—Other . . 15 Real estate—Residential . 16 Real estate—Commercial . Real estate—Other . . 18 Collectibles **19** Food inventory . . . 20 Drugs and medical supplies .

28 Other ▶ (_ Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement

Х

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used

for exempt purposes for the entire holding period?	30a		Νo
If "Yes," describe the arrangement in Part II			
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Yes

No

describe in Part II For Paperwork Reduction Act Notice, see the Instructions for Form 990.

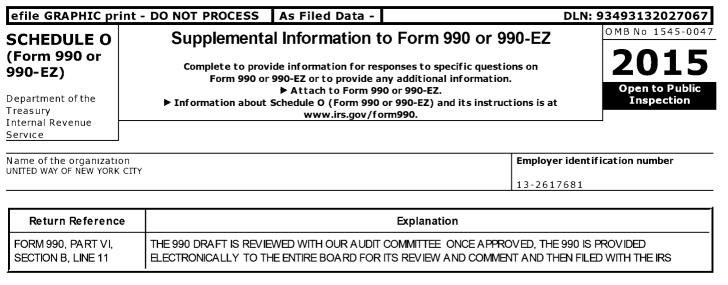
b If "Yes," describe in Part II

for exempt purposes for the entire holding period?

204,800 FMV

29

Schedule M (Form 990) (2015)



Return Reference	Explanation
FORM 990, PART VI.	UWNY C'S BOARD MEMBERS, OFFICERS, SENIOR EXECUTIVES AND CERTAIN OTHER DESIGNATED EMPLOYEES ARE REQUIRED TO COMPLETE CONFLICT OF INTEREST DISCLOSURE STATEMENTS ANNUALLY AND HAVE AN OBLIGATION TO
SECTION B, LINE 12C	UPDATE SUCH STATEMENTS THROUGHOUT THE FISCAL YEAR THE INFORMATION IS REVIEWED BY THE GENERAL COUNSEL AND CATALOGUED RELATED PARTY ISSUES ARE REGULARLY SCRUTINIZED AND ADDRESSED AS PART OF THE GRANTMAKING PROCESS AND VENDOR SELECTION PROCESS THE APPROPRIATE BOARD COMMITTEE REVIEWS THE PROPOSED TRANSACTION, REVIEWS THE RATIONALE AND COMPARABILITY DATA, AND DETERMINES WHETHER TO PROCEED THE ORGANIZATION HAS PROTOCOLS TO BE FOLLOWED BY STAFF IN ORDER TO REVIEW AND ADDRESS CONFLICTS RELATING TO NON-EXECUTIVE STAFF MEMBERS

Return Reference	Explanation
FORM 990,	THE CEO'S COMPENSATION IS RECOMMENDED BY THE COMPENSATION COMMITTEE, APPROVED BY THE EXECUTIVE
PART VI,	COMMITTEE, AND REPORTED TO THE BOARD OF DIRECTORS THE BOARD HAS BEEN ASSISTED BY PROFESSIONAL
SECTION B,	COMPENSATION CONSULTANTS, SULLIVAN AND COTTER S&C GOES OUT TO THE MARKET AND REVIEWS THE
LINE 15	COMPENSATION OF CEOS IN NOT ONLY SIMILARLY SITUATED ORGANIZATIONS, BUT OTHER ORGANIZATIONS TO WHICH
	UWNY'C WOULD LOOK FOR A CEO IF THE NEED AROSE. THIS INFORMATION IS ANALYZED AND THEN GIVEN TO THE
	COMPENSATION COMMITTEE FOR THEIR REVIEW THE COMPENSATION COMMITTEE DETERMINES THE REASONABLENESS OF
	THE CEO'S COMPENSATION BASED ON THIS INFORMATION THE COMPENSATION OF KEY EMPLOYEES IS DETERMINED
	PURSUANT TO COMPENSATION COMMITTEE OVERSIGHT AND APPROVAL IN THE SPRING OF 2014, UNITED WAY OF NEW
	YORK CITY RETAINED THE COMPENSATION CONSULTING FIRM, SIBSON CONSULTING, TO PROVIDE GUIDANCE ON
	EXECUTIVE AND GENERAL STAFF COMPENSATION GOING FORWARD

Return Reference	Explanation
FORM 990, PART VI, SECTION	FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE CONFLICTS OF INTEREST POLICY AND
C, LINE 19	GOVERNING DOCUMENTS ARE PROVIDED UPON REQUEST

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PENSION RELATED CHANGES -1,499,078 PROVISION FOR UNCOLLECIBLE RECEIVABLES -644,912 CHANGE IN PERPETUAL TRUST -46,450

Return Reference	Explanation	
FORM 990, PART XII, LINE 2C	HAS NOT BEEN CHANGED FROM THE PRIOR YEAR	

Return Reference	Explanation
FORM 990,	SOME GRANTS ON SCHEDULE I WERE MADE TO ENTITIES THAT PROVIDE SERVICES TO NONPROFIT ORGANIZATIONS, WHICH
SCHEDULE I,	ARE THE ULTIMATE BENEFICIARIES OF THE PROGRAM THESE ENTITIES ARE ROSALIND KOTZ, SHANE KATHERINE SAFIR,
PART II	AGRI PROCESSORS INCORPORATED, BALTER SALES COMPANY INC , BENZ'S FOOD PRODUCTS INCORPORATED, CODERO'S
	HOSTING, CRANBERRY HALL FARM, CURTIS WARD REFRIGERATION, DAVID ELLIOT POULTRY FARM, DRISCOLL FOODS,
	GOLDER EARTHWORM ORGANIC FARM LLC, HEARTY ROOTS FARM, J GLEBOCKI FARMS, MILK NOT JAILS, RED APPLE
	FRUIT AND VEGETABLES, SHABBOS FISH MARKET, STONELEDGE FARM LLC, THE FARM AT MILLER'S CROSSING, WHISTLE
	DOWN FARM, WINDFLOWER FARM, WENDY FLEISCHER, MICHAEL DAVIDSON, SOUOKEYNA BOYE, ALTERNATIVE GRAPHIC
	CONCEPTS, INC , INFOCUS SOLUTIONS, JEANETTE G NIGRO, ANAT GERSTEIN, INC AND PUBLIC WORKS PARTNERS LLC